



Contact with birth family in adoptive families headed by lesbian, gay male, and heterosexual parents[☆]



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ABSTRACT

In this study, we examined the extent and type of contact with birth family in adoptive families headed by sexual minority and heterosexual parents prior to or at the time of placement, following placement, and currently. Data were drawn from the Modern Adoptive Families project, a nationwide, non-random survey of adoptive parents' beliefs and experiences that was conducted from 2012 to 2013. The current sample consisted of 671 families headed by heterosexual parents, 111 families headed by lesbian parents, and 98 families headed by gay male parents whose oldest adopted child was less than 18 years old and who was placed domestically either from the public child welfare system or from a private agency or independent adoption facilitator. For child welfare adoptions, sexual minority parents reported higher levels of contact and tended to have more positive relationships with birth family compared to heterosexual parents. Fewer differences by family type were found for private agency adoptions. Higher rates of contact and more positive relationships with birth family were found for private domestic placements compared to those from foster care. Secondary analyses suggest that family demographic and adoption placement differences between sexual minority- and heterosexual-parent families do not account for family type differences in contact with birth family. Policy and practice implications are discussed.

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1. Introduction

Interest in adoption by sexual minority adults has grown rapidly over the years, especially as policies, regulations, and laws preventing or discouraging them from adopting and/or getting married have been overturned (Appel, 2012; Howard & Freundlich, 2008; Pertman & Howard, 2012). Current estimates suggest that over 65,000 adopted children are being raised in families headed by sexual minority parents (Gates, Badgett, Macomber, & Chambers, 2007). Moreover, same-sex couples are estimated to be at least four times more likely to be raising an adopted child than heterosexual parents (13% compared to 3%; Gates, 2013).

Like all adoptive families, those headed by sexual minorities require thoughtful and sensitive pre-adoption preparation and education, as well as readily available post-placement support, to ensure that the transition to adoptive parenthood goes smoothly and that healthy family relationships and community connections develop over time (Brodzinsky, 2008). Such supports and services are especially important

for sexual minority-parent families for two reasons. First, when applying to adopt, they often confront negative social stereotypes, misconceptions, and prejudice from the professionals they are working with, from birth family members, and from community members (Brodzinsky, 2011; Kinkler & Goldberg, 2011; Mallon, 2012). Second, although sexual minority adults adopt all types of children and from different adoption sources, they show a higher propensity than heterosexual adults to adopt children from the child welfare system who are racial minority group members and/or have developmental and mental health problems (Brodzinsky, 2011; Brooks & Goldberg, 2001; Gates et al., 2007; Goldberg & Smith, 2009). Consequently, adoptive families headed by sexual minorities are likely to benefit when they work with gay affirmative professionals who are knowledgeable and skillful in supporting parents and children in confronting homophobic stereotypes, facilitating personal resilience, and building strong family and community relationships. Fortunately, significant efforts have been made in recent years to strengthen social casework and clinical practice guidelines for working with adoptive families headed by sexual minorities (Brodzinsky, 2008; Brodzinsky & Pertman, 2012; Goldberg & Gianino, 2012; Human Rights Campaign, 2009; Mallon, 2006, 2012). Yet one critical area that has received little attention is the experiences of these families in establishing and maintaining contact with their adopted children's birth families.

Openness in adoption has become increasingly common over the past several decades, especially for private domestic infant placements.

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Data from the National Survey of Adoptive Parents (NSAP) conducted in 2007–2008 showed that 68% of parents adopting from private domestic agencies had post-adoption contact with one or more members of their children's birth families compared to only 39% who adopted from the child welfare system and 6% who adopted from abroad (Vandivere, Malm, & Radel, 2009). Although NSAP did not code for parental sexual orientation, and, therefore, could not provide comparable data specifically for sexual minority adoptive families, Brodzinsky (2011) reported a similar pattern of contact with birth family for lesbian/gay (LG) parent families in a national, non-random sample. LG parents who completed domestic adoptions through private agencies or attorneys were more likely than those who adopted from the child welfare system or from abroad to report being chosen by birth parents to adopt their child (68.7% v 4.5%), meeting the birth parents prior to adoption (59.7% v 20.2%), having more ongoing contact with birth family members post-placement (52.2% v 20.2%), and being more often involved with birth parents who knew about their sexual orientation (58.2% v 23.5%).

To date, little research has directly compared sexual minority and heterosexual adoptive parents' experiences with openness in adoption. Yet there is reason to believe that sexual minorities may approach adoption from a different vantage point than heterosexual adopters (in that their relationships, and the families they build, lie outside of the heterosexual, biologically related, nuclear family ideal), which could have implications for their perspective on contact and openness with birth families. For example, some work suggests that sexual minority parents place less emphasis on *biological* parenthood *per se* (Goldberg, Downing, & Richardson, 2009) and have more expansive notions of kinship than heterosexual persons, whereby they are more likely to view non-family related persons (e.g., friends) as kin (Oswald, 2002; Weston, 1991). By extension, the notion of incorporating birth family members into their lives, as "extended family" or "kin," may be regarded more positively by sexual minority adopters.

Sexual minority adoptive parents may also encounter less struggle in establishing their own identities as "mother" or "father" because the transition to parenthood is less often connected to the emotional turmoil associated with infertility; in turn, they may also feel less threatened by contact with their child's birth family compared to heterosexual parents (Goldberg & Smith, 2008; Goldberg et al., 2009). Gay male parents may be particularly inclined to incorporate their child's birth mother into their family's life. They likely confront gendered stereotypes suggesting that women are better suited for parenthood than men (Goldberg, 2012), and thus may be motivated to identify female parenting figures who can be involved with the family. In turn, they may feel less competition or threat when there is contact with birth mothers than other adoptive parents, especially when they are purposely chosen by these women as a way of ensuring that there would be no other "mother" in their children's lives (Brodzinsky, 2011; Goldberg, 2012).

Only two studies to date have examined the experiences of openness in adoption in LG adoptive families compared to heterosexual adoptive families. The first was a qualitative, longitudinal study of adoptive families headed by 30 lesbian, 30 gay male, and 30 heterosexual couples that explored parents' attitudes and practices regarding openness across the transition to adoptive parenthood (Goldberg, Kinkler, Richardson, & Downing, 2011). Heterosexual parents often saw open adoption as the only available adoption option, as few agencies were offering closed adoptions. Lesbian/gay parents tended to report more positive feelings about open adoption, in that the philosophy of openness was consistent with their desire to be open about their sexuality during the adoption process and in their lives. Parents' attitudes about openness were more positive when they got along with the birth parents and perceived appropriate boundaries between themselves and the birth family. Attitudes were more negative when they viewed birth parents as overstepping boundaries or as having difficult personal characteristics (e.g., drug use, mental illness). Some parents reported conflicts with birth parents but most had satisfying relationships.

Farr and Goldberg (2015) explored openness and contact arrangements among LG and heterosexual adoptive parents ($n = 103$) 3 months post-adoptive placement and again at 1 year post-placement. They found that most families (93%), regardless of family type, had some type of contact with their children's birth parents, and most reported satisfaction with contact. Although at 3 months post-placement, heterosexual and gay male parent families were somewhat more likely to have contact than lesbian parent families, by 1 year post-placement there were no differences by family type in openness arrangements, with one exception: gay fathers had more contact with birth family by phone in the past year than lesbian mothers or heterosexual parents.

There are several limitations to the existing research comparing contact and openness among sexual minority and heterosexual parents. First, the sample sizes used in both Goldberg et al. (2011) and Farr and Goldberg (2015) were small. Second, although openness was explored in Goldberg et al. (2011), type of contact was not; and, in Farr and Goldberg (2015), although type of contact was addressed, other details surrounding contact and openness (e.g., when it occurred) were not addressed. Third, both studies examined openness and contact in families that completed private domestic adoptions. In fact, opportunities for openness are increasingly present in child welfare and international adoptions (Vandivere et al., 2009), in part because of the move toward openness in adoption, regardless of placement type, and because of increasing possibilities for making contact with birth family via the internet (Howard, 2012). There is much less research, however, regarding the precursors, experiences, and consequences of birth family contact in the context of child welfare and international adoptions (Siegel & Smith, 2012).

The dynamics of adoption openness are quite different in private domestic adoptions compared to public child welfare adoptions.¹ In the former, birth parents very often choose the family that will adopt their child, voluntarily surrender their parental rights, and support the adoption process.² In the latter, children are removed from their birth parents for cause (e.g., neglect, abuse, parental substance abuse and/or emotional problems, exposure to domestic violence), with frequent resistance to terminating their parental rights, as well as antipathy toward those who seek to adopt their children. Furthermore, the match between the adoptive parents and child is usually made by a social worker, not the parents. These differences lead to greater challenges and conflicts for adoptive families seeking to establish and maintain contact with birth family in child welfare adoptions (Neil & Howe, 2004).

In light of the growing number of adoptions by sexual minority parents, including their propensity to adopt from the child welfare system, as well as the growing trend toward openness in all types of adoptions, it is essential that we gather more information about the experiences of families in making and sustaining contact with birth family members. Such information is critical for ensuring that families headed by sexual minority parents receive appropriate adoption preparation and post-placement support, particularly in coping with the stereotypes and prejudice they may face during the adoption process and in developing relationships with birth family.

Toward this end, we examined three major research questions: (a) What is the level and pattern of contact with birth relatives for adoptive families with sexual minority and heterosexual parents prior to or at the time of adoption placement, following placement, and currently?; (b) Are level and patterns of contact with birth family for the different family types similar or different in adoptions from the public child welfare system compared to those from private domestic agencies and

¹ Although openness in intercountry adoption involves different dynamics and challenges compared to domestic private and public adoptions, they are not the focus of the study and, therefore, will not be discussed.

² The notion of voluntary surrender in infant placements has often been challenged by expectant parents who note that inadequate options with regard to counseling and pre-birth support frequently leave them feeling pressured to place their child for adoption (Smith, 2006).

attorneys?; and (c) Collapsing across family type, are level and patterns of contact different for families adopting from public versus private agencies/attorneys? Given the paucity of research on contact with birth relatives among families headed by sexual minorities, the first two questions were considered exploratory in nature and no specific hypotheses were generated for them. Based upon prior work (Vandivere et al., 2009), we hypothesized that families adopting from private domestic sources would have more direct and indirect contact with birth family and more positive relationships with them than those adopting from the public child welfare system.

2. Method

Data were drawn from the Modern Adoptive Families (MAF) project, a nationwide, non-random survey of adoptive parents' beliefs and experiences that was conducted from 2012 to 2013 by the first author in collaboration with the Donaldson Adoption Institute (Brodzinsky, 2015). The MAF project was designed to compare family characteristics, experiences and adjustment outcomes in different types of adoptive families, with particular focus on families headed by sexual minority parents. The final sample included data on 1616 families. Only non-kinship adoptive families (i.e., families who did not adopt a relative) were included in the MAF project; also, stepparent adoptions and second parent adoptions of a partner's biological child were excluded. Details about recruitment and demographic characteristics for the full sample are reported by Brodzinsky (2015).

2.1. Participants

For the current study, only families whose oldest adopted child was less than 18 years of age and that provided information on parent sexual orientation were included. And, because relatively few gay men adopted from another country, making comparisons of international adoption by family type unreliable, data from families whose oldest child was placed from abroad were excluded. Thus, the sample included only families that adopted either from child welfare (i.e., foster care) or via private domestic adoption (i.e., through agencies or attorneys).

The sample consisted of 671 families headed by heterosexual parents (76.3% of the sample), 111 families headed by lesbians (12.6%), and 98 families headed by gay men (11.1%). Respondents ranged in age from 24 to 70 years, with a mean of 42.7 years. For heterosexual-parent families, 91.2% of respondents were female. Nearly 87% of families were headed by two parents, with 87.5% of partnered respondents reporting that they were married. Approximately 88% of parents identified as Caucasian. Eighty-seven percent of respondents in two-parent families reported that their partner was the same race as them. On average, parents were well educated and financially secure, with 78.5% having a college or graduate degree and 54.9% reporting a family income over \$100,000. Families lived throughout the U.S., with a small percentage residing in Canada or elsewhere. Every state, plus the District of Columbia, was represented. The top 10 states of residence for the sample were: CA (16.3%), WA (5.5%), NY (5.4%), PA (5.1%), NJ (4.8%), MA (4.7%), OH (3.9%), OR (3.9%), IL (3.2%), and FL (2.5%).

2.2. Procedure

Participants were recruited through adoption agencies and adoption attorneys across the country, who at our request, sent letters to previous clients describing the nature and purpose of the study (i.e., to examine the unique perceptions, experiences, and needs of different types of adoptive families). Because one of the goals of the MAF project was to compare the experiences of adoptive families headed by sexual minorities with those headed by heterosexual parents, efforts were made to oversample from sources known to work with sexual minority parent families. These agencies and attorneys were identified through prior research in this area (Brodzinsky, 2003, 2011) and by their participation in

the All Children—All Families Initiative sponsored by the Human Rights Campaign (2009).³ Study announcements were also sent to adoptive parent and LGBT parent organizations, posted on LGBT parenting websites, and disseminated by several colleagues who had conducted research with adoptive families.

After receiving the letter from the adoption agency or attorney, or seeing the call for participants elsewhere, parents who were interested in participating contacted the first author by email or telephone. A letter describing the study in more detail was then sent to the parent. The letter indicated three options for participating: responding online through Survey Monkey (hyperlink provided in the letter); receiving and returning the questionnaire through email; or receiving and returning it by postal mail. Over 95% of respondents chose to fill out the questionnaire online. The letter and instructions accompanying the survey emphasized that only one parent per family should fill out the survey.⁴ No compensation was offered for participation. Study procedures were reviewed and approved by the Institutional Review Board of Illinois State University.

2.3. Survey description

The entire MAF survey consisted of 203 questions covering a wide range of topics related to: family composition and child/adult demographics; pre-placement experiences and special needs of children; type and extent of contact with birth family; parents' perception of children's adjustment and family relationships; adoptive parent preparation, education and support; type of services and supports previously utilized and currently needed; parents' racial socialization attitudes and beliefs (for transracial adoptive parents only); parents' sexual orientation socialization attitudes and beliefs (for sexual minority parents only); and the family's experiences with school, mental health, and medical professionals related to adoption.⁵ Most questions required that participants chose only one answer; a few provided the option of choosing more than one answer. Open-ended questions were also included to allow participants to elaborate on some of their responses.

Respondents' sexual orientation was identified from their answers to two questions: (a) whether they self-identified as heterosexual, lesbian, gay, bisexual, or other (e.g., queer, pansexual) and (b) whether they self-identified as a sexual minority (LGBT) parent. Twelve individuals who identified as bisexual and as a sexual minority parent were grouped as either lesbian or gay, according to their gender; five individuals who self-identified as bisexual but not as a sexual minority parent were classified as heterosexual. Four women who self-identified as queer or pansexual also identified as sexual minority parents and, therefore, were classified as lesbian for the purpose of this study. Although we grouped participants in this way for practical concerns (and a desire to utilize data from all available participants), we recognize that such "lumping" of different identities obscures variability within sexual minority parents.⁶

For the current study, the first derived from the MAF dataset, the questions of interest focused on the family's extent and type of contact with the birth family of their *oldest adopted child*. We addressed whether families had contact with one or more of their child's birth relatives prior to or at the time of adoption placement, following placement,

³ <http://www.hrc.org/resources/entry/all-children-all-families-list-of-participating-agencies>

⁴ To ensure that data from only one parent per family was included in the MAF dataset, we examined family and oldest child demographic characteristics from responses that were received within close temporal proximity to one another. For the entire dataset, three cases were identified and eliminated because information on the same child was received from both parents; in these cases, data from the first submission was kept and the second deleted.

⁵ For a more complete description of these topics, see Brodzinsky (2015). A copy of the questionnaire is available from the first author.

⁶ No differences in findings were noted when we eliminated the 17 individuals who identified as bisexual and the four individuals who identified as queer or pansexual from the analyses reported below.

Table 1
Respondents' demographics by family type.

| | Heterosexual (M, SD, or %) | Lesbian (M, SD, or %) | Gay (M, SD or %) |
|--|-------------------------------|--------------------------|----------------------|
| Respondent's age (years) | 42.79 (7.50) | 41.74 (7.00) | 42.97 (6.91) |
| Respondent's race Caucasian | 94.6% | 94.5% | 89.8% |
| Partner different race* | 8.1% ^a | 21.6% ^b | 38.1% ^c |
| Partnered | 86.8% | 87.4% | 85.7% |
| Married* | 86.1% ^a | 40.5% ^b | 54.1% ^c |
| Length of time partnered/married (years)* | 14.25 ^a | 11.94 ^b | 13.03 ^{a,b} |
| Respondent college graduate* | 75.3% ^a | 87.4% ^b | 90.8% ^b |
| Household income >\$150,000* | 19.7% ^a | 19.1% ^a | 63.9% ^b |

Values with the same letter are not statistically different.

* $p = 0.05$ to 0.0001 .

and/or currently. We also gathered data on the nature of the contact (e.g., face-to-face or indirect via one or more means), frequency of contact, and the quality of relationship with birth family. For families that had no contact with their child's birth family, information was collected on their intent to make contact in the future and concerns about contact related to past or current birth family circumstances.

2.4. Analysis plan

To address the study aims, descriptive analyses were first conducted for all relevant demographic variables as a function of family type. To assess whether level of contact and contact dynamics varied as a function of family type and adoption type, Chi-square tests, ANOVAs or t-tests were performed, depending on whether the outcome variables were continuous or categorical. Given the inherent differences between private domestic adoptions and those from the child welfare system, comparisons of contact with birth family as a function of parental sexual orientation (i.e., family type) were conducted separately for these two types of adoption. In addition, the relationships between demographic and placement factors and patterns of contact were examined to determine their potential impact on other findings.

3. Results

In the sections that follow we present: (a) demographic characteristics by family type; (b) contact with birth family prior to or at the time of placement, following placement, and currently, by family type (heterosexual, lesbian, gay male households) and adoption type (public child welfare placement, private domestic placement); and (c) search intent

and concerns about contact for adoptive families not in current contact with birth family.

3.1. Demographic characteristics by family type

Table 1 provides demographic information for respondents as a function of family type.

No differences were found in respondents' age, race, or partnership status as a function of family type. Heterosexual parents were more likely to be married (86.1%) than either lesbian (40.5%) or gay male parents (54.1%), and gay men were more likely to be married than lesbians, $X^2(2) = 142.92, p = 0.0001$. Heterosexual respondents also reported having been partnered or married longer ($M = 14.25$ years) than lesbian parents ($M = 11.94$ years) but not gay male parents ($M = 13.03$ years), $F(2,759) = 5.29, p = .005$; no difference was found in relationship length for same-sex couples. Fewer interracial relationships were found for heterosexual couples (8.1%) than for either lesbian (21.6%) or gay male couples (38.1%); in turn, gay men were more likely to have a partner of a different race than lesbians, $X^2(2) = 65.76, p = .0001$. Sexual minority respondents were also more likely to be college graduates (L = 87.4%; G = 90.8%) than heterosexual respondents (75.3%), $X^2(2) = 18.09, p = .0001$, and gay-parent families (63.9%) were significantly more financially secure (household incomes of \$150,000 or greater) than either lesbian- (19.1%) or heterosexual-parent (19.7%) families, $X^2(2) = 91.46, p = .0001$.

Table 2 presents demographics for family structure and the oldest adopted child as a function of family type. Heterosexual-parent families had a greater number of children ($M = 2.34$) than either lesbian ($M = 1.85$) or gay male families ($M = 1.61$), $F(2, 877) = 11.86, p < 0.001$, and were more likely to have a biological child (32.9%) than either sexual minority group (L = 13.5%; G = 0%), $X^2(2) = 58.72, p = 0.0001$. In turn, lesbians were more likely to be raising a biological child than gay men. On average, the number of adopted children in the three groups was the same. Gay men (68.4%) were more likely to adopt boys than either lesbians (46.8%) or heterosexual adults (53.5%), with no difference in gender distribution for the oldest adopted child for the latter two groups, $X^2(2) = 10.67, p = 0.005$. The oldest adopted child was also more likely to be Caucasian in heterosexual-parent families (46.2%) than in lesbian- or gay-parent families (L = 34.2%; G = 27.6%), with no difference in child race between the latter two groups, $X^2(2) = 15.81, p = 0.001$. Furthermore, lesbians (56.8%) were more likely to adopt a child who was of a different race from both parents than heterosexuals (41.6%), $X^2(2) = 10.75, p = 0.005$. Although there was a trend for gay men (51%) to adopt transracially more often than heterosexual parents, the difference between groups was not significant ($p = 0.08$). No differences were found by family type in child's age at placement,

Table 2
Family structure and oldest adopted child (OAC) demographics by family type.

| | Heterosexual (M, SD, or %) | Lesbian (M, SD, or %) | Gay (M, SD, or %) |
|----------------------------------|----------------------------|--------------------------|--------------------------|
| Number of children* | 2.34 (1.76) ^a | 1.85 (1.12) ^b | 1.61 (0.82) ^b |
| Number of adopted children | 1.65 (1.03) | 1.55 (0.87) | 1.60 (0.82) |
| Presence of biological children* | 32.9% ^a | 13.5% ^b | 0.0% ^c |
| OAC's age (years) | 7.48 (4.80) | 7.47 (4.63) | 7.10 (4.16) |
| OAC male* | 53.5% ^a | 46.8% ^a | 68.4% ^b |
| OAC Caucasian* | 46.2% ^a | 34.2% ^b | 27.6% ^b |
| OAC transracial placement* | 41.6% ^a | 56.8% ^b | 51.0% ^{a,b} |
| OAC age at placement (years) | 1.78 (2.98) | 2.23 (3.30) | 1.89 (2.64) |
| OAC time in family (years) | 5.75 (4.10) | 5.34 (3.78) | 5.23 (3.23) |
| OAC placement type | | | |
| Public Child Welfare Agency | 47.2% | 55.0% | 55.1% |
| Private Domestic Agency | 52.8% | 45.0% | 44.9% |

Values with the same letter are not statistically different.

* $p = 0.05$ to 0.0001 .

length of time living with the family, or the percentage of children placed via public child welfare versus private domestic agencies.

3.2. Contact with birth family prior to or at the time of adoption placement

Respondents were asked whether they had contact with one or more birth relatives prior to or at the time of adoption placement. No family type differences were found for contact with birth family prior to or at the time of placement for either child welfare adoptions (H = 52.7%; L = 44.3%; G = 44.8%) or private domestic adoptions (H = 83.3%; L = 76%; G = 81.8%). Collapsing across family type, families adopting from private agencies were significantly more likely to have contact with birth family than families adopting from public child welfare agencies (82.9% v 50.7%), $X^2(1) = 107.40, p = 0.000$.

3.3. Contact with birth family following adoption placement

Respondents were asked whether they have had contact with one or more members of their oldest adopted child's birth family following adoption placement. For child welfare adoptions, gay men (87%) reported having more post-placement contact with one or more members of the birth family compared to either heterosexual parents (78%) or lesbians (67.2%), with no difference between the latter two groups, $X^2(2) = 6.30, p = 0.05$. For private agency adoptions, no differences emerged in the extent of post-placement contact among heterosexual (84.7%), lesbian (78%) and gay male parents (90.9%). Collapsing across family type, families adopting from private agencies (84.8%) were more likely to have post-placement contact with one or more members of their oldest child's birth family than those adopting via child welfare (74.6%), $X^2(1) = 14.87, p = 0.000$.

Respondents were asked whether they had various types of contact with one or more members of their oldest child's birth family after the adoption placement. Table 3 presents the percentage of different types of contact as a function of family type and adoption type.

For families adopting through the public child welfare system, there was more face to face contact by gay men (75.9%) than by either heterosexual (60.9%) or lesbian parents (54.1%), $X^2(2) = 6.21, p = 0.05$, and more contact by telephone for gay male parents (74.1%) than for heterosexual (50.2%) or lesbian parents (41%), $X^2(2) = 13.93, p = 0.001$. There was also a tendency for gay men (33.3%) to more often communicate with birth family through texting than heterosexual parents (19.9%), although the difference was not statistically significant ($p = 0.08$). In contrast, heterosexual parents were more likely to have contact with birth

family through an intermediary (15.5%) than gay men (3.7%), with lesbians in between (8.2%) but not different from the other groups, $X^2(2) = 7.08, p = 0.03$. There were no family type differences for other forms of contact with birth family for those adopting through the child welfare system. Furthermore, no family type differences were found for different forms of contact with birth family for individuals adopting through private agencies, although there was a non-significant trend ($p = 0.10$) for heterosexuals (60.7%) to have less face-to-face contact than either lesbians (72%) or gay men (72.7%). There was also a non-significant trend ($p = 0.07$) for heterosexuals (45.2%) and lesbians (42%) to have more contact by postal mail than gay men (27.3%).

There were no differences between families adopting from the child welfare system compared to those adopting from private agencies in terms of face-to-face contact (61.6% v 62.5%), telephone contact (52% v 53.5%) or "other" types of contact (3.8% v 4.7%). In contrast, those adopting from private agencies were more likely than those adopting from public agencies to have contact by email [58.5% v 33.7%; $X^2(1) = 56.34, p = 0.000$], postal mail [42.4% v 19.4%; $X^2(1) = 56.30, p = 0.000$], text messaging [44.5% v 22.5%; $X^2(1) = 49.46, p = 0.000$], social media [41.5% v 21.4%; $X^2(1) = 42.73, p = 0.000$], and intermediaries [23.6% v 12.9%; $X^2(1) = 17.17, p = 0.000$].

Respondents were also asked whether contact with one or more birth family members had ended following the adoption placement of their oldest child. No group differences were found between families headed by heterosexuals, lesbians, or gay men for public (H = 29.2%; L = 19.5%; G = 27.7%) or private agency adoptions (H = 12.6%; L = 10.3%; G = 10%). In contrast, collapsing across family type, those who adopted from the public child welfare system (26.9%) were more likely to have contact end with one or more birth family members than those who adopted from private agencies (13.1%), $X^2(1) = 22.22, p = 0.000$.

3.4. Current contact with birth family

Respondents were asked whether they were currently in contact with one or more members of their child's birth family, as well as about the frequency of indirect and direct contact and the quality of relationship with birth family. Indirect contact referred to non face-to-face communication or interactions through telephone, email, texting, social media, postal mail, and/or an intermediary. Direct contact referred to face-to-face interactions or visits. Frequency of contact was measured on a 4-point Likert scale (1 = none; 2 = once a year or less often; 3 = a few times per year; 4 = once a month or more often). Quality of relationship with birth family was measured on a 5-point Likert scale (1 = very poor to 5 = excellent). For those families currently in contact with birth family, respondents were asked whether it also involved their child. Table 4 provides information on current contact by family type and adoption type.

For families adopting through the child welfare system, those headed by gay men (74.1%) were more likely to have current contact with birth family than those headed by heterosexuals (55.2%) or lesbians (55.7%), $X^2(2) = 6.83, p = 0.05$. There were no family type differences in frequency of indirect or direct contact, or in child involvement in contact, for families adopting from public agencies. Although not statistically significant, there was a trend for gay men to report having a better relationship with birth family than lesbian parents, $F(2, 247) = 2.57, p = 0.08$. For families adopting through private domestic agencies, no differences were noted between heterosexual and sexual minority parents in extent of current contact or frequency of indirect contact. In contrast, lesbian parents reported more direct, face-to-face contact with birth family than heterosexual parents but not gay male parents, $F(2, 445) = 3.20, p = 0.05$; there was also a trend for lesbian parents to report having better relationships with birth family than heterosexual parents, although the difference was not statistically significant, $F(2, 331) = 2.55, p = 0.08$. No family type differences were noted in children's involvement in current contact with birth family.

Table 3

Types of post-placement contact as a function of family type and adoption type.

| | Heterosexual | Lesbian | Gay |
|--------------------------------------|--------------------|--------------------|--------------------|
| <i>Public child welfare adoption</i> | | | |
| Face-to-face* | 60.9% ^a | 54.1% ^a | 75.9% ^b |
| Telephone* | 50.2% ^a | 41.0% ^a | 74.1% ^b |
| Email | 33.4% | 29.5% | 44.4% |
| Postal mail** | 21.5% | 19.7% | 9.3% |
| Texting | 19.9% | 23.0% | 33.3% |
| Social media | 22.7% | 14.8% | 22.2% |
| Intermediary* | 15.5% ^a | 8.2% ^{ab} | 3.7% ^b |
| Other | 2.8% | 3.3% | 3.7% |
| <i>Private domestic adoption</i> | | | |
| Face-to-face** | 60.7% | 72.0% | 72.7% |
| Telephone | 54.0% | 56.0% | 52.3% |
| Email | 57.3% | 68.0% | 63.6% |
| Postal mail** | 45.2% | 42.0% | 27.3% |
| Texting | 44.1% | 46.0% | 47.7% |
| Social media | 41.5% | 52.0% | 36.4% |
| Intermediary | 25.1% | 18.0% | 20.5% |
| Other | 5.4% | 2.0% | 4.5% |

Values with the same letter are not statistically different.

* $p = 0.05$ to 0.0001 .

** $p = 0.06$ to 0.10 .

Table 4
Current contact with birth family as a function of family type and adoption type.

| | Heterosexual (mean, SD, or %) | Lesbian (mean, SD, or %) | Gay (mean, SD, or %) |
|--------------------------------------|-------------------------------|--------------------------|----------------------------|
| <i>Public child welfare adoption</i> | | | |
| % contact | 55.2 ^a | 55.7 ^a | 74.1 ^b |
| Frequency indirect contact | 2.16 (1.21) | 2.15 (1.14) | 2.39 (1.05) |
| Frequency direct contact | 1.76 (0.97) | 1.70 (0.86) | 1.96 (0.77) |
| Quality of relationship** | 3.73 (0.75) | 3.65 (0.92) | 4.00 (0.60) |
| Child involved in contact | 82.1% | 87.5% | 95.0% |
| <i>Private domestic adoption</i> | | | |
| % contact | 74.3% | 70.0% | 84.1% |
| Frequency of indirect contact | 2.74 (1.23) | 2.82 (1.24) | 2.98 (1.09) |
| Frequency of direct contact* | 1.80 (0.90) ^a | 2.14 (1.11) ^b | 1.98 (0.88) ^{a,b} |
| Quality of relationship** | 4.05 (0.84) | 4.38 (0.60) | 4.11 (0.66) |
| Child involved in contact | 75.9% | 85.7% | 74.3% |

Values with the same letter are not statistically different.

* $p < 0.05$.

** $p = 0.06$ to 0.10 .

Finally, collapsing across family type, respondents who adopted from private agencies (74.5%) were more likely to report current contact with birth family than those who adopted from the child welfare system (58%), $X^2(1) = 27.86, p = 0.000$. They also reported more indirect contact ($M = 2.76$ v 2.20 ; $t(913) = 7.06, p = 0.000$), but not more direct contact ($M = 1.85$ v 1.79 , ns), as well as a better relationship with birth family than those whose children came from public adoption agencies ($M = 4.09$ v 3.76 , $t(604) = 5.07, p = 0.000$. On the other hand, families who adopted via private agencies were less likely to include their child in current contact (79.8%) than those who adopted via child welfare (84.7%), $X^2(1) = 6.63, p = 0.01$.

3.5. Follow-up analyses: demographic and placement factors related to birth family contact

Given that families headed by heterosexual and sexual minority parents differed along various demographic and placement characteristics, additional analyses were conducted to determine the impact of these characteristics on patterns of contact with birth family at the three time periods studied. Specifically, these analyses were performed to determine whether they might account for any of the differences observed across family structures (lesbian, gay male, heterosexual).

Contact prior to or at the time of placement was significantly related to the target child's current age, age at placement, transracial status, and parents' partnered status, but not to the length of time the child had lived in the family, child's gender, respondent's age and education, length of parents' partnership/marriage, household income and whether the family was raising a child who was biologically related to one of the parents. Families whose children currently were younger ($M = 6.9$ years) more often had contact with birth family prior to or at the time of placement than those with older children ($M = 8.4$ years), $t(913) = 4.77, p = 0.000$. Families whose children were placed at a younger age ($M = 1.4$ years) also had more contact with birth family than those whose children were older at adoption placement ($M = 2.7$ years), $t(913) = 6.25, p = 0.000$. Families that adopted transracially (39.3%), however, had less contact with birth family prior to or at the time of placement than those whose children were the same race as them (56%), $X^2(1) = 23.31, p = 0.000$. So too did single-parent families (83.6%) compared to two-parent families (88.8%), $X^2(1) = 3.78, p = 0.05$.

Contact following placement was unrelated to all the demographic and placement variables noted above except for the target child's transracial status. Families whose oldest adopted child was placed transracially (42.5%) reported less contact with birth family members than those whose child was the same race as them (54.1%), $X^2(1) = 8.02, p = 0.005$.

Current contact with birth family was significantly related to the target child's current age, years living in the family, and transracial status,

as well as parent's age, but not to child's placement age, gender, parent's partner status, partnership/marriage length, respondent's educational level, household income, and whether the family was raising a child who was biologically related to one of the parents. Families whose target child was younger ($M = 7.0$ years) reported having a higher rate of current contact with birth family than those with older children ($M = 8.1$ years), $t(913) = 3.38, p = 0.001$, and those whose children had lived fewer years with the family ($M = 5.3$ years) also reported more current contact with birth family than those whose children had been with the family longer ($M = 6.1$ years), $t(912) = 2.72, p = 0.007$. In addition, families adopting in-racially (70.5%) reported more current contact than those adopting across racial lines (61.5%), $X^2(1) = 8.28, p = 0.004$, and respondents who were younger ($M = 41.9$ years) reported more birth family contact than those who were older ($M = 43.6$ years).

To summarize: Single-parent families reported less birth family contact than two-parent families; however, sexual minority and heterosexual parent families did not differ in parent partnership status. Further, although transracial adopters reported less contact with birth family than in-racial adopters, lesbian (and to some extent gay male) parents reported a higher rate of transracial adoption in relation to the target child. In addition, for those other factors that were significantly related to contact with birth family (e.g., current age of child, age at placement, years living in the family, respondent's age), none were associated with parental sexual orientation. In short, findings related to family, child, and placement demographics are unlikely to account for family type differences reported for contact with birth family.

3.6. Families with no contact: search plans and concerns about contact

Families that did not have current contact with birth family ($n = 307$) were asked about their intent to seek contact in the future. Most families were unsure about seeking future contact (47.3%) or stated that they would not (27.9%); however, nearly a quarter of the families (24.8%) indicated that they intended make future contact with birth family. There were no differences in intent to seek future contact with birth family as a function of parents' sexual orientation. On the other hand, parents who adopted from a private agency (55.7%) were significantly more likely than those who adopted from the child welfare system (25.8%) to indicate that they planned to search for birth family in the future, $X^2(2) = 39.96, p = 0.000$; in contrast, the latter group was more inclined than the former group to indicate no intent (27.1% v 9.5%) or to be unsure about their future search plans (47.2% v 34.8%) in relation to their child's birth family.

Respondents were asked whether they had concerns about contact related to the circumstances surrounding the adoption or because of known birth family characteristics. No differences by family type were found regarding indications of concern about birth family for parents

who adopted from the child welfare system ($H = 82.1\%$; $L = 78.4\%$; $G = 75.9\%$) and for those who adopted from private agencies ($H = 29.4\%$; $L = 18.8\%$; $G = 9.1\%$). On the other hand, collapsing across family type, parents who adopted from the child welfare system (80.6%) were significantly more concerned about contact than those who adopted privately (26.4%) because of birth family circumstances surrounding the adoption or known birth family characteristics, $\chi^2(1) = 123.16$, $p = 0.000$.

Finally, respondents were asked whether they had concerns about contact with birth family because of possible negative consequences to their own family. No differences were found as a function of parents' sexual orientation for families adopting from the child welfare system ($H = 74.1\%$; $L = 65.8\%$; $G = 60\%$) and those adopting through private agencies ($H = 24.4\%$; $L = 12.5\%$; $G = 27.3\%$). However, concern about potential negative impact on the adoptive family resulting from contact with birth family was significantly greater for those individuals who adopted from the child welfare system (70.9%) compared to those who adopted from private agencies (23.8%), $\chi^2(1) = 90.67$, $p = 0.000$.

4. Discussion

The current study builds upon existing research on patterns of contact across different types of adoptions (Vandivere et al., 2009), as well as research comparing contact experiences across sexual minority- and heterosexual-parent families (Farr & Goldberg, 2015; Goldberg et al., 2011). Regardless of family type, we found a high level of contact between families adopting domestically from private agencies or independent facilitators and their children's birth families, not only prior to or at the time of placement, but following placement, and in their current lives. Although this finding is consistent with prior work (Henney, McRoy, Ayers-Lopez, & Grotevant, 2003; Vandivere et al., 2009), our data suggest a higher rate of contact (84.8% following placement; 74.5% currently) than was reported in the National Survey of Adoptive Parents (68%; Vandivere et al., 2009). This difference could reflect a growing trend in openness associated with private agency and independent adoptions over the 6–7 year period that separates the studies. It could also reflect differences in survey questions, how respondents interpreted contact, or sampling differences in the two studies and, in particular, the oversampling of LG families in the MAF project.

Importantly, collapsing across family type, a moderately high level of contact between adoptive and birth families was also found for placements from the foster care system (79.8% following adoption placement; 58% currently) but at a rate substantially higher than was found in the National Survey of Adoptive Parents (39%) (Vandivere et al., 2009). The data also suggest that most families adopting from foster care report that their current relationship with birth family members is reasonably positive, and, in the vast majority of cases, the child is involved in the current contact plan. These findings are somewhat surprising given the greater challenges posed by child welfare adoptions related to adverse circumstances surrounding the removal of the child from the birth family and known birth parent characteristics (Neil & Howe, 2004). As our data indicate, a sizable percentage of families have concerns about contact with birth family because of their history and its potential impact on their own family. Once again, changes in adoption policies and practices over time and/or differences in survey questions and respondent sampling between the current study and the NSAP survey could account for the different findings. Overall, these findings are consistent with previous research suggesting a growing move toward openness in all types of adoptions (Siegel & Smith, 2012; Vandivere et al., 2009), as well as general satisfaction among adoptive parents with birth parent contact (Siegel & Smith, 2012).

On the other hand, parents who adopted from the child welfare system reported less contact and less positive current relationships with birth family members, as well as less inclination to search for birth family in the future and more concerns about contact, than those adopting domestically from private agencies and independent adoption

professionals. These findings are consistent with previous research (Vandivere et al., 2009) and reflect the different pathways and reasons for adoption in child welfare placements compared to private agency and independent practitioner placements. Whereas in private adoptions, children are generally voluntarily placed by birth parents, often with families chosen by them, in child welfare adoptions, children are typically involuntarily removed from birth parents and placed in a confidential foster or foster-to-adopt family. Birth parents and other birth family members in the latter situations are often opposed to adoption of their children, which can undermine their ability to develop collaborative and cooperative relationships with the adoptive family chosen by the child welfare agency. Also, the type of birth parent problems associated with child removal (e.g., substance abuse, emotional problems, child neglect or abuse, domestic violence, homelessness) often make it difficult for adoptive parents to feel comfortable in initiating or maintaining contact with birth family members (Goldberg, Moyer, Kinkler, & Richardson, 2012; Neil & Howe, 2004). Despite these complications, the current study suggests a more hopeful picture for post-placement contact arrangements among adoptive and birth families in child welfare adoptions than is commonly assumed. However, it also raises questions about how best to help adoptive and birth families navigate the complexities of post-adoption contact, especially in child welfare placements (and, in particular, in situations where birth family members allegedly abused or neglected the child) — an issue that warrants more research and professional consideration.

Somewhat surprisingly, for certain types of contact, lesbian and/or gay male parents reported higher levels of contact and tended to have more positive relationships with birth family compared to heterosexual parents (and sometimes each other). For example, although no family type differences were found in extent of contact with birth family prior to or at the time of placement, gay men who adopted from the child welfare system were more likely to have contact with one or more members of the birth family following placement, as well as in their current lives, than either heterosexual or lesbian parents. They were also more likely to have face-to-face and telephone contact with birth family members, and reported a greater tendency to stay in touch through texting, than parents from other family types. Heterosexual parents, in contrast, were more likely to utilize intermediaries than gay men to communicate with birth family in child welfare adoptions. Gay male parents also reported a tendency for more positive relationships with birth family than lesbian parents, with heterosexual parents in between the other groups. These findings echo and extend Goldberg et al.'s (2011) findings, which suggested that LG parents may approach contact with birth parents with less hesitation than heterosexual parents; and, Farr and Goldberg's (2015) finding that, in the initial post-placement stage, LG parents reported more contact with birth families than heterosexual parents.

Although there were few differences in contact by family type for those adopting via private domestic agencies, some notable differences did emerge. There was a tendency for LG parents to have more face-to-face contact with birth family members following placement than heterosexual parents (see also Farr & Goldberg, 2015). Also, lesbian parents reported more face-to-face contact with birth families in their current lives, as well as a tendency for more positive relationships with them, compared to heterosexual parents.

Taken together, the patterns of contact with birth family found in this study suggest that sexual minority parents make a considerable effort to develop and maintain contact with their children's birth family, sometimes to a greater extent than their heterosexual counterparts. If replicated by other studies, this finding could suggest that sexual minority parents either find it easier to be more open to non-biological and extra-familial relationships than heterosexual parents (Goldberg et al., 2009; Oswald, 2002; Weston, 1991), and/or more easily recognize the benefit of these relationships for their children. Alternatively, sexual minority parents may value openness in adoption as an extension of their desire to be transparent and open in other areas of their lives,

particularly with regard to their sexual orientation and identity (Goldberg et al., 2011).

Not all patterns of contact, however, were more common among sexual minority parents. For example, gay men adopting from child welfare were less likely than heterosexual parents to report using an intermediary (e.g., adoption agency) as a means of developing or maintaining contact with birth family following adoption placement. This finding, in conjunction with the results reported above (i.e., greater overall contact, and more face-to-face and telephone contact) suggests that gay men compared to heterosexual parents may place greater value on contact plans that support relationship development with birth family as opposed to those that simply promote the indirect exchange of information about the child and/or family.

Because of demographic and placement differences found for heterosexual and sexual minority parent families and their children, it is appropriate to consider the possibility that these factors influenced the current findings regarding family type differences in contact with birth family. However, analyses of the relationship between these factors and contact do not support this hypothesis. For those factors in which family type differences were found (e.g., partnership status, length of partnership, respondent education, household income, number of children, presence of a child biologically related to one of the parents, child gender, and transracial adoption status of target child), only respondent's partnership status and the target child's transracial adoption status were significantly related to contact at one or more of the time periods studied. Families headed by single parents reported less contact with birth family prior to or at the time of placement than families headed by two parents; however, sexual minority- and heterosexual-headed households did not differ in parents' partnership status. Furthermore, although transracial adoptive parents reported less contact with birth family at all three time periods than parents who had adopted in-racially, lesbian parents (and to some extent gay male parents) reported a higher rate of transracial adoption in relation to their target child. In addition, for those other factors that were significantly related to contact with birth family at one of more periods of time (e.g., child's current age, age at placement, years living in the family, respondent's age), none were found to be associated with parental sexual orientation. In short, findings related to family, child, and placement demographics are unlikely to account for family type differences reported for contact with birth family.

4.1. Implications

Given the extent of contact between adoptive and birth families, not only prior to or at the time of placement, but following placement and currently, it is critical that adoption agencies and others facilitating placements ensure that appropriate education and preparation for adoption openness be an inherent part of the placement process and that referrals to post-adoption service providers be available for all families. Preparation for adoption openness cannot be adequately completed during the adoption placement process. Given that openness waxes and wanes over time, in keeping with the emerging needs of all members of the adoption kinship system (Grotevant & McRoy, 1998; Siegel & Smith, 2012), families must have readily available resources throughout the family lifecycle to help them navigate the complexities and challenges inherent in open adoption. For some families that means helping them create openness in an adoption arrangement that began as a closed, confidential one. In other cases, it means helping families figure out a more workable contact plan when their current one is not meeting the needs of one or more members of the adoptive kinship system. In still other cases, it means helping the adoptive family when birth family members act inappropriately during contact or unexpectedly cut off contact (Neil & Howe, 2004); and, it also means helping birth family members cope with their disappointment and grief when the adoptive family fails to live up to the promises made during the open adoption negotiations, or simply cuts off contact (Brodzinsky & Smith, 2014).

Finally, one of the unique aspects of working with sexual minority adoptive families who have contact with their children's birth families is helping them (including their children) and birth family members, manage the "narrative burden" associated with the adoptive parents' sexual orientation (Ballard, 2013). Being comfortable with sharing this type of personal information, being aware of the people with whom it is safe to share, and respecting and negotiating differences in how sexual minority adoptive parents and birth family members view these issues is a critical area of open adoption family life that often benefits from professional input. Unfortunately, to date, there have been few efforts made to explore effective models of post-adoption intervention for the creation and sustaining of healthy open adoption relationships between adoptive and birth families.

Our findings also suggest that agencies and other placement professionals need to be better informed about the strengths of sexual minority prospective adoptive parents, especially given their desire to develop and maintain contact with birth families. Most adoption professionals recognize the benefits of open adoption for adoptive kinship members and are interested in finding families that are motivated to support children's contact with their biological heritage. Public child welfare agencies, in particular, should be encouraged to reach out to the LGBT community as a valuable resource for foster children waiting for adoptive homes, as there is promise that its members may not only provide love, nurturance, and permanency, but also support children's connections with their birth families and heritage.

Birth parents who choose adoptive families for their children, which is typically the case in private agency and independent placements, should also be informed by adoption professionals that LG parents are often interested in open adoption arrangements and are supportive of ongoing contact between their family and the birth family. Such knowledge may help birth parents by expanding the range of families they consider for their child.

4.2. Study limitations

Although the sample size was relatively large, it cannot be considered representative of all adoptive families, including those headed by sexual minority parents. The MAF project, from which this sample was derived, was a national, but non-random, survey. Respondents were predominately Caucasian, well-educated, and financially secure. Gates and Newport (2012), however, report that many sexual minority parents are also racial minorities and often are less secure financially than heterosexual-parent families. Future research will need to determine whether the results of the study generalize to a more representative sample of adoptive families, including those headed by sexual minority parents. Our study also did not include families that adopted from abroad. Although included in the MAF dataset, the number of gay men who adopted from other countries was too small to allow for reliable comparisons with lesbian- and heterosexual-parent families; thus, we made the decision not to include intercountry adoptions in this study. Our findings also rely on self-report data and could reflect efforts by some respondents to portray themselves in a positive light by overstating the level of contact with birth family. In addition, our findings reflect the views of only one parent in the family; respondents' partners or their children could have a different view of contact with birth family. Heterosexual respondents were also predominately female which could also influence the way they view openness since they are often the gatekeepers to contact with birth family. Our methodology was also insufficient to provide information on (a) participants' decision-making process in developing and/or sustaining contact with birth family, (b) who initiates contact (e.g., adoptive parents, birth parents, older adopted children) and (c) how this process changes over time, including patterns of contact with different birth family members. The dynamics of openness in adoption can be extremely complicated, with contact waxing and waning over time, influenced by a myriad of factors. Although the current study examined contact at different time

periods in the adoption process, we were unable to capture the true complexity of openness in adoption with our survey questions. Finally, it is clear that families headed by heterosexual and sexual minority parents differed in terms of many family, respondent, child, and placement characteristics. Although secondary analyses found little evidence that these factors accounted for family type differences in contact, it is possible that other family or adoption-related characteristics not measured in this study could be influencing the contact patterns reported.

4.3. Conclusions

This study extends our knowledge about contact between adoptive and birth families in both private agency and child welfare adoptive placements. It also adds to the growing literature on adoption by sexual minority parents and reinforces the belief that non-heterosexual adults can be valuable parenting resources for all children, especially those vulnerable children who are freed for adoption, but continue to linger in foster care (Brodzinsky & Pertman, 2012).

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