Parental (in)equality and the genetic link in lesbian families

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Parental (in)equality and the genetic link in lesbian families
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Objective: In this qualitative study, we investigate how lesbian couples experience and deal with the difference in genetic relatedness in their family. Background: Previous research showed that lesbian couples handle the difference with regard to genetic relatedness by, for instance, creating a narrative about physical resemblances or by focusing on the social bond and its influence on children. Methods: The findings are based on qualitative in-depth interviews with 10 lesbian couples who had at least one donor-conceived child aged 7–10. Results: The difference with regard to the genetic link brought up complex and context-specific experiences for these parents. Generally, the genetic link was described as irrelevant: equality between both parents was presented as a given. However, some experiences of difference due to the presence of one genetic link were found. In these accounts, the genetic link was described as a valuable extra that created an inequality between them as parents. Conclusion: The findings show that these mothers have a complex attitude towards genetic relatedness.

Keywords: assisted reproduction; gamete donation; qualitative research; family relationships; bioethics

Introduction
For several years, the construction of lesbian families through donor insemination has been a topic of investigation. These families challenge the classic Western notion of biogenetic parenthood and the nuclear family given the nurturing by two mothers and the use of donor insemination (Haimes & Weiner, 2000). The use of donor material results in a family situation where only one of the parents is genetically related to the children. Consequently, these couples have to develop their own view on the importance of genetic ties and social connectedness with regard to parenthood. Previous research showed that lesbian couples handle these challenges by, for instance, creating a narrative about physical resemblances or by focusing on the social bond and its influence on children (Goldberg, Downing, & Sauck, 2008; Golombok, Tasker, & Murray, 1997; Jones, 2005; Nordqvist, 2010, 2014; Vanfraussen, Ponjaert-Kristoffersen, & Brewaeys, 2003).

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It is not only lesbian couples who challenge the traditional nuclear family ideal. Heterosexual couples using donor gametes are also confronted with the centrality of genetic connectedness in our society. One major expression of this cultural norm is the resemblance talk (Becker, Butler, & Nachtigall, 2005). Physical resemblances are seen as a proof of kinship and, thus, as a support for the genetic relatedness (Hargreaves, 2006). Couples using gamete donation sometimes create this ‘proof’ of a connection between the child and both parents by matching certain characteristics of the donor to those of the social parent (Becker et al., 2005; Burr, 2009; Scheib, Riordan, & Shaver, 2000). Apart from the matching, these couples also compensate for this lack of a ‘full’ genetic connection – in a similar way as the lesbian couples – by privileging social ties and valuing nurture over nature (Frith, Sawyer & Kramer, 2012; Hargreaves, 2006).

Next to the heterosexual couples using gamete donation, surrogacy arrangements also form an exception to the classic family formation. The intended mother in such arrangements has no biological link (she did not give birth to the child) and in some cases also no genetic link (when oocyte donation was used). From this point of view, the intended mother is similar to the social mother in lesbian families. These women also have to deal with the lack of a biological and sometimes genetic link. Van den Akker (2000) showed that with regard to the genetic link, intended mothers who could use their own material in the surrogacy arrangement tended to value the genetic link, while intended mothers who had no link (neither biological nor genetic) were less uniform in the value they attached to the genetic link.

In this article, the focus lies specifically on the meaning of the genetic link in lesbian families. Our aim is to investigate how these couples experience the fact that one mother is genetically related to her child(ren) while the other mother is not and how they deal with this difference. Ideas about genetics and blood ties are complex and rarely present a watertight logical reasoning. People’s attitudes towards biogenetic ties are not ‘rational’; on the contrary, they are often contradictory and fragmented (Bestard, 2009). In this study we want to carefully map these couples’ attitudes.

**Method**

**Participants**

Ten lesbian couples (20 participants) were recruited via the Department of Reproductive Medicine of the Ghent University Hospital. They were called by the Department’s counsellor, whom they had seen during their counselling session at the time of treatment. The participants were recruited in October 2012 based on a list of lesbian couples ($n = 42$) who were accepted for treatment (and subsequently treated) with anonymous sperm donation between 2002 and 2004 and who met the following inclusion criteria: Belgian citizenship; Dutch-speaking; at least one child via donor insemination between 7 and 10 years old at the time of the interview. Couples who opted for intrapartner oocyte donation were excluded in order to obtain a homogeneous sample of couples (where one parent has a genetic link and the other does not) with a similar experience (donor insemination and parenthood). The women were recruited according to the year of birth of their first-born child. Couples with the eldest child were contacted first. A total of 10 couples was set as
a goal before recruitment. To reach this number, 16 women had to be contacted. Reasons for not including the six other couples were: inadequate contact information or language difficulties (5) and no response after receiving information about the study protocol (1). An informed consent form was signed by both partners at the time of the interview. The study was approved by the Ethics Committee of the Ghent University Hospital. Table 1 provides more detailed information about the participants and their children.

**Interviews**

Semi-structured couple interviews were carried out by a psychologist of the research team who was not affiliated to the Department of Reproductive Medicine. We chose to do couple interviews because we considered the possible discussions and interactions between both participants as valuable. In that regard, couple interviews have the possibility of producing richer data than individual interviews (Bjornholt & Farstad, 2014). Interviewing the couples together affects the data in several ways (Taylor & de Vocht, 2011). The participants were interviewed at home (n = 9) or at the fertility clinic (n = 1), according to their own preferences. The interview duration ranged from 90 to 120 minutes. The interviews were recorded and transcribed verbatim. Anonymity was ensured by replacing all the names of persons and places by either pseudonyms or a single letter.

This study is part of a larger research project with multiple focuses related to the participants’ thoughts on and experiences with different aspects of (parenthood after) donor conception (Wyverkens et al., 2014). The interview was divided into two parts. The first part included open-ended questions about the couples’ experiences and perceptions of the treatment. The second part included more specific questions to investigate moral reasoning about certain topics. Topics such as what is parenthood and how is it experienced, the importance of resemblances, the importance of genetic and social ties and questions about the donor were touched upon. With regard to the donor, their opinion on donor anonymity and open identity were discussed, as well as their perception of the donor with specific questions about the rights and obligations of the donor and the selection of the donor. To finish this part of the interview a hypothetical scenario was presented to investigate

Table 1. Participants characteristics.a

<table>
<thead>
<tr>
<th>n</th>
<th>Biological mother (34–47)b</th>
<th>Social mother (37–52)</th>
<th>Children (1–9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Sara</td>
<td>Lisa</td>
<td>Timothy &amp; Lynn</td>
</tr>
<tr>
<td>02</td>
<td>Mia &amp; Kim</td>
<td>Mia &amp; Kim</td>
<td>Tom &amp; Eva</td>
</tr>
<tr>
<td>03</td>
<td>Rose</td>
<td>Liz</td>
<td>Ben &amp; Jessica</td>
</tr>
<tr>
<td>04</td>
<td>Nicole</td>
<td>Angela</td>
<td>Travis, Rian, Antonio &amp; Milo</td>
</tr>
<tr>
<td>05</td>
<td>Mary</td>
<td>Monica</td>
<td>Charlie</td>
</tr>
<tr>
<td>06</td>
<td>Lauren</td>
<td>Jill</td>
<td>Walter</td>
</tr>
<tr>
<td>07</td>
<td>Beth</td>
<td>Lydia</td>
<td>Neil &amp; Florence</td>
</tr>
<tr>
<td>08</td>
<td>Kate</td>
<td>Sandy</td>
<td>Kenny &amp; Marilou</td>
</tr>
<tr>
<td>09</td>
<td>Martha</td>
<td>Lexi</td>
<td>Bart &amp; Mathilda</td>
</tr>
<tr>
<td>10</td>
<td>Ysa</td>
<td>Annie</td>
<td>Brenda, Geena &amp; Louise</td>
</tr>
</tbody>
</table>

*aPseudonyms are given to protect the privacy of the participants.

*bYears of age, range.
their reasoning about parental rights and obligations in combination with the presence or lack of genetic and social ties with the child. This article focuses on one specific question we asked during the second part of the interview to investigate their perceptions about the genetic link: ‘You (to the genetic mother) have a genetic link with your children, you (to the social mother) do not. How is that for you (to the couple)?’ Other parts of the interview were also included when relevant to our research question.

**Analysis**

The data were analysed using an inductive thematic analysis method (as presented by Braun & Clarke, 2006). We chose this method because it provides a flexible research tool suited for a large and complex data set. The analysis consisted of a phased process, starting with familiarisation with the data and memo writing. The transcripts were then screened with the research question in mind and relevant text units were coded inductively. From these codes, higher-level codes and themes were derived. During this process, a team of auditors (second, third and last author) was invited to challenge the initial codes and themes via alternatives and counterexamples (Hill, Thompson, & Nutt-Williams, 1997). The structure of the themes was written down in an analysis report which was extensively examined and challenged by the auditor team. After discussions, the final structure of the themes was agreed upon. To improve data analysis, discussions and intensive training sessions with the whole team were organised in order to learn from each other and to become aware of alternative viewpoints on the matter.

**Results**

We identified two major themes which offered insights into how lesbian couples experience the difference in genetic relatedness and how they deal with it. The first theme represented the general opinion that prevailed in all interviews; namely, that the genetic link was not relevant in their family and did not create a difference between the parents. The second theme comprised the couples’ experience of differences due to the fact that one mother was genetically related to her child(ren) while the other mother was not. Figure 1 gives an overview of the themes and subthemes. The size of the circles shows which themes were more present in the couples’ experiences: the bigger the circle, the more present the theme.

**The genetic link as irrelevant: equality between parents**

The general view put forward in all interviews was that the genetic link was not a relevant issue for them as parents. The mothers had the feeling that they were equal as parents and that the presence of a genetic link with one of the mothers did not play a role. Both biological and social mothers shared this general perception and they supported each other in explaining this to the interviewer.

*Equality as a given*

Several couples clarified that they did not make a distinction between each other. They referred to the genetic link as something that did not matter.
Nicole and Angela together: It doesn’t matter.
Nicole (biological mother): Not for us.
Angela (social mother): No.

Along the same lines, one social mother said that she did not feel like she had to put more effort in the parenting because she was ‘merely’ the social mother; she felt as much a mother as the biological mother. While it was often claimed that genetics was irrelevant for their parenting, one couple stressed their equality by drawing resemblances. They gave examples of ways in which the children were like the social mother. Resemblances are typically seen as something exclusive to genetics and blood ties. By talking about resemblances between the social mother and the children, the participants created a link between them that was equal to the genetic link between the genetic parent and the children.

Angela (social mother): Yes, like even in what they [the children] eat, and uhm, how they talk. Derek (son) is exactly like me when he talks, you know, in his pronunciation and things ...

Nicole (biological mother): yeah, indeed.

Most couples also described the irrelevance of genetic relatedness by talking about how they perceived their relationship with their child(ren). They both viewed the children as equally ‘theirs’. Phrases such as ‘they couldn’t be more mine’ and ‘we simply have two kids’ were used by both partners. Some couples explained that the decision to have a child was a joint decision and that this was more
important than the genetic grounds of parenting. This joint intention not only made them parents, it made them equal parents.

Mary (biological mother): We made those decisions together back then, and I consider Charlie as much as Monica’s son, as I consider him my son.

This position was generally supported by factual statements. However, some couples also presented equality as a goal, hereby taking a normative position. Lisa and Sara, for instance, were convinced that parents should be equal. Lisa (social mother) said: ‘If you know in advance, or if – in the back of your mind – you still think it makes a difference, then you better not even start.’ In another interview, it was mentioned that equality was achieved by, for instance, having the social mother take care of the baby (e.g. changing diapers) from the moment he was born.

Confirmation of parental equality
Some couples not only talked about how they viewed the genetic link and its relation to parenthood, they also mentioned the behaviour of others which, according to them, proved their parental equality.

Children
Two couples took their children’s opinion into account, saying that the children did not distinguish between the mothers. They saw their children’s behaviour as a confirmation of their equality as parents.

Angela (social mother): The children don’t give me the feeling that she is the natural mum and that I’m merely the mommy, that -. They don’t know any better. Well, of course they know that Nicole is the natural mum, but for me there really is no difference, at all. And I think that’s because of the boys. If the boys were to keep more distance from me, maybe then it would be different.

Social environment
Some couples focussed on how they thought the wider social context perceived them and brought up the reaction from other people to support their equality. Four couples explained that strangers in the street saw the social mother as the ‘real mother’ (the biogenetic mother) because of the perceived physical resemblances between her and the children. This was experienced as ‘good’ or ‘nice to hear’ by both mothers, but especially by the social mother. Angela, for instance, said ‘Oh, when they say that they (the children) look like me, you feel more involved.’ Later on she added ‘yeah, it is something extra, like, you know, I didn’t give birth, but they do look like me.’ This established her status as a full-fledged parent, because she was put at the same level as the biological mother.

The genetic link as relevant: the experience of a difference
Apart from the general view that they were and should be equal as parents, some experiences of a difference due to a one-sided/partial genetic relatedness were also mentioned in the interviews. Some couples described these experiences explicitly,
while others mentioned them only subtly. Nearly all mothers said that they considered these experiences as insignificant and explained that equality prevailed.

Differences were mainly reported by the social mothers, but to a lesser degree also by the biological mothers. The social mothers described more negative feelings, experiencing the genetic link as something they lacked. The biological mothers outlined more positive feelings, emphasising the genetic link as something valuable they had on top of the social bond.

The genetic link as a valuable extra

Three social mothers explained their perception of the genetic link and described how it created a difference between them and their partner. They stated that genetic relatedness was a special feeling they would never experience; it was something on top of the social bond that both mothers had with their children. Monica, for instance, described this idea and explained the genetic link was something ‘fundamental’:

I can’t imagine the bond between a mother and her child. You know, I’m convinced that what she (genetic mother) experiences is something quite different from what I have with Benjamin (son). […] to me, Benjamin is my son, but I mean, yes, the deeper meaning of it, you know. […] flesh and blood is, yes, I cannot descri—, that bond, it’s like it’s on a higher level, I don’t know how to explain it.

Anni explained that she recognised several physical characteristics (hereditary traits) of the biological mother in the children. She regretted that she would never have such resemblances due to the absence of a genetic link for her.

When talking about these particular experiences, the mothers immediately added that they were rare, that these thoughts only popped up sometimes or in specific situations and that they did not bother them much. For instance, Lydia continued: ‘And then I think “oh, well, that’s a pity”, but then I immediately think “it is what it is”’. Monica clarified that: ‘it’s not that it’s constantly on my mind, no.’

Experiences with regard to the genetic link were also mentioned by some of the biological mothers. In contrast to the social mothers, these experiences were positive. Beth, for instance, described the presence of a genetic link as ‘a nice feeling’ that she regarded as valuable in some way. At the same time, like the social mothers, she stressed that these feelings were rare and that she often forgot that her partner did not have such a link. By doing this, she confirmed the general framework that both parents were equal (Theme 1). Two biological mothers also mentioned differences due to hereditary traits. In their experience, recognising characteristics of themselves in their child was a valuable privilege for the biological mother. Kate, for instance, explained it as ‘special’ to recognise the physical traits of her father and other family members in her son.

Challenges to parental equality

In the first theme we described how parents found confirmation of their equality as parents in their environment. At the same time, they also mentioned cues that pointed towards the value of a genetic link and consequently also to the difference between them as parents.
Children

Even though parents generally had the feeling that the children approached them as equal parents, some couples reported that the behaviour of the children made them feel unequal. The couples described that their child at times preferred to be with the biological mother. They found an explanation for this particular behaviour in the presence of the genetic link.

Lydia (social mother): Well, yes, sometimes I notice that Florence (daughter) tends to favour you. And then I think, you know, had she come out of my belly, she might have favoured me because I, because there is a kind of, connection, something, between flesh and blood. I don’t know. So that does cross my mind sometimes when I see her going on “Oh mummy this” and “mummy that”.

Again, a nuance to this experience was added: ‘But it’s only, it’s only for a fraction of a second that you notice, that you think or feel like that, and then it is gone. Nothing, uhm, nothing special you know [laughs].’

Society

Although the couples had the possibility of using donor insemination to start a family, the law only considered the birthmother as the legal mother. If the social mother wanted to be recognised as a legal parent, she needed to adopt her child. According to them, this situation imposed an inequality on the mothers. Not being the legal parent had practical consequences such as not being able to make important decisions in case of illness of the child or in case something happens to the biological mother, and not being able to bequeath one’s possessions to the child. Four social mothers adopted the children to avoid these consequences. However, regardless of this imposed legal inequality, they still felt equally worthy as a mother.

Sara (biological mother): Imagine that something happens to me, you’re never sure. Also with regard to inheritance, now the children can also inherit from you … and also, what if they are seriously ill and some very important decisions have to be taken, she would never have been able to take them […] that were all juridical things, because, for us, for our feeling, that was not necessary.

Lisa: No, that was not necessary.

Donor

Four social mothers perceived the donor, who was a necessary factor to have the child, as another challenge to their equality as parents. In this respect, the choice for anonymous donation was very important. A known donor might have interfered and could have received the status of a ‘real parent’ or the second parent because of his genetic link with the children. The social mothers believed that they would then come third in line. As for the donor, the genetic link was thus suddenly seen as an unconditional right to parenthood. In contrast to their initial views on the irrelevance of the genetic link for the two mothers as parents, this genetic link determined his position towards the child.

Jill: That’s why I’m glad we quickly agreed to choose someone anonymous. Because I said ‘I’d be one step behind’. […] imagine, if the father gets involved, imagine that
he calls tomorrow and says: ‘Look, I want to meet Andy (son)’, then, yes, I’d be one step behind. Then it’s the mother and the father, the natural biological mother and father, so yes, I’m pushed aside. You know, that’s how I would feel.

Discussion

Participants’ meaning-making of genetic relatedness seemed to be complex and context-specific. The couples’ experiences of the difference in genetic relatedness turned out to be inextricably linked with how they view themselves as parents, and thus, the development of their parental identity.

Our findings showed that these couples thought of parental equality as a given. The focus on joint parental decisions and experiences with their children and the social environment were meant to support this equality idea. However, tension was revealed when some couples mentioned equality as a goal, hereby adopting a normative position. This same tension also became clear when one couple described their search for similarities between the social mother and the children in order to establish a balance with the physical similarities the biological mother had with their children. One may wonder why striving and searching for equality is necessary when it is already perceived to be there. Previous studies have shown that equality in daily parenting practice is an important factor in the creation of these families. Chan, Brooks, Raboy, and Patterson (1998) investigated the division of labour between heterosexual and lesbian families using donor insemination and found that the child-care tasks were divided more equally in the lesbian families. The authors also showed that equality was highly valued and desired more in lesbian families than in heterosexual families. A more technical approach to achieve equality is partner donation: one woman donates the eggs and the other carries the pregnancy (Pelka, 2009). This technique makes it possible for lesbian prospective parents to both participate biologically in the creation of a child (Dondorp, De Wert, & Janssens, 2010; Marina et al., 2010).

Together with the focus on equality, also experiences of a difference due to one-sided/partial genetic relatedness were mentioned. These experiences were influenced by several factors. First, factors within the family were mentioned. Social mothers talked about missing the genetic link, or seeing the genetic link as an extra bond on top of the social bond. Biological mothers enjoyed having a genetic link with the children, and considered genetic resemblances as valuable. Couples also talked about the (rare) favouring behaviour of the children. Preference for the biological mother in some situations, stressed the idea that there might be a difference between both mothers. Second, factors from outside the family played an important role in these experiences. First of all, the law makes a distinction between the mothers because only the genetic mother is seen as the legal mother. The social mother has to adopt the child in order to obtain this legal status. If she does not adopt the child, this has consequences in daily practice. For instance, she will not be allowed to sign school documents. Nordqvist (2012) also found that the legal status was perceived as a societal factor which imposed a difference. A second external factor that revealed experiences of a difference was the donor. These findings showed that lesbian mothers found it difficult to deal with the genetic link when it concerned the link between the donor and their children. In the light of the general equality narrative, it is remarkable that some parents would grant the donor an unconditional right to parenthood if he were to turn up. The genetic link
between the donor and their children seemed to have a different status from the genetic link in their own family. For them as parents, the genetic link was not relevant for parenthood, but for the donor, it was the one sufficient element for claiming parenthood and the associated rights and duties. This suggests that these lesbian parents find genetic relatedness in their family and the presence of a genetic link for an anonymous donor with their children difficult to handle.

Overall, the couples stressed that these experiences of a difference detracted nothing from the parental equality. These statements can be understood in two ways. One is that the parents indeed did not bother about the difference in genetic relatedness. The few times a difference popped up were considered insignificant and not worth the attention. The second hypothesis is that a difference was in fact experienced and that these statements should be seen as part of their ‘functional’ narrative to deal with the rather uncomfortable experiences of a difference. People construct coherent life stories in order to make sense of their lives (Mcadams, 2006). This means that events that relate to the desired outcome are highlighted and events that do not fit the story are minimised or completely left out (Polkinghorne, 2004). The family narrative has to be ‘manageable’ and functions as a way of dealing with complexities and contradictions (Crossley, 2007; Polkinghorne, 2004).

**Limitations and clinical implications**

First, we should take the context of the interview into account where the participants talked to both the interviewer and the partner. The downplaying of the difference with regard to genetic relatedness with the child(ren) can be understood as an attempt to protect the family cohesion in front of the other mother, and more importantly, not to offend the other mother by telling either positive or negative experiences related to the genetic link. Second, our study does not allow comparison of the experiences and attitudes of homosexual and heterosexual families. Parental gender, however, may be a possible influencing factor. As a consequence, our findings only tell us something about the experiences of lesbian parents.

This study confirms what has also been found in other studies; namely, that people’s views and attitudes may change over the years in reaction to the child’s development and the social environment. Counselling should try to make this clear to patients starting treatment with donor gametes.

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