Lori A. Kinkler and Abbie E. Goldberg    *Clark University*

# Working With What We've Got: Perceptions of Barriers and Supports Among Small-Metropolitan-Area Same-Sex Adopting Couples

*In seeking to adopt, lesbians and gay men may confront various barriers and obstacles. Ideally, they have access to a variety of support resources that can help to buffer the negative effects of these barriers. Lesbians and gay men living in small metropolitan communities may have limited access to support resources, however. The current qualitative study examined the perceptions of 37 same-sex couples who were pursuing adoption while living outside of large metropolitan cities, with attention to the barriers these couples encountered during the adoption process and the resources they drew upon to cope with such challenges. Findings indicated that same-sex couples living in small metropolitan areas confronted several major barriers in the adoption process, such as a lack of geographically accessible gay-friendly adoption agencies. Despite limited access to support, participants showed evidence of notable resourcefulness. For example, participants with limited access to formal support groups sought out informal supports instead.*

Department of Psychology, Clark University, 950 Main Street, Worcester, MA 01610 (lkinkler@clarku.edu).

Despite legal and social barriers, sexual minorities are increasingly making the transition to adoptive parenthood (Goldberg, Downing, & Sauck, 2007). U.S. Census data suggest that the number of same-sex couples raising children has increased significantly, from 1 in 20 male same-sex couples and 1 in 5 female same-sex couples in 1990 to 1 in 5 male same-sex couples and 1 in 3 female same-sex couples in 2000 (Gates & Ost, 2004). As the number of lesbian, gay, and bisexual (LGB) parents increases, so does research on family outcomes. For example, research conducted over the past two decades has found that the parenting skills of sexual minorities are comparable to their heterosexual counterparts (Biblarz & Savci, 2010; Goldberg & Smith, 2009), and the adjustment of children of LGB parents is within normal limits with regard to emotional, social, and developmental outcomes (Wainright, Russell, & Patterson, 2004).

Yet, despite mounting evidence that children raised by LGB parents are not disadvantaged by their parents' sexual orientation, many figures central to the adoption process, such as social workers and politicians, believe that same-sex couples are less fit to be parents than heterosexual couples or that it is not in a child's best interest to be placed with LGB parents (Brodzinsky, 2003; Hicks, 2000). These lingering stereotypes contribute

to discrimination against LGB prospective parents, resulting in formidable legal and social barriers for same-sex couples who wish to adopt (Goldberg et al., 2007). Encounters with such barriers may be particularly devastating for sexual minorities who lack social support, in that social support can help to buffer the strain caused by marginalization, rejection, and discrimination (Meyer, 2003).

Indeed, access to stress-ameliorating social support may be particularly challenging for LGB people living outside of large metropolitan areas, given that small metropolitan communities have fewer institutionalized support resources aimed specifically at LGB parents and prospective parents and tend to lack a visible, organized LGB community (D'Augelli, 2006). Positive perceptions of quality informal support networks, which are sometimes present in more rural communities, may offset these deficits, however, and help same-sex couples to effectively cope with the challenges they may face while adopting in nondiverse, heteronormative communities, that is, communities in which heterosexuality is naturalized as normal and universal (Hicks, 2000). In the current study, we aimed to examine the experiences of same-sex couples who are seeking to adopt while living outside of large metropolitan cities in an effort to identify the types of challenges that prospective lesbian and gay parents encounter during the adoption process and what resources they draw on to cope with these challenges. Next, we (a) provide a framework for contextualizing adoption-related barriers, (b) discuss the potential types and roles of social support in ameliorating barrier-inducing stress, and (c) discuss how and why the experiences of sexual minorities who are adopting in small metropolitan areas deserve particular attention.

## THEORETICAL PERSPECTIVE

This research is informed by a theoretical framework that integrates ecological and minority stress perspectives. An ecological framework emphasizes the bidirectional interaction between individual and multiple overlapping ecosystems (Bronfenbrenner & Morris, 1998). At the broadest level, sexual minorities' perceptions and experiences are shaped by societal and cultural values. These societal views may influence individuals directly or may affect more immediate levels of influence, such as the legal system, one's community, or one's family. For example, societal beliefs about the superiority of the heterosexual nuclear biologically related family over all other family forms are necessarily embedded within these primary contexts, thereby influencing sexual minorities at multiple levels.

A minority stress perspective highlights the importance of understanding the negative psychosocial consequences of developing within stigmatizing social environments. Minority stress is the chronic social stress that results from belonging to a stigmatized social category over and above the general stressors of daily life (Meyer, 1995, 2003). Sexual minorities' own identities or needs may conflict with broad-level social environments, such as legal systems or adoption agencies, which may discriminate against same-sex couples. According to a minority stress perspective, however, individual factors, such as social support utilization, may serve as buffers to the harmful effects of minority stress. Both ecological and minority stress frameworks informed this study in that we sought to understand same sex couples' experiences with stigma and support within multiple overlapping ecosystems.

## BARRIERS TO ADOPTION FOR SAME-SEX COUPLES

A growing body of literature has examined the barriers that sexual minorities face in adopting (Brodzinsky, 2003; Hicks, 2000; Ryan, Pearlmutter, & Groza, 2004). In the only empirical study to prospectively examine perceived barriers to adoption in lesbian preadoptive couples, Goldberg et al. (2007) found that respondents, who largely resided in urban areas of the United States, sometimes felt that they had to hide their sexuality during the adoption process; those that were open about their sexuality sometimes described negative consequences, such as broad-level legal barriers and/or more immediate barriers, such as encountering negative attitudes by adoption professionals. To date, no studies have examined the types of unique barriers that may be encountered by same-sex couples who are adopting while living in small metropolitan areas. Consistent with an ecological framework (Bronfenbrenner & Morris, 1998), barriers to adopt may be conceptualized as existing on several intersecting levels of influence, which

may interact to shape the perceived experiences of LGB prospective adopters. For example, at the broadest level, *cultural beliefs* that devalue same-sex parenting may impact LGB prospective adopters directly, by affecting their self-efficacy as parents, and indirectly, by affecting more immediate levels of influence, such as *laws* that do not legally recognize adoption by both partners in same-sex couples. Such laws may impact LGB adopters directly in that, for example, both partners may not be able to legally adopt their child. Laws may also impact LGB adopters indirectly; for example, they may shape the attitudes of adoption agencies, who may refuse to work with them. These intersecting layers of influence may shape LGB adopters' perceptions of the frequency and severity of barriers they encounter as they navigate the adoption process.

Encounters with adoption-related barriers may contribute to emotional, cognitive, and behavioral stressors for sexual minorities and may therefore negatively impact their well-being (Miller & Kaiser, 2001). Indeed, numerous studies have examined the role of *minority stress* on sexual minorities (Meyer, 2003; Miller & Kaiser, 2001; Ross, 1985) and generally suggest that the experience or expectation of stigma leads to decreased well-being (Ross, 1985). Research also suggests, however, that although one's sexual minority status may result in experiences of stigma, it may also be a source of strength when associated with opportunities for affiliation and support, which can ameliorate the impact of stress (Branscombe, Schmitt, & Harvey, 1999). Furthermore, and more generally, expressing emotions and sharing aspects of oneself in interpersonal and therapeutic relationships (e.g., family, friends, and support groups) can be important for maintaining sexual minorities' well-being (Hershberger & D'Augelli, 1995). Thus, it would seem that support in the form of both group affiliation and interpersonal relationships may help sexual minorities cope with encountering barriers while they seek to adopt.

## THE IMPORTANCE OF SUPPORT RESOURCES

Stress and coping research has attempted to delineate the different types of support that may ameliorate the effects of stress (e.g., Belsky, 1984). Within the minority stress literature, Meyer (2003) has called for a distinction between personal and group resources, where personal resources operate on the individual level and vary among minority group members whereas group-level resources are available to all members. Group-level supports that emphasize minority group affiliation allow stigmatized persons to experience social environments in which they are not stigmatized by others (Jones et al., 1984). The minority stress literature, however, has often not accounted for *informal* aspects of support that are neither individual level nor group level, such as friends and family and neighbors, nor does it address the stress-ameliorating effects of these specific types of support.

Indeed, within community psychology discourse, social support has often been defined in terms of *formal* and *informal* sources of support (Sousa & Rodrigues, 2009). Formal support, like group-level resources, may be conceptualized as organized structures of support geared toward individuals sharing similar experiences, such as LGB- or adoption-related support groups. Informal support encompasses individuals within one's immediate environment who may provide interpersonal support, such as families, friends, and neighbors. Although research is limited on how these different types of support may be perceived as alleviating the effects of minority stress, both formal and informal sources of support appear to promote resistance to the challenges that sexual minorities face (Goldberg & Smith, 2008), likely because both allow for social connections and community building. Because same-sex couples who seek to adopt in small metropolitan communities may have limited access to formal resources but may have access to quality informal resources, of interest in the current study is how they negotiate access to support and whether they perceive available support as effective in ameliorating the negative effects of stress.

## SUPPORT RESOURCES FOR SEXUAL MINORITIES IN SMALL METROPOLITAN COMMUNITIES

Availability of social support resources is particularly important when people seek to adopt, as the adoption process is identified as a stressful time for all adopters and perhaps particularly so for LGB adopters (Goldberg & Smith, 2008). Compared to urban areas, small metropolitan communities tend to have a higher proportion of older

people, less adequate educational systems, fewer employment opportunities, fewer resources generally, and still fewer resources for sexual minorities (D'Augelli, 2006; Lohmann & Lohmann, 2008). In turn, LGB people who live in small metropolitan communities may be at a particular risk for alienation from many stress-ameliorating resources such as formal supports. Yet, the limited research that has examined the experiences of LGB people in more rural areas (Boulden, 2001; Oswald, 2002b; Oswald & Culton, 2003) suggests that the accepted belief that gay life outside of large metropolitan areas is difficult and unsatisfying—even hostile—is not entirely accurate (Oswald & Culton, 2003, Oswald, Cuthbertson, Lazarevic, & Goldberg, 2010). Although sexual minorities in small metropolitan areas sometimes feel isolated and desire wider acceptance in tight-knit social groups, they value the close relationships and high quality of life that more rural areas sometimes offer (Boulden, 2001; Leedy & Connolly, 2007; Oswald & Culton, 2003). For example, in a qualitative study of 527 sexual minorities living in rural Illinois, Oswald and Culton found that respondents collectively identified acknowledgement of and support for their sexual minority status as the ''best thing in life.'' Notably, the ''worst thing in life'' concerned a lack of support for respondents' sexual minority status in the form of satisfactory locally available LGB-specific resources. Thus, LGB people living outside large metropolitan cities perceive both positive and negative aspects of their available social support resources.

## RESEARCH QUESTIONS

No research has examined the experiences and challenges of same-sex couples seeking to adopt in small metropolitan areas. In the current study, we examined the perceived experiences of preadoptive same-sex couples seeking to adopt while living outside of large metropolitan cities. Our goal was to identify the challenges that couples encounter during the adoption process as well as the personal and social resources that they draw on to cope with such challenges.

The following research questions guided the current study:

1. What barriers (general ones and ones specific to small metropolitan areas) do participants identify as challenges along their journey to adoptive parenthood?

2. What resources, such as formal and informal support, do participants identify as helpful to cope with these challenges? What resources do participants identify as unavailable?

3. What strategies, if any, do participants describe using to access support and create community in small metropolitan areas?

## METHOD

In the current study, we utilized data from a larger ongoing study of the transition to adoptive parenthood among lesbian, gay, and heterosexual couples. Using thematic analysis, we analyzed open-ended interviews from 37 same-sex couples (29 lesbian couples; 8 gay male couples) who were in the process of adopting their first child (via private domestic open adoption, public domestic adoption, or international adoption) and who were awaiting a child placement.

### Participant Recruitment

Inclusion criteria were (a) couples must be adopting their first child and (b) both partners must be becoming parents for the first time. We asked adoption agencies throughout the United States to provide study information to clients who had not yet adopted. More than 30 agencies provided information to their clients, and interested clients were asked to contact the principal investigator for details about participating. National gay organizations also assisted with recruitment.

Participants in the larger ongoing study are located in geographic regions throughout the United States. Of interest to us was gaining insight into the experiences of our most rural participants. To identify this subsample of participants, we employed criteria used by the U.S. Department of Agriculture (USDA). The USDA (n.d.) 2003 *urban influence codes* categorize counties by size and by proximity to metropolitan areas. Researchers may use this scheme for the analysis of trends related to population density and metropolitan influence. According to the USDA, to be considered outside the realm and influence of large metropolitan areas, counties must have an urban influence classification of 2 or above. An urban influence code of 2 is indicative of a small metropolitan area with less than 1 million people, whereas larger values are indicative of

less urban influence and decreased population density.

Use of this scheme allowed us to identify a total of 37 couples who resided within small metropolitan areas (i.e., they were categorized with an urban influence code of 2). Although some cities within these small metropolitan areas can be still quite large (city populations up to 500,000), none of the participants in our selected sample resided in cities with populations over 100,000. In fact, only 4 of the 37 couples (12.5%) resided in cities with populations over 50,000. (see Figure 1 for a breakdown of city populations for our sample).

### Procedure

After interested couples contacted the principal investigator, members of each couple were interviewed separately over the telephone. All couples had completed their home study (an in-depth evaluation on the prospective adoptive parents; Gilman, 1998) and were waiting to be placed with a child. These in-depth, semistructured interviews lasted $1-1.5$ hours on average and were conducted by the principal investigator or a trained graduate student. The interview questions, which were informed by the literature on adoptive parenthood, were originally pretested on several prospective adoptive parents and then subsequently revised on the basis of participant feedback as well as additional themes that emerged in the early interviews. Participants were also mailed a packet of questionnaires to complete within a week of the interview, which took about 30 minutes to complete. Partners returned questionnaires separately in postage-paid envelopes.

FIGURE 1. CITY POPULATION DISTRIBUTION.
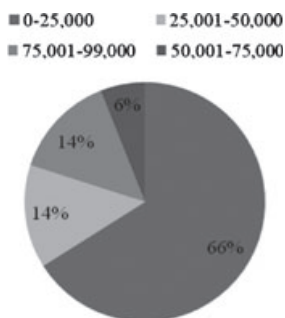


### Description of Sample

Individuals in our sample were, on average, well educated and financially secure. Ten percent of participants had a high school diploma, 16% had an associate's degree or some college, 36% had a bachelor's degree, 31% had a master's degree, and 7% had a Ph.D., J.D., or M.D. Couples' mean annual family income was $109,768 (Mdn = $89,250; range = $41,860 to $730,000). The sample was largely (91%) White; 3 participants identified as Latino and 1 each as African American, Asian, or Native American. Couples' average relationship duration was 7.51 years ($SD = 2.93$), and 68% of the sample had had a commitment ceremony (23 couples) or were legally married (2 couples). Regarding religion, 37% identified as Christian, 32% as nonreligious, 15% as ''spiritual,'' 7% as Unitarian Universalist, 5% as Jewish, and 3% as atheist, and 1 participant was Buddhist. Seventeen couples (46%) were pursing private domestic adoption, 13 couples (35%) were pursuing public domestic adoption, and 7 couples (19%) were pursuing international adoption. Couples had been waiting an average of 7.5 months ($SD = 6.55$) for a child placement.

### Data Analysis

Because of the paucity of research on the experiences of same-sex couples adopting in small metropolitan areas and given the qualitative nature of our interview data, we chose to conduct a thematic analysis. A thematic analysis involves a thorough exploration of recurrent themes and patterns to create a coding system to organize the data (Bogdan & Biklen, 2003). In our analysis, we focused on the themes that emerged concerning perceived barriers related to adopting and the resources that participants drew upon to cope with such barriers.

Participants' responses to several semistructured interview questions were the basis for our data analyses. The interview questions we analyzed for the current study are as follows: (a) How has the adoption process been for you? (b) What aspects of the process were the most challenging? (c) What has been most useful in terms of coping? (d) Do you feel like you've faced certain barriers/challenges because you are a same-sex couple? (e) What level of support did

you receive from your family with regard to your decision to adopt as lesbian/gay parents? From your partner's family? From your friends? (f) Are there other adoptive parents you know who you expect to have regular contact with? Other gay couples with children? (g) How gay friendly is your community/neighborhood? (h) How racially/ethnically diverse is your community/neighborhood?

In analyzing the data, we recognized that our theoretical perspective, choice of methods, and our unique worldviews necessarily shape our interpretation of the data. Our analysis was informed by an ecological systems framework (Bronfenbrenner & Morris, 1998) such that throughout the coding process we paid close attention to how perceived challenges were impacted by personal experiences, larger societal norms, and legal regulations. During the coding process, we identified similarities and differences in the data, which formed the basis for emerging categories. We (the two authors) discussed the formulation and differentiation of emerging themes at regular coding meetings. Once we developed clearly articulated codes, we then applied focused coding to the data. This process involved using the most significant codes to sort the data, collapse some codes, and differentiate other codes, all within a thematic rubric. Thus, an organized coding scheme emerged that further illuminated new connections in the data.

Given that partners within a couple often describe idiosyncratic interpretations of their experience of adopting, for each code we indicate the number of individuals who endorsed the code as well as the number of couples in which both partners endorsed the code. This allowed us to focus on individual perceptions while simultaneously highlighting congruent perceptions between partners.

## FINDINGS

Participants described two main types of barriers they encountered during the adoption process. First, we discuss participants' descriptions of *barriers to the adoption process* itself. We then discuss their reports of *barriers to accessing support and creating community*. In turn, we discuss the strategies these couples used to cope with support and community-based challenges.

### Barriers to the Adoption Process for Same-Sex Couples Living in Small Metropolitan Areas

Fifty-nine individuals (80% of the sample) described encountering at least one barrier that prevented them from moving through the adoption process smoothly. In many cases, these barriers were specific to living in a small metropolitan area. Barriers were located within the broader legal context and within more immediate contexts (e.g., local adoption agencies, their neighborhoods).

*Legal barriers to coparent adoption by same-sex couples.* In regards to the broader legal context, 30 individuals (including 12 couples; 41% of the sample) described uncertainty as to whether they would be able to complete a *coparent* adoption that ensures legal recognition of both parents, inasmuch as state laws and policies regarding gay adoption were regarded as unsteady. Similar to findings of same-sex couples adopting in metropolitan areas (Goldberg et al., 2007) is our finding that participants in the current study described their confusion over navigating a complex system of state laws, county-wide policies, and local legal procedures that vary by jurisdiction. Among those individuals who were certain that coparent adoption by same-sex couples was illegal in the state in which they resided, some were unsure about whether they would eventually be able to obtain any other legal protection, such as a second-parent adoption in which a nonlegal parent adopts a child *after* the primary parent has adopted. Regarding whether she and her partner would be adopting as a same-sex couple in Ohio, Ella, a 34-year-old White woman, offered, ''I think there is a little confusion within the system around here as to how that works. I'm not sure.'' Participants like Ella lacked clarity regarding their potential legal rights as a couple after a child is placed with them. Many participants spoke of rumors about certain counties or judges who were known for granting second-parent adoptions, but were unable to confirm these rumors, inasmuch as they feared that efforts to do so might raise red flags and ruin their chances of being granted legal rights. Derek, a 37-year-old White gay man in Michigan, described one such situation:

> There is one county that was well known for doing second parent adoptions and a high judge kind of took away all of the adoptions from that court

and moved them to his one court. So there is one county in Michigan that will do them, but you have to keep it kind of hush hush and secret because we don't want it to happen again.

Many participants, regardless of their level of clarity regarding the legal system, described a resigned sense of sadness regarding their lack of equal rights. Jill, a 41-year-old White lesbian whose partner Lydia was completing a single-parent adoption in a nonmetropolitan area of Georgia, said, ''I know we're both mothers, but there is a feeling of being on the outside. I have to be left out on purpose.'' Lydia voiced similar frustration: ''It has been difficult because this is our family; we're adopting, but it doesn't say that on paper.''

As other studies have documented (e.g., Goldberg et al., 2007), lack of access to a second-parent adoption can create feelings of stress and insecurity on the part of the nonlegal parent. Indeed, in addition to describing fear over the practical issue of parenting without legal rights, couples like Jill and Lydia also described the emotional impact of legal inequality, such as feeling ''left out,'' illustrating how a broad legal stigmatizing environment may directly impact sexual minorities' well-being.

*Difficulty finding an adoption agency willing to work with same-sex couples.* In addition to the barriers that individuals experienced at the broadest legal level, many also described challenges to the adoption process in their more immediate social context. Thirteen individuals (3 couples; 18% of the sample) indicated they had difficulty finding agencies in their area who were willing to work with same-sex couples. This barrier not only prolonged their journey to parenthood, but also engendered feelings of sadness and anger inasmuch as it made salient negative broad-level societal views of same-sex parenting (Goldberg et al., 2007). William, a 36-year-old White gay man living in Pennsylvania, noted that he and his partner had investigated ''other places local, close by. And a lot of them, I hate to say it, but a lot of them are faith-based programs that really wouldn't cater to us, because even though we may be Catholic, [our sexual orientation is] not accepted.'' Thus, even though William and his partner identified as Catholic, they were rejected by local faith-based agencies because of their sexuality, a reality that William went on to describe as ''hard

to face.'' The belief systems ascribed to by religiously oriented agencies not only serve to marginalize same-sex couples on a symbolic level, but also have a practical impact on the choices and resources available to same-sex couples. Participants who described difficulty in finding agencies that were open to same-sex couples often experienced delays in the adoption process, as they were forced to conduct time-consuming searches for gay-friendly agencies, and to navigate difficult decisions, such as whether to closet themselves or whether to work with agencies in other counties or states.

*Encountering unsupportive adoption agency staff.* For those couples who found agencies willing to work with same-sex couples, some encountered individual professionals who engaged in subtle or overt forms of discrimination. Although this barrier may not be specific to same-sex couples adopting in small metropolitan areas, it emerged as salient for our sample (10 participants; 2 couples; 14% of our sample). These participants were uncertain as to whether adoption worker attitudes were real barriers to the adoption process. They wondered whether workers were preventing children from being placed with them because they were a same-sex couple, or whether the ''delays'' that they faced were typical of all applicants and unrelated to their sexual orientation. Rochelle, a 31-year-old White lesbian living in Pennsylvania, explained:

> We felt that there were certain caseworkers and certain people that we dealt with that we felt were just not comfortable with our lifestyle. We even had one of their caseworkers tell us that the intake worker there—the one that was making the referral—was not comfortable with making matches with the same-sex couples she had. Some of the lack of support that we were having . . . I really have to wonder if that was because they really didn't want to work with us as a gay couple.

Thus, although Rochelle had no proof that her difficulty being placed with a child was related to caseworker attitudes, knowing that individuals within her agency disliked matching children with same-sex couples contributed to her sense of uncertainty and isolation. Encounters with discrimination within this ecological context are concerning in that they, along with stigma experienced in other contexts, may have negative implications for participants' well-being during an already stressful life transition.

*Limited options in adoption due to nondiverse community.* Another immediate barrier to adopting that many participants highlighted was the lack of racial diversity in their local communities. Although adoption options are often limited for same-sex couples because of their sexual orientation (e.g., they cannot legally adopt as a couple from abroad), 18 participants (five couples; 25% of our sample) felt the small metropolitan, racially nondiverse nature of their communities further limited their options in adopting in that their communities would not be accepting of transracial adoption. They therefore felt compelled to limit themselves to only considering same-race (i.e., White) children. For example, Sara, a 40-year-old White woman in Ohio, explained:

> If a Black person rolls through town everybody knows about it because it's a big hoo-ha, and I wouldn't want [a child] to go through that. It wouldn't make any difference for me, but I don't want them to go through any more stuff than they have to.

As in Sara's case, participants were often primarily concerned about the impact that living in a predominantly White community would have on a child of color. In this way, the perceived difficulties of a small metropolitan context are inherently racialized. Considering and pursuing a transracial adoption may be particularly troublesome for couples living in such racially homogenous contexts. For example, Ralph, a 32-year-old White gay man living in Pennsylvania, worried that if he adopted an African American child, the child would eventually say ''How dare you adopt me, living in 'hick town'?'' Thus, although all of the individuals who endorsed this theme espoused a willingness to adopt transracially, they voiced concerns related to community-level racial attitudes and nondiversity. In this way, their personal desires become impinged upon by social norms and practices.

Interestingly, all of the six non-White participants, all of whom were members of an interracial lesbian couple, were willing to adopt a child of color despite living in predominantly White areas. Madeline, a 40-year-old African American lesbian in Kentucky, stated she and her partner would be good candidates for a child of color because ''we can provide a culturally sensitive home. Whatever issues may come up we already deal with because we are an interracial couple in a pretty rural town. There will be racism, but we can help a child through it.'' The White partners within these six interracial couples also expressed a willingness to adopt a child of color, likely because they, too, had experience navigating racism within their communities. Thus, when interracial couples like Madeline and her partner felt they possessed the experience necessary in battling potential community-level racial barriers, such barriers were deemed less daunting.

In sum, participants endorsed a variety of challenges to the adoption process, some that were specific to living in small metropolitan areas. According to a minority stress perspective (Meyer, 2003), supportive environments may help same-sex couples in small metropolitan areas cope with the stress associated with encountering stigma within these multiple contexts. Thus, we now turn to participants' experiences with accessing support and creating community within their small metropolitan context while seeking to adopt.

### Challenges and Successes in Accessing Support and Creating Community

Participants often described barriers to accessing support and creating community during the adoption process because of the limited resources within their small metropolitan areas. Many participants, however, described successes in accessing support despite being faced with limited resources. These positive and negative experiences existed within a variety of overlapping contexts, ranging from broad to more immediate levels of influence. Perceptions of social support emerged from the data in the form of both *formal support*, such as community centers, support groups, or adoption agencies, and *informal support*, such as families, friends, or neighbors.

*Formal support: Agency.* Within a broad contextual level, many individuals described a lack of formal support from their agency. They wanted their agency to facilitate connections to other adoptive parents and to other LGB adopters but felt that their agencies failed in this respect.

Lack of agency-facilitated support for same-sex adoptive parents. Twelve participants (three couples; 16% of our sample) voiced an interest

in connecting with other couples moving through the adoption process. They believed that knowing ''others out there'' with shared experiences might help to ameliorate their feelings of being ''out of control'' during an unpredictable adoption process, feelings that may have been amplified by living in isolative small metropolitan areas. These participants described being particularly disappointed that their agencies had not provided opportunities to access such support.

Four participants were, in fact, able to access formal support groups for adopting couples through their agencies, but were disappointed to find that these groups were heavily geared toward heterosexual couples. For example, Jessica, a 40-year-old White lesbian in Ohio, found that being in her support group made her feel even more isolated:

> I think that I'm a little more uncomfortable when we're in the classes because I just feel like in the society that we live in, they just look at us and probably don't think that we should even be there. . . . It's just, 'Oh yeah, they're the gay couple.' No one has ever said or done anything; it's just something that's there.

Jessica's sentiment highlights the importance of support groups that include other same-sex couples—particularly for same-sex couples in small metropolitan areas who may feel quite isolated in a heteronormative community. Participants whose support groups lacked other LGB adopters and that did not address their specific experiences therefore found such groups to be another source of stress, rather than support.

Some individuals (six participants; two couples; 8% of our sample) explicitly asked their agencies to facilitate support for *same-sex* adopting couples but were left empty-handed, such as Ryan, a 49-year-old White gay man in South Carolina, who shared that he and his partner had asked their caseworker ''numerous times both before and after being approved to please put us in contact with these [same-sex] couples [that she's mentioned], and every time we ask she either changes the subject or doesn't respond.''

Lack of geographically accessible agency support. Four participants (5.6% of our sample) described being unable to access formal support offered through their agency because of the geographical distance of their agency. These couples were forced to look beyond local agencies when they began the adoption process because, as discussed, their local agencies were unwilling to work with same-sex couples. Thus, these couples were unable to benefit from the formal supports that their geographically distant, albeit gay-friendly, agencies provided. For example, Maria, a 27-year-old White lesbian, was unable to find an agency near her small metropolitan town in Texas and thus signed on with an agency in the metropolitan area of Houston, 7 hours away, which meant ''at least a two day if not three day trip just to say 'Hello, how are you?' to the agency.'' Ralph spoke specifically about not having access to the formal support meetings offered by his agency: ''They have all these events and seminars and get-togethers, which for us is tough because we live on the opposite side of the country so, we can't even go to the monthly support meeting.'' For these individuals, living in a small metropolitan area directly limited their access to formal support resources. Ironically, participants' desire for these resources was perhaps made more salient *as a result* of living in small metropolitan communities in which other same-sex adopting couples were not abundant. In this way, same-sex couples, who may, in fact, be trying to *create* an adoptive community within their communities, ultimately have to reach beyond their communities in order to receive the resources and support that they need. Thus, although they may appreciate their small metropolitan lifestyle precisely for the kinds of community they receive in other contexts (e.g., neighborhoods, family ties), the small metropolitan environment also provides a challenge to creating and potentially sustaining an *adoptive* community.

Successes at accessing agency-facilitated formal support. Notably, nine individuals (one couple; 12.5% of our sample) described having successfully accessed formal support through their agencies. These participants were offered membership in organized support groups geared in part toward same-sex couples seeking to adopt. For Kristen, a 37-year-old While lesbian in Washington, finding another same-sex couple in her support group made her feel like less of an outsider and gave her hope in the adoption process: ''Even from the very first seminar we walked in and it was us and one other [gay couple] and it was like, we just felt like everybody

else.'' For others, who found themselves to be the only same-sex couple adopting through their agency, their support groups made it a point to make them feel included, as was the case for Ashley, a 37-year-old White lesbian in Massachusetts:

> In our MAPP [Model Approach to Partnerships in Parenting] class, they had asked everyone who attended if they had any particular needs they needed addressed. And there's a panel night where different people come who are adoptive parents or had been adopted, and we said we'd either like to hear from gay parents or a child who's been adopted by gay parents. And they took care of that; they invited this wonderful 14-year-old boy who had been adopted by two moms to speak, and he was amazing.

Ashley described this experience as ''extremely helpful'' because it made her feel ''just . . . less alone'' in her journey. Despite living in more rural areas that tend toward limited resources for same-sex adopting couples, these individuals described positive experiences facilitated by their agencies, thereby easing their experiences of isolation and frustration.

*Formal support: Community.* Within a more immediate context, three individuals (4.2% of our sample) described barriers in accessing formal support groups for adoptive parents or LGB adopters, or both, in their communities. Individuals who were unable to access support groups for same-sex couples through their agency sometimes looked elsewhere, such as local community centers or LGBT organizations. These efforts sometimes proved fruitless. Heather, a 38-year-old White lesbian in Texas, recalled, ''I looked for some support groups down here, which I couldn't find. I looked through a couple of the hospital listings and there wasn't any listed and then through the local CPS [child protective services] chapter here but I haven't heard anything.'' Whereas Heather searched for existing support groups, Leroy, a 41-year-old White gay man in South Carolina, sought to create one himself by trying to find ''other same-sex couples who have adopted, and just talk to them a little bit about their experiences,'' but was unable to find any other LGB adopters in his community, causing him to feel as though he and his partner were ''just kind of floating out there on our own.''

Eight individuals (one couple; 11.1% of our sample), in contrast, reported successfully accessing formal support networks within their communities in the form of support groups aimed at LGB parents. These resources were generally located through local chapters of LGBT organizations, which participants like Linda, a 39-year-old White lesbian in Pennsylvania, felt lucky to have found: ''There is actually a new chapter of a gay support group that is—and this is awesome; I just found this out last week—there is a group that is designed for children of gay parents.'' Despite living in small metropolitan areas, Linda and others were able to tap into organizations of other LGB parents, something that participants such as Amy, a 42-year-old White lesbian in Massachusetts, felt was ''extremely helpful because that has allowed us to understand that we are not being isolated in the circumstances that have been happening.'' These ''circumstances,'' for Amy, included encountering resistance from her caseworker, who did not want to drive the long distance from the urban-located agency to the nonmetropolitan town in which Amy resided—a resistance that might have been, Amy mused, related to her caseworker's discomfort in placing a child with a same-sex couple. Thus, although many couples were unable to access formal organized support to help cope with a sometimes stigmatizing and isolating process, others were able to find formal networks within their small metropolitan areas.

*Informal support: Friends.* Within an even more immediate context, same-sex couples who are adopting may benefit from the support and camaraderie of friends. Many participants, however, described not having friends who could relate in terms of being lesbian or gay, being a lesbian or gay parent, and/or being an adoptive or preadoptive parent. Twelve participants indicated they did not have any other LGB friends, 23 participants did not know any other LGB parents, and 22 participants did not know any other adoptive parents. These participants described feeling as if they could not rely on their social circle for the specific support they needed. As Ralph, a 32-year-old White gay man living in Pennsylvania, put it, ''As much as our friends and family are supportive, and they really are, it's frustrating because they really don't know what you're going through.'' Faced with feelings of frustration and isolation, these small-metropolitan-area participants

longed for an outlet to share their experiences of navigating the adoption process as same-sex couples.

Although some participants did not have friends who shared the experience of identifying as lesbian or gay in a small metropolitan area (e.g., as Patricia snorted, ''Gay friends? Not out here!''), others did have at least one gay or lesbian friend, but none who shared the experience of parenting, as was the case for Rhonda, a 32-year-old White lesbian in Pennsylvania: ''Any of the GLBT people that I have met in my county seem to be a sort of older set and don't have kids.'' Furthermore, many participants did not have friends who shared the experience of trying to adopt.

Nonetheless, most participants (58 individuals; 21 couples; 78% of the sample) described their friends as supportive of their decision to adopt, and 8 participants (one couple; 11.1% of the sample) described relying on friends who they considered ''like family'' and whose support helped them to maintain a sense of hope during the adoption process. For example, Felicia, a 31-year-old Latina lesbian in Maryland, was grateful that she and her friends could rely on each other to ''talk to each other, cry when we need to, that sort of thing,'' and ''take turns supporting each other.'' Thus, although adopters in small metropolitan areas often described close friends as a satisfying source of informal support, some described certain limitations to this support, inasmuch as these friends often lacked key shared experiences.

*Informal support: Family of origin.* At the most immediate contextual level, 18 individuals (no couples; 25% of our sample) described nonsupport from their family in regards to their decision to adopt as same-sex parents. That this theme was so prevalent is especially interesting given that some participants emphasized that they lived in small metropolitan areas in order to be geographically close to their families of origin, such as Paula, a 40-year-old White lesbian in Maryland, who explained, ''I have a brother that just moved out here, my parents just moved down the street, and we've always been really close and we just really rely on each other and I have an aunt that lives about an hour away so it's just . . . being together a lot is important to me.''

Research suggests that although rural LGB populations value closeness with their families, they must often adopt a ''don't ask, don't tell'' policy in order to maintain that closeness (Boulden, 2001). Consistent with this notion, four individuals, such as Ella, a 36-year-old White lesbian in Ohio, described working day to day in a family business with unsupportive family members:

> [My parents] are unsupportive, but that doesn't mean that I don't have a relationship with them. I don't think [my father] particularly wants to hear me to talk about [partner] all the time, just like I don't particularly want to hear him talk about preaching door to door or whatever, but it's something that we kind of deal with because we love each other and we have a lot of other things in common that we can talk about. But as far as all of us getting together to have dinner, that doesn't happen. I only see him when I work with him.

Although Ella stated that she does not perceive her father as supportive of her relationship with her partner or her efforts to adopt, she nevertheless values her relationship with him. Valuing family was mentioned by 16 participants (one couple; 22% of our sample) as a reason for living in small metropolitan areas, as these areas are close in proximity to at least one partner's family of origin. This valuing of family may be particularly salient within our sample, as participants are preparing to become parents and may be hopeful for familial involvement. Indeed, eight participants mentioned noticing an increase in support and involvement from family members since beginning the adoption process. For example, Katelyn, a 30-year-old White lesbian in Ohio, spoke of her sister who ''really didn't accept me being a lesbian, but now she's just excited and can't wait to be an aunt.'' Consistent with research that suggests that family support and involvement may increase as same-sex couples become parents (Goldberg & Smith, 2009), this increase in support may be particularly meaningful for rural prospective parents who previously felt they must remain closeted about the details of their lives in order to peacefully interact with their families (Boulden, 2001). That is, for small-metropolitan-area same-sex couples, the frequency of family interactions may go unchanged as individuals move through the adoption process, but support and openness may increase—a pleasing outcome for those small-metropolitan-area LGB participants who deeply value family.

It is clear that within multiple contexts, participants in this sample perceived stigma-related barriers related to adopting in small metropolitan areas and sought out social support to help cope with the stressful effects of these barriers. Although participants also experienced challenges in accessing support and creating community, they ultimately accessed a variety of support resources. Of interest are the strategies that participants used to access support in the face of limited resources. Our analysis reveals that most participants became skilled at seeking sources of support to act as ''stand-ins'' for otherwise absent forms of support. That is, although they did not tend to have a large variety of support resources to draw upon and often met overt nonsupport from certain sources, they were generally able to locate and rely on at least one source of social support.

*Stand-in supports: Formal support replacing formal support.* Fourteen individuals (one couple; 19.4% of our sample) described finding adoption agencies that recognized and supported both partners as coadopters despite legal restrictions on coadopting. That is, although these couples lacked formal support from the state or legal system in that they were not both legally recognized as adopting parents and often had to remain somewhat ''closeted'' in order to adopt, they sought and received formal support from their agencies. This ''stand-in'' support was extremely important to these couples, who felt that they had adoption workers ''on their side'' despite legal challenges. For example, Leslie, a 36-year-old White lesbian in North Carolina, was unable to legally coadopt with her partner and felt that ''the paperwork process for that in general was hard,'' but went on to explain that what got her through it was knowing that her agency ''treat[s] us as a couple, they send us stuff as a couple, everything will be as a couple.'' Similarly, Marissa, a 38-year-old White lesbian, noted that even though Georgia's laws regarding adopting as a couple were ''a little bit hairy,'' it made her feel better to know that ''as far as the agency of course is concerned we are a couple.''

The lying and secrecy involved in ''closeting'' oneself in order to adopt according to legal requirements may have negative effects on couples, such as strained relationships (James,

2002). Furthermore, the fact that both partners in a relationship are not recognized as parents at the legal level may undermine the supportiveness of support resources at more immediate levels (i.e., by viewing only one partner as a ''real'' parent; Goldberg, et al., 2007). Thus, the formal recognition of both partners as parents by agencies may have an impact on both partners by helping them to feel legitimated as parents as well as, ultimately, on their surrounding support networks. Such formal recognition may also help to offset the negative effects of discriminatory legal practices.

*Stand-in support: Informal support for formal support.* Six individuals (one couple; 8.3% of the sample) specifically described replacing otherwise absent formal support through their agencies or community with some form of informal support through friends or family during the adoption process. These participants were disappointed to find that there were no organized groups of same-sex couples who were navigating the adoption process in their small metropolitan areas. They described, however, being grateful for the emotional support they received from family and friends. Jill, for example, explained that her agency was not a source of support for her:

> The only time the agency contacts us is when they need something, or if something is wrong. So it's not a real touchy-feely kind of thing from the agency. You get that from your family, if you're lucky. I'm very lucky that my family has been very supportive.

These participants' experiences therefore guided them to expect nothing more than practical assistance from their agencies and to look instead to informal support sources, such as friends or extended families, for emotional support.

*Stand-in support: Informal support for informal support.* Among those individuals who experienced a lack of informal support from an important resource, such as community, neighbors, friends, or family, many were able to successfully seek out stand-in sources of support to help cope with the challenges of adoption. Within this theme, two main patterns emerged from the data. First, 12 participants (two couples; 16% of our sample) described

drawing on support from their neighborhoods to replace otherwise absent support from their larger communities. Jill, who viewed her community as quite unsupportive of her sexual identity, found comfort in her neighbors, stating:

> I think our neighborhood is very gay friendly, but our community is maybe not as much. I mean there are certain areas where you feel a little more conspicuous than others. There are just a few little areas where you might get some people hollering and stuff at you, or something like that, but our neighborhood is actually great.

Participants like Jill, then, coped with living in stigmatizing broad social environments by relying instead on more immediate contextual sources of support and acceptance.

Second, 12 participants (no couples; 16% of our sample) who reported nonsupport from their families of origin also described successfully seeking out stand-in support from friends or from their partner's families. These participants, such as Ella, became skilled in creating families of choice to help buffer the painful effects of nonsupport from their own families:

> I don't particularly see our kid having a very close relationship with [my dad]. And certainly not with my mother, but we're so close to [partner]'s family that that kind of makes up for it. I mean, I couldn't ask for more fantastic in-laws. They're like my family.

Thus, although nonsupport from family was described as painful and hard to accept, many participants were successful at seeking out alternative informal supports to help cope with the challenges they encountered while moving through the adoption process in small metropolitan areas. This finding is unsurprising, given that sexual minorities, who often struggle with rejection from their families of origin (Kurdek, 2005), have a history of creating ''families of choice'' that consist largely of friends (Weston, 1991). Our finding, however, that such a trend persists in small metropolitan areas and that ''families of choice'' often include heterosexual friends speaks to the multilayered factors that intersect to shape participants' creation and perceptions of ''support.''

DISCUSSION

This is the first known study to qualitatively examine the perceived experiences of same-sex couples seeking to adopt in small metropolitan areas. This research extends prior work documenting the multilevel barriers that same-sex couples encounter as they pursue adoption (Goldberg et al., 2007); our study, however, reveals that living in small metropolitan areas may engender additional barriers for same-sex couples. These barriers exist within several overlapping levels of influence and may have implications for individuals' experiences with stigma and support. Most notably, participants spoke at length about their struggle to find adoption agencies within their small metropolitan areas willing to work with them as same-sex couples. In some cases, agencies may have been reluctant to work with same-sex couples because of societal factors, such as negative views of same-sex parenting, views that were, in turn, internalized by agency workers. In other cases, legal factors may have dissuaded agencies from working with same-sex couples in that some couples lived in states in which adoption by same-sex couples was illegal; it is possible that agencies did not want to take on these ''messy'' adoptions. At an even more immediate level, agencies may have been reluctant to work with same-sex couples if agency workers felt that gay adoption challenged the cohesiveness of a small metropolitan community that emphasized traditional family values (Smith, 1997). Regardless of agencies' reasons for nonsupport, participants who encountered unsupportive agencies (as well as other barriers to the adoption process) often described feeling discouraged by such rejection. Although same-sex couples living in mostly urban areas have also been found to report experiences of rejection from agencies (Goldberg et al., 2007), it is assumed that because metropolitan areas have more resources generally (Pickett et al., 2001), these couples are usually able to access other agencies in their areas that are willing to work with them. Couples in our study, however, were often forced to work with agencies located in other, geographically distant cities.

That couples in this study were often unable to find agencies near them is problematic for several reasons. First, staying connected with one's agency is important in helping adopting couples feel as though the adoption process is indeed progressing (Houstion & Kramer, 2008;

Macaskill, 1985). The process of adoption can be long and difficult and involves a great deal of waiting. Often, LGB adopters wonder whether subtle discrimination by adoption workers may be placing them at a disadvantage in regards to child placement (Hicks, 1996). Face-to-face contact can help to calm these fears and reassure adopters that their agencies are advocating for them. Indeed, the participants in our study who worked with geographically distant agencies often cited feeling lost or unsure in regards to the support of their agencies. Second, participants who were unable to find local agencies that were willing to work with them were deprived of the formal support resources that are often offered by agencies (Brodzinsky, 2003). That is, they lived too far from the agencies that they ultimately did work with to meet regularly with their social workers face to face and to attend meetings and groups with other preadoptive parents. Such meetings and support groups can be instrumental in helping hopeful adoptive parents navigate the often stressful adoption process. Prospective adoptive parents who participate in adoption support groups find these groups helpful and reassuring in that they permit discussion of worries and experiences in a supportive atmosphere (Farber, Timberlake, Mudd, & Cullen, 2003).

This study extends prior research that has highlighted the importance of social support in buffering the negative effects of encountering barriers specific to one's minority status (Meyer, 2003). Furthermore, we explored the ways in which different types of support, such as formal and informal support, may serve as coping resources, whereas previous minority stress literature has tended to focus on group-level resources. Couples in this study expressed a strong desire for social support and described seeking support from a variety of sources. Our findings yield insights into specific strategies used within these small metropolitan environments to access or create support despite limited resources. Specifically, we found that same-sex couples may effectively seek out ''stand-in'' sources of support to replace otherwise absent support. Not surprisingly, formal support, such as support groups containing other same-sex adopting parents, was particularly hard to come by within this sample. Instead, participants described primarily relying on informal support networks, such as friends or family or both, a finding consistent with literature suggesting

that rural lesbians and gay men emphasize ties to biological, legal, and chosen kin as well as friends and neighbors (Butler & Hope, 1999; Oswald & Culton, 2003). Our finding that participants who lacked multiple forms of formal organized support instead found support through family and friends is notable. Family and friends (who, in rural areas, are mostly heterosexual) do not necessarily share participants' experiences in that they themselves are not gay and adopting. These participants, however, felt adequately supported because of their family and friends' acceptance of them and their decision to adopt. This finding is consistent with studies that suggest that the informal support of friends and family can positively impact sexual minority mental health (Hershberger & D'Augelli, 1995).

Particularly interesting about this finding are the ways in which individuals negotiated the fulfillment of two often conflicting goals in regards to relationships with friends or family or both. As members of a stigmatized category, individuals desired support that facilitated discussion of worries about—and experiences with—stigma in a safe and supportive atmosphere. As members of small metropolitan communities, however, they sought to maintain shared community values in order to ensure acceptance (Oswald & Masciadrelli, 2008). Often, in order to emphasize such values, individuals had to deemphasize their sexual orientation and their adoptive family status, both of which challenge the values of rural life and both of which are associated with stigma. According to a minority stress perspective, being open about one's stigma experiences may effectively ameliorate the negative effects of encountering such stigma. Adopting a ''don't ask, don't tell policy'' about one's stigma experiences within one's social network however, may not be an effective resource, because concealing one's stigma—a common way of avoiding negative regard—has been found to take a heavy toll on the person using this strategy (Smart & Wegner, 2000).

On the other hand, our data suggest that participants who emphasized the shared values of rural life, such as ''being good neighbors, being responsible, being respected in the workplace, and being involved in community affairs'' (Boulden, 2001), may have benefited from the decision to pursue parenthood, because parenthood and family building are often emphasized in rural life (Salamon, 1992). In an

act of resilience, these participants ''integrated gayness'' by melding their gay identity with other salient aspects of their identity (Oswald, 2002a). Many participants, for example, noted that although their decision to adopt may make them more ''out'' in their communities, it might also increase support from their families of origin, friends, and neighbors—who tended to be parents themselves and valued parenthood. It is possible that by pursuing parenthood, an act that for same-sex couples in small metropolitan areas may increase stigma while simultaneously emphasizing a shared community value, these persons were able to be more open to their informal support networks about their relationship, their experiences, and their hardships in a way that buffered the effects of minority stress.

Thus, although our study certainly highlights some difficulties that same-sex couples face while navigating the adoption process and accessing support in small metropolitan areas, it also supports previous research that suggests that gay rural life is not entirely hostile and unsatisfying (Oswald & Culton, 2003). Although the transition to adoptive parenthood may bring added challenges to couples who chose to do so in small metropolitan areas, it may also bring added benefits. Perhaps most importantly, our study shows the ways in which many same-sex couples foster resistance to the effects of minority stress and cultivate a perception of a satisfying quality of life with fulfilling support networks, despite the added challenges and limited resources of small metropolitan areas.

### Limitations and Implications for Future Research

Our study has several important limitations. First, although we explicitly sought to understand lesbians and gay men's experiences with barriers and supports during the preadoption process, long-term follow-up is needed to determine how patterns and themes that emerged may continue to develop over time. It is possible that once same-sex couples in small metropolitan areas are placed with a child, their sexual orientation may be increasingly emphasized or deemphasized within these communities, providing opportunity for changes in experiences with stigma and support. Therefore, future studies may seek to examine perceptions across several time points.

Second, although a great deal of effort was made to select our most nonmetropolitan participants in order to accurately portray the experiences of rural life, the majority of our sample resided within small metropolitan areas, rather than nonmetropolitan areas, as classified by the U.S. Department of Agriculture. Therefore, it is possible that the experiences of participants in our sample are influenced by access to a more urban culture. That is, same-sex couples who transition to adoption in even smaller nonmetropolitan communities may encounter even more limitations on resources and thus may have fewer positive experiences with barriers and support. Thus, future research may examine samples of nonmetropolitan participants in an effort to produce more compelling findings.

Similarly, our study did not account for possible regional differences in couples' experiences. Although rural life is often regarded as fundamentally similar across regions of the United States, it is possible that, for same-sex couples, rural community attitudes may be different in, say, Vermont—where same-sex marriage is legal state-wide—than in, say, Arkansas—where coparent adoption by same-sex couples is illegal. These state-wide and regional differences would certainly influence couples' experiences with barriers and supports at several contextual levels, and future research should compare rural same-sex couples' experiences across regions.

Finally, our sample was very homogeneous in terms of race, ethnicity, and class. This study cannot speak to the experiences of all same-sex couples who chose to adopt in rural areas, because the added stigma associated with multiple minority statuses would likely increase experience with stigma and minority stress and would further limit group level supports (Shade, 1990). Further research on this topic should seek to include those with multiple minority statuses. Also, because the current sample did not include any participants who identified as transgender, there is a need for future research on transgender individuals' experiences of adopting. Indeed, transgender adopters may encounter unique issues of stigma and may also find it harder to access supports.

## *Implications for Practitioners*

Our findings have important implications for adoption practitioners and mental health professionals who wish to support same-sex couples living in small metropolitan areas. Adoption practitioners may take note of the specific barriers within the formal legal and informal social realms that same-sex couples may face during the adoption process. Given the possibility of such challenges, adoption practitioners should seek to support same-sex couples by facilitating connections with other same-sex adopting couples, either within their communities or through online resources. Additionally, therapists who work with small-metropolitan-area same-sex couples who are in the process of adopting should support couples in their efforts to foster and develop their existing support resources and educate them about the importance of maintaining appropriate and effective social support networks throughout the potentially stressful process of adopting.

## *Conclusions*

Despite limitations, this study highlights some of the barriers that same-sex couples living in small metropolitan areas may face while seeking to adopt. This research elucidates the resourcefulness that same-sex couples show in using available formal and informal support systems to help counteract these barriers by actively seeking out ''stand-in'' supports when faced with support-based challenges. These findings facilitate understanding of how same-sex couples navigate their journey to becoming adoptive parents while living in geographical locations that may bring challenges to their experiences. Our findings also support prior work that challenges the stereotype of nonmetropolitan gay life as inherently difficult and unsatisfying (Oswald & Culton, 2003). Finally, our findings have important implications for adoption practitioners, mental health professionals, and community organizers who wish to support same-sex couples living in small metropolitan areas.

## NOTE

## REFERENCES

Belsky, J. (1984). The determinants of parenting: A process model. *Child Development*, *55*, 83 – 96.

Biblarz, T. J., & Savci, E. (2010). Lesbian, gay, bisexual, and transgender families. *Journal of Marriage and Family*, *72*, 480 – 497.

Bogdan, R. C., & Biklen, S. K. (2003). Qualitative research for education: An introduction to theories and methods (4th ed.). New York: Pearson Education Group.

Boulden, W. T. (2001). Gay men living in a rural environment. *Journal of Gay and Lesbian Social Services*, *12*, 63 – 75.

Branscombe, N. R., Schmitt, M. T., & Harvey, R. (1999). Perceiving pervasive discrimination among African Americans: Implications for group identification and well-being. *Journal of Personality and Social Psychology*, *77*, 135 – 149.

Brodzinsky, D. M. (2003). *Adoption by lesbians and gay men: A national survey of adoption agency policies, practices and attitudes.* Retrieved February 18, 2009, from http://www.adoptioninstitute. org/whowe/Gay%20and%20Lˆsbian%20 Adoption 1.html

Bronfenbrenner, U., & Morris, P. A. (1998). The ecology of developmental processes. In W. Damon (Series Ed.) & R. M. Lerner (Vol. Ed.), *Handbook of child psychology: Vol. 1: Theoretical models of human development* (pp. 993 – 1028). New York: Wiley.

Butler, S., & Hope, B. (1999). Health and well being for late middle-aged and old lesbians in a rural area. *Journal of Gay and Lesbian Social Services*, *9*, 27 – 46.

D'Augelli, A. (2006). Coming out, visibility, and creating change: Empowering lesbian, gay, and bisexual people in a rural university community. *American Journal of Community Psychology*, *37*, 203 – 210.

Farber, M., Timberlake, E., Mudd, H., & Cullen, L. (2003). Preparing parents for adoption: An agency perspective. *Child and Adolescent Social Work Journal*, *20*, 175 – 196.

Gates, G., & Ost, J. (2004). *The lesbian and gay atlas.* Washington, DC: Urban Institute Press.

Gilman, L. (1998). *The adoption resource book.* New York: Harper Perennial.

Goldberg, A. E., Downing, J. B., & Sauck, C. C. (2007). Choices, challenges, and tensions: Perspectives of lesbian prospective adoptive parents. *Adoption Quarterly*, *10*, 33 – 64.

Goldberg, A. E., & Smith, J. Z. (2008). Social support and psychological well-being in lesbian and heterosexual preadoptive couples. *Family Relations*, *57*, 281–294.

Goldberg, A. E., & Smith, J. Z. (2009). Perceived parenting skill across the transition to adoptive parenthood among lesbian, gay, and heterosexual couples. *Journal of Family Psychology*, *23*, 861–870.

Hershberger, S., & D'Augelli, A. (1995). The impact of victimization on the mental health and suicidality of lesbian, gay, and bisexual youth. *Developmental Psychology*, *31*, 65–74.

Hicks, S. (1996). The 'last resort'?: Lesbian and gay experiences of the social work assessment process in fostering and adoption. *Practice*, *8*, 15–24.

Hicks, S. (2000). Good lesbian, bad lesbian: Regulating heterosexuality in fostering and adoption assessments. *Child & Family Social Work*, *5*, 157–168.

Houstion, D. M., & Kramer, L. (2008). Meeting the long-term needs of families who adopt children out of foster care: A three-year follow-up study. *Child Welfare*, *87*, 145–170.

James, S. E. (2002). Clinical themes in gay- and lesbian-parented adoptive families. *Clinical Child Psychology and Psychiatry*, *7*, 475–486.

Jones, E. E., Farina, A., Hestrof, A. H., Markus, H., Miller, D. T., & Scott, R. A. (1984). *Social stigma: The psychology of marked relationships.* New York: Freeman.

Kurdek, L. (2005). What do we know about gay and lesbian couples? *Current Directions in Psychological Science*, *14*, 251–254.

Leedy, G., & Connolly, C. (2007). Out in the cowboy state: A look at lesbian and gay lives in Wyoming. *Journal of Gay and Lesbian Social Services*, *19*(1), 17–34.

Lohmann, R. A., & Lohmann, N. (2008). *Rural social work practice.* New York: Columbia University Press.

Macaskill, C. (1985). Who should support after the adoption? *Adoption and Fostering*, *9*, 21–25.

Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and Social Behavior*, *36*, 38–56.

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, *129*, 674–697.

Miller, C. T., & Kaiser, C. R. (2001). A theoretical perspective on coping with stigma. *Journal of Social Issues*, *57*, 73–92.

Oswald, R. F. (2002a). Resilience within the family networks of lesbians and gay men: Intentionality and redefinition. *Journal of Marriage and Family*, *64*, 374–383.

Oswald, R. F. (2002b). Who am I in relation to them? Gay, lesbian, and queer people leave the city to attend rural family weddings. *Journal of Family Issues*, *23*, 323–348.

Oswald, R. F., & Culton, L. S. (2003). Under the rainbow: Rural gay life and its relevance for family providers. *Family Relations*, *52*, 72–81.

Oswald, R. F., Cuthbertson, C., Lazarevic, V., & Goldberg, A. E. (2010). New developments in the field: Measuring community climate. *Journal of GLBT Family Studies, 6*, 214–228.

Oswald, R. F., & Masciadrelli, B. P. (2008). Generative ritual among nonmetropolitan lesbians and gay men: Promoting social inclusion. *Journal of Marriage and Family*, *70*, 1060–1073.

Pickett, S., Cadenasso, M., Grove, J., Nilon, C., Pouyat, R., Zipperer, W., & Costanza, R. (2001). Urban ecological systems: Linking terrestrial ecological, physical, and socioeconomic components of metropolitan areas. *Annual Review of Ecological Systems*, *32*, 127–157.

Ross, M. W. (1985). Actual and anticipated societal reaction to homosexuality and adjustment in two societies. *Journal of Sex Research*, *21*, 40–55.

Ryan, S. D., Pearlmutter, S., & Groza, V. (2004). Coming out of the closet: Opening agencies to gay and lesbian adoptive parents. *Social Work*, *49*, 85–95.

Salamon, S. (1992). *Prairie patrimony: Family, farming, and community in the Midwest.* Chapel Hill, NC: University of North Carolina Press.

Shade, B. J. (1990). Coping with color: The anatomy of positive mental health. In D. S. Ruiz (Ed.), *Handbook of mental health and mental disorders among Black Americans* (pp. 273–289). New York: Greenwood.

Smart, L., & Wegner, D. M. (2000). The hidden costs of stigma. In T. Heatherton, R. Kleck, M. Hebl, & J. Hull (Eds.), *The social psychology of stigma* (pp. 220–242). New York: Guilford.

Smith, J. (1997). Working with larger systems. In J. D. Smith & R. J. Mancoske (Eds.), *Rural gays and lesbians: Building the strengths of communities* (pp. 13–21). New York: Hawthorne.

Sousa, L., & Rodrigues, S. (2009). Linking formal and informal support in multiproblem low-income families: The role of the family manager. *Journal of Community Psychology*, *73*, 649–662.

U.S. Department of Agriculture. (n.d.). Urban influence codes. Retrieved February 18, 2009, from http://www.ers.usda.gov/Data/UrbanInfluence Codes/.html

Wainright, J. L., Russell, S. T., & Paterson, C. J. (2004). Psychosocial adjustment, school outcomes, and romantic relationships of adolescents with same-sex parents. *Child Development*, *75*, 1886–1898.

Weston, K. (1991). *Families we choose: Lesbians, gays, kinship.* New York: Columbia University Press.