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Father-Child Attachment in Adoptive Gay Father Families

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Abstract

Findings are presented from the second phase of an investigation of the attachment security of children in adoptive gay father families. Children (10-14 years) in 30 gay father families, 29 lesbian mother families and 38 heterosexual parent families were interviewed using the Friends and Family Interview (FFI). Children in gay father families showed significantly higher levels of secure-autonomous attachment than children in heterosexual parent families, significantly lower levels of preoccupied attachment than children in either lesbian mother or heterosexual parent families, and significantly lower levels of disorganised attachment than children in heterosexual parent families. For children in gay father families, stepwise multiple regression revealed that neither hyperactivity nor emotional symptoms at Phase 1 were predictive of disorganisation at Phase 2. However, when entered alone, Phase 1 emotional symptoms predicted Phase 2 disorganisation. The results indicate that adopted children in gay father families are at least as likely to be securely attached as children in lesbian mother or heterosexual parent families.

Keywords: gay father families, same-sex parenting, adoption, attachment, adjustment.

Approximately 20,000 children reside in same-sex parent families in the UK (Fairbairn, 2016) and since the UK Adoption and Children Act came into force in 2005, a growing number of these families are adoptive same-sex parent families. Research into these growing family forms has predominantly focused on lesbian mother families compared to gay father families. Further, there is a dearth of research concerning attachment security in same-sex parent families. The present study aims to assess whether there are differences in the attachment security of adopted children raised by gay fathers, as compared to lesbian mothers and heterosexual parents.

A wealth of research has investigated lesbian mother families including longitudinal studies (Gartrell & Bos, 2010), meta-analyses (Fedewa, Black, & Ahn, 2015) and studies using nationally representative samples (Wainright, Russell, & Patterson, 2004). This body of research has consistently demonstrated that children of lesbian mothers are just as likely to be well adjusted and have high quality relationships with their parents as children with heterosexual parents. As such, it is reasonable to expect that the attachment security of children in lesbian mother families would be similar to children raised in heterosexual parent families. Although lesbian mother families and gay father families share the non-traditional feature of having same-sex parents, gay father families possess the additional non-traditional feature of having men as primary caregivers. The presumption that mothers possess an innate ability to parent (Silverstein & Auerbach, 1999), coupled with the historical emphasis on mothers as primary attachment figures (Bowlby, 1969), elicits questions about the attachment security of children raised by primary caregiving fathers. Thus, it cannot necessarily be presumed that the attachment security of children in gay father families will be the same as that of children in lesbian mother families.

Research on Adoptive Gay Father Families

The existing research on gay father families is indicative of positive family functioning (Farr, Forssell, & Patterson, 2010; Farr, 2017; Goldberg & Smith, 2013; Golombok, et al, 2014). The first systematic study of adoptive gay father families was conducted in the United States (Farr et al., 2010), whereby questionnaires were administered to teachers and parents when the children were preschool age (13 to 72 months). The children in gay father families showed comparable levels of behavioural problems to those adopted by lesbian or heterosexual parents. Notably, several family process variables (including parenting stress and couple relationship adjustment) were significantly associated with child adjustment, irrespective of family type. The families were followed up when their children reached middle childhood (Farr, 2017) and again, the adjustment of children in gay father families was no different to that of children raised by lesbian or heterosexual parents. Instead, child behavioural problems at wave two were predicted by child adjustment problems and parenting stress at wave one.

The goal of the present study was to examine the attachment security of children in adoptive gay father families using data obtained from the first systematic study of adoptive gay, lesbian and heterosexual parents to be conducted in the UK (Golombok et al., 2014). Gay, lesbian and heterosexual parent families were visited when the children were aged 3 to 9 years. Using a number of methods including standardised interviews, questionnaires and observational measures, the findings indicated more positive family functioning in gay father families than in heterosexual parent families (Golombok et al., 2014). Compared to heterosexual parents, gay fathers were more responsive and warm towards their children and spent a greater amount of time engaged in shared activities with them. Additionally, children of gay fathers exhibited lower levels of externalising problems than their peers in heterosexual parent families. Importantly, however, parenting stress was predictive of child externalising problems, regardless of family type.

Only one study has focused on children's attachment to their gay fathers. The Inventory of Parent and Peer Attachment was administered to 11- to 19-year-olds with either same-sex or heterosexual parents and there were no differences in children's attachment security as a function of parental sexual orientation (Erich, Kanenberg, Case, Allen, & Bogdanos, 2009). However, just nine of the 27 same-sex parent families were gay father families. Additionally, lesbian mother families and gay father families were grouped together in the analysis, limiting the conclusions that could be made regarding the impact of motherless parenting on attachment formation. In the current study, we have 30 gay father and 29 lesbian mother families. These two groups remain distinct throughout the analyses.

The Attachment of Adopted Children

Since children in the current study were adopted via the UK child welfare system, one must understand how adoption influences children's development, and the attachment relationship between adopted children and their parents specifically. From an ecological perspective (Bronfenbrenner, 1986), adopted children are influenced by multiple and intersecting contexts, including the birth family and the adoptive family. Stressors in either of these environments may influence the adjustment of adopted children. Children are particularly vulnerable to caregiving experiences during their first year of life (Dozier, & Rutter, 2008); early experiences of maltreatment, deprivation and neglect within the birth family can have long-term consequences for attachment organisation in the adoptive family. Van den Dries, Juffer, van IJzendoorn and Bakermans-Kranenburg's (2009) meta-analysis of observational studies of attachment security found that children adopted after their first birthday were more likely to show insecure attachment relationships than their non-adopted peers. Additionally, regardless of age at adoption, adopted children were more likely to show disorganised attachment relationships to their adoptive parents. There is some evidence to suggest that attachment style varies as a function of maltreatment type, with neglected children more likely

to display dismissive or preoccupied attachment patterns and physically abused children more likely to show a disorganised attachment pattern (Crittenden, 1988; Valenzuela, 1990). Therefore, any differences found in the current study regarding attachment quality observed between family types may be due to differences in children's pre-adoption experiences. Thus, the relationship between pre-adoption history and attachment security will be explored.

Attachment and Adjustment

Although insecure attachment is rarely the sole cause of later disorder, insecure attachments in infancy and throughout development increase the risk for a variety of problems (DeKlyen & Greenberg, 2008). In children under 12 years of age, both disorganised and avoidant child-mother attachment patterns are associated with externalising problems (Fearon, Bakermans-Kranenburg, van IJzendoorn, Lapsley, & Roisman, 2010). There is also evidence of a small, yet significant association between early insecure-avoidant attachment and internalising symptoms (Groh et al, 2012). Furthermore, early attachment insecurity has been linked to later psychopathology; ambivalent infant attachment has been associated with anxiety disorders in adolescence (Warren, Huston, Egeland, & Sroufe, 1997) and disorganised infant attachment has been linked to dissociative symptoms in adulthood (Sroufe, Egeland, Carlson, & Collins, 2005). Although most research has focused on the impact of early attachment security on later adjustment, it is also possible that early adjustment problems have implications for attachment formation later in childhood. This may be especially pertinent in the case of adoption; the elevated adjustment problems of adoptees may interfere with the formation of secure attachments to adoptive parents. For example, children with histories of maltreatment may come to believe that dependence on caregivers is risky or distressing (Hodges, 2008) and behave in oppositional or negative ways to ensure independence from their adoptive parents and maintain a sense of control. As parents and children exert reciprocal influences on each other (Burke, Pardini, & Loeber, 2008), negative behaviour shown by adopted children may

elicit negative responding from the adoptive parents, reducing the likelihood that parents will respond with the sensitivity required to promote attachment security (Bakermans-Kranenburg, Van IJzendoorn, & Juffer, 2003). A recent observational study of previously maltreated adolescents in foster care focused on the formation of attachments to foster parents and found that attachment security was associated with fewer disruptive behavioural symptoms (Joseph, O'Connor, Briskman, Maughan, & Scott, 2014). Crucially, the authors noted that lower levels of disruptive behaviour could be either a cause or consequence of secure attachment. This is supported by a qualitative investigation of adoptive parents' perceptions of parental bonding in which several parents attributed bonding difficulties to their children's adjustment problems (Goldberg, Moyer, & Kinler, 2013). Therefore, differences in children's adjustment may account for differences in attachment security between family types.

The Current Study

The current study is the first to focus on the attachment security of adopted children raised in gay father families. This is particularly important given changes to legislation permitting gay couples to become joint legal parents of their adopted children in the UK and in other countries throughout Europe (Takács, Szalma, & Bartus, 2016). The primary aim was to assess whether there were differences in the attachment security of adopted children raised by gay fathers, as compared to lesbian mothers and heterosexual parents. Considering the positive family functioning in gay father families at Phase 1, when the children were aged 3 to 9 years (Golombok et al., 2014), we expected children's attachment security would not differ across families based on parent sexual orientation. The second aim was to investigate factors associated with differences in children's attachment security *within* gay father families. We predicted that children who had experienced greater pre-adoption adversity would show higher levels of insecure attachment patterns to their gay fathers. We also hypothesised that children

with greater adjustment problems at Phase 1 would show higher levels of insecure attachment patterns at Phase 2.

Methods

Participants

Phase 1. With the help of the British Association of Adoption and Fostering, adoption agencies that had placed children with same-sex parents assisted with recruitment by contacting gay, lesbian and heterosexual parents who had adopted children through their agency. Additionally, information about the study was disseminated to 2 support groups for gay and lesbian adoptive families. Inclusion criteria were that the child was aged between 4 and 8 years and had been placed with the adoptive family for a minimum of 12 months. Yet, to maximise sample size, two children within 1 month of reaching age 4 and two children who had just passed their 9th birthday were included. Due to service pressures, not all agencies involved in recruitment kept systematic records of the families they had contacted. However, for those that did, the participation rate was 71%. The original sample consisted of 130 two-parent adoptive families (41 gay father, 40 lesbian mother and 49 heterosexual parent families) with a child aged between three and nine years ($M= 73.53$, $SD= 18.39$) Full details of recruitment and design can be found from the original publication (Golombok et al. 2014).

Phase 2. During March 2016 – March 2018, participants from Phase 1 were re-contacted via phone calls, emails and letters to identify whether they wished to participate in Phase 2. Given the length of time between Phase 1 (2010-2012) and Phase 2 (2016-2018), some contact information was no longer accurate. Thus, messages were sent both on LinkedIn and Facebook to these participants. At Phase 2, children were aged between 10 and 14 years ($M= 11.44$, $SD= 1.19$). The response rate was 86%, with 112 families participating in Phase 2. Nine of the children did not participate in the FFI: two did not provide written assent to the interview, and seven did not participate in Phase 2. A further six families had unrateable child

attachment data due to either discontinuation of the interview, parental interference during the interview, and/or limited communication due to learning difficulties. This resulted in a final sample of 97 rateable FFI's from 30 gay father, 29 lesbian mother and 38 heterosexual parent families. There was no bias in attrition patterns; with no significant differences in family type, parental age, child age, child age at adoption, child length of placement, child sex, or child adjustment among those who participated at Phase 2 compared to those who participated only at Phase 1.

The majority of the sample comprised two-parent families with the original adoptive parents (94.85%). The parent primarily involved in childcare was labelled Parent A and the co-parent was labelled Parent B. Where child care was distributed evenly, Parents A and B were labelled at random. Where the families had become one-parent families, a label of Parent A was given to obtain the most information possible, as the Parent A interview had more questions than the Parent B interview.

There were no differences between the three family types with regard to the age of the child, length of placement, age of Parent A, age of Parent B and number of pre-adoptive placements. However, there was a significant difference between family types with respect to the age of child at adoption, $F(2, 93) = 4.07, p = 0.02$, indicating gay fathers adopted older children compared to heterosexual parent families (see Table 1).

There was no significant difference between family types in number of siblings, family structure, and Parent A and B's occupations, working status and qualifications, or in Parent B's ethnicity. There was a significant difference for Parent A's ethnicity ($p = 0.04$), with significantly fewer White lesbian mothers than White gay fathers and heterosexual parents. Moreover, there were significantly more ethnically Mixed Parent A lesbian mothers than Parent A gay fathers and Parent A heterosexual parents. There was a significant difference

between family types regarding the gender of the adoptive child $\chi^2(2)=10.33$, $p= 0.01$, with more boys than girls in gay father families and more girls than boys in lesbian mother families.

Procedure

Ethical approval was obtained from the Cambridge Psychology Research Ethics Committee. Research visits were conducted at the homes of the participating families. Written informed consent was gained from each parent and the child, with parents also providing consent for their child's participation. Semi-structured interviews were administered to each parent and the target child, which were audio-recorded and then transcribed verbatim. The present paper focuses on data obtained from the interviews with the children.

Measures

Child attachment. At Phase 2, children were interviewed using the Friends and Family Interview (FFI; Steele & Steele, 2005), a semi-structured interview designed to assess attachment security in middle childhood and adolescence. FFI questions focus on significant relationships at this developmental stage (i.e. those with parents, peers, siblings and teachers) and are coded for the child's overall attachment security. The FFI assesses various constructs including coherence, reflexive functioning and the child's perception of their parent(s) as available to provide both instrumental support (secure base) and emotional support (safe haven). Particular attention was given to the child's coping strategies and the way in which they discussed the relationships with their parent(s). Scores on these individual constructs inform the overall scoring for attachment security across four dimensions: secure-autonomous, insecure-preoccupied, insecure-dismissing and insecure-disorganised attachment patterns. Each dimension is scored using a four-point scale ranging from 1 (no evidence) to 4 (significant evidence) with higher scores reflecting higher levels of the attachment dimension.

The FFI has demonstrated good interrater reliability and construct validity (Kriss, Steele, & Steele, 2012) and has been used successfully with samples of adopted children

(Stievenart, Casonato, Muntean, & van de Schoot, 2012). The interviews were audio-recorded and transcribed verbatim before being coded by one of the researchers (AM) trained in using the FFI Rating and Classification system (Kriss et al., 2012). Forty-five of the FFIs were coded by a second independent rater. Interrater reliabilities were calculated using Intraclass Correlation Coefficients (ICCs) and were: .71 for secure-autonomous, .74 for insecure-dismissing, .73 for insecure-preoccupied and .75 for insecure-disorganised.

Pre-adoption history. At Phase 1, information was obtained during parent interviews about the children's pre-adoption history. This included whether the child had experienced physical abuse, emotional abuse, neglect or domestic violence, and whether the birth parents had been convicted of criminal behaviour, had mental health problems or had misused alcohol. Parents were asked to indicate 'no', 'suspected', 'yes' or 'unknown' regarding whether each item was true for the children according to the information they have been given. Information was collected where available; this was not possible for all families as some did not have comprehensive and/or accurate information regarding their child's pre-adoption history. The data were then aggregated into a binary variable: yes/suspected and no/unknown.

Child adjustment. At Phase 1, the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) was administered to Parent A to assess the presence of children's psychological problems. Scores from the following five subscales were calculated: hyperactivity, conduct problems, emotional symptoms, peer-problems and prosocial behaviour. Higher scores indicate greater problems in each of these domains. The SDQ is a widely used measure of child adjustment that has been shown to have good internal consistency, test-retest and interrater reliability, and concurrent and discriminative validity (Goodman, 1994, 1997, 2001; Stone, Otten, Engels, Vermulst, & Janssens, 2010).

Analysis plan

A multivariate analysis of covariance (MANCOVA) was used to examine differences between the three family types on the secure-autonomous, insecure-dismissive, insecure-preoccupied and insecure-disorganised FFI subscales. As child gender differed significantly between family types and was significantly associated with children's attachment scores, child gender was entered into the analysis as a covariate. One-way analyses of covariance (AVCOVAs) were then carried out for each variable included in the MANCOVA. Where a significant group difference was found for an individual variable, the following planned contrasts were conducted to examine differences in children's attachment security between 1) gay versus lesbian families and 2) gay versus heterosexual families. Regression analyses were then conducted for the gay father families to identify associations between pre-adoption adversity and attachment patterns, and between children's adjustment at Phase 1 and attachment patterns at Phase 2.

Results

Attachment in gay father families

For the MANCOVA, Wilks' Lambda was significant, $F(8, 180) = 2.33, p = .02$, indicating a significant difference in attachment patterns between family types. There was a significant difference between family types for secure-autonomous attachment, $F(2, 93) = 7.87, p = .04$. Planned contrasts revealed that children in gay father families had significantly higher levels of secure-autonomous attachments than children in heterosexual parent families, $p = .045, 95\% \text{ CI} [-.61, -.01]$. There was no significant difference in secure-autonomous attachment between children in gay father families and children in lesbian mother families, $p = .87, 95\% \text{ CI} [-.30, .35]$ (see Table 2).

With respect to insecure attachment patterns, there was no significant difference between groups for insecure-dismissive attachment, $F(2, 93) = 2.14, p = .13$.

There was a significant difference between groups for insecure-preoccupied attachment, $F(2, 93) = 3.67, p = .03$, with children in gay father families having lower scores than children in lesbian mother families, $p = .02$, 95% CI [.08, .88] and children in heterosexual parent families, $p = .02$, 95% CI [.08, .81].

There was a significant difference between family types for insecure-disorganised attachment, $F(2, 93) = 4.7, p = .01$. Planned contrasts revealed that children in gay father families had lower insecure-disorganised attachment scores than children in heterosexual parent families, $p = .00$, 95% CI [.21, 1.07]. No significant difference was found between children in gay father families and children in lesbian mother families for insecure-disorganised attachment, $p = .32$, 95% CI [-.23, .70].

Pre-adoption adversity and attachment

Within gay father families, there were no significant associations between any of the pre-adoption adversity variables and scores on any of the attachment variables.

Adjustment and attachment

Within gay father families, children's emotional symptoms ($r = .46, p = .01$) and hyperactivity ($r = .41, p = .03$) at Phase 1 were associated with their scores on the insecure-disorganised attachment scale at Phase 2. There were no significant associations between SDQ subscales and any of the other attachment scales. A stepwise multiple regression was conducted to explore the relative influence of children's emotional symptoms and hyperactivity in predicting insecure-disorganised attachment scores in gay father families. As emotional symptoms had the strongest association with disorganisation, this variable was entered in the first step of the regression and hyperactivity was entered in the second step. Step 1 of the regression (comprising solely emotional problems at Phase 1) was significant $F(1, 27) = 7.06, p = .01$, revealing that emotional problems at Phase 1 is predictive of children's disorganised attachment scores at phase 2 ($\beta = .46, p = .01$) and explains 20.7% of the variance in children's

disorganisation. Regarding Step 2 (comprising both emotional symptoms and hyperactivity at Phase 1) the model itself was significant in predicting children's disorganised attachment scores at Phase 2, $F(1, 26) = 4.51, p = .02$ (see Table 3), yet the individual variables - emotional symptoms ($\beta = .33, p = 0.09$) and hyperactivity ($\beta = .26, p = .20$) - were not significant.

Discussion

Contrary to the prediction that there would be no differences in attachment security by family type, group differences on three of the four attachment dimensions were identified. Children in gay father families had higher levels of secure-autonomous attachment than their peers in heterosexual parent families and similar levels to the children in lesbian mother families. Notably, children in gay father families did not score significantly higher on any of the insecure attachment dimensions than children in the other family structures. Indeed, children in gay father families obtained significantly lower scores on preoccupied attachment than children in either lesbian mother families or heterosexual parent families, and lower disorganised attachment scores than children in heterosexual parent families.

Considering the findings at Phase 1 highlighting positive family functioning in gay father families (Golombok, et al., 2014), it is perhaps unsurprising that children in gay father families showed greater attachment security at Phase 2. The greater attachment security of children in gay father families may be attributed to the characteristics of the parents, the characteristics of the children, or to a combination of the two. As adoption by gay men is still a relatively recent phenomenon, it is likely that those who become adoptive gay fathers represent an especially motivated and well-adjusted group of parents. Indeed, gay fathers were lower in depression and parenting stress than heterosexual mothers and fathers at Phase 1. Some (13.1%) of the gay father families in our sample adopted children before the law changed in 2002 and others (1.5%) waited up to 6 years after the law changed – most (75%) adopted somewhere between these dates. During this time period, very little was known about the

capabilities of gay men as parents and there was no research on the adjustment of children adopted by gay men. Therefore, it is conceivable that the adoption screening process may have been especially stringent for gay men, meaning that those who were successful in the adoption procedure were particularly well-adjusted and motivated.

Previously, being a gay man and being a father were considered mutually exclusive; hence, the majority of gay men in the current study arrived at adoption as a first choice route to parenthood without ever having expected, desired or tried for a biological child (Jennings, Mellish, Tasker, Lamb, & Golombok, 2014). In contrast, most heterosexual parents arrived at adoption as a second, or third choice, after having attempted to fulfil their desire to become parents through fertility treatment (Jennings et al., 2014). The process of experiencing failed fertility treatments is very stressful and can have a detrimental impact on parental wellbeing (Klemetti, Raitanen, Sihvo, Saarni, & Koponen, 2010). Furthermore, infertility-related loss can have a potentially negative effect on adoptive family relationships, particularly if the parents' first choice was to have a biological child (Brodzinsky, 1997). The different expectations of parenthood held by gay men compared to heterosexual couples may have important consequences for their experiences of parenting an adopted child. Parenting a child adopted from the child welfare system can be challenging (Palacios & Brodzinsky, 2010). Whilst heterosexual adoptive parents may have to reconcile the mismatch between the biological child they envisioned and their adopted child, most gay fathers did not expect to become biological parents. Thus, it is perhaps less likely that gay fathers would have an "imagined child" to lose and may have had fewer preconceived ideas about parenthood.

Another possible explanation for the findings, is that adoption agencies may have placed children with fewer adjustment problems with gay fathers, as little was known about the functioning of gay father families. It is not possible to address this issue directly, as no data were obtained regarding child adjustment at the time of placement, but the fact that children in

gay father families were significantly older at the time of adoption suggests otherwise. An older age at adoption is a risk factor, as older children are likely to have had several caretakers, to have had prolonged experiences of abuse, neglect or rejection (Howe, 1997; Howe, 2001), and to remember these experiences. Nonetheless, the better adjustment of children in gay father families at Phase 1 could have facilitated the higher levels of attachment security at Phase 2.

With respect to predictors of attachment patterns among the children of gay fathers, it was anticipated that greater pre-adoption adversity would be associated with higher levels of insecure attachment. However, no significant associations emerged. This may have been due to the small sample size, although correlations between pre-adoption adversity and attachment were explored for the full sample of gay father, lesbian mother and heterosexual parent families, and there were no significant associations for any of the family types. The lack of association may reflect the incomplete and/or inaccurate data adoptive parents had regarding their child's pre-adoption experiences. The exact nature of children's pre-adoption experiences are often unknown or are not conveyed accurately to adoptive parents (Gunnar & van Dulmen, 2007) making it challenging to disentangle the impact of specific experiences on specific developmental outcomes. Nevertheless, such findings are reassuring to the extent that whilst early experiences are important, they are not deterministic of future attachment.

The prediction that children who had greater adjustment difficulties at Phase 1 would show higher levels of insecure attachment was partially supported by the findings. Hyperactivity and emotional problems were significantly associated with disorganised attachment, yet conduct problems and peer problems were not significantly associated with any attachment patterns. A stepwise regression revealed that when entered alone, emotional problems predicted children's disorganised attachment to their gay fathers. However, when entered alongside hyperactivity, neither variable was significant in predicting children's disorganisation; reflecting the notion that hyperactivity does not explain any additional

variance in disorganised attachment. First thoughts may intuitively suggest that conduct problems would cause greater disruption than emotional problems in the formation of secure attachments to adoptive parents, as conduct problems have been found to elicit negative parenting behaviours (Pardini, Fite, & Burke, 2008). However, disorganisation may be the attachment pattern most likely to be associated with internalising symptoms, as in frightening situations disorganised children perceive themselves as helpless and regard their attachment figures as unable to protect them (DeKlyen & Greenberg, 2008). Research on the link between disorganisation and internalising problems has yielded inconsistent findings; some studies have identified a moderate association (Brumariu & Kerns, 2010) but others have not (Groh, Roisman, van Ijzendoorn, Bakermans-Kranenburg, & Fearon, 2012).

The study had a number of limitations. Firstly, associations between the predictor variables and attachment patterns may not have been identified due the modest sample sizes. Secondly, participants were predominantly white (92%) and well educated; whilst this may be representative of the current population of gay and lesbian adoptive parents (Jennings et al., 2014), the data may not reflect the experiences of families with a different demographic profile. The study was also limited by the lack of data on the attachment patterns of children at Phase 1, which would have been especially valuable in illustrating the extent of attachment re-organisation as children settled into their different types of adoptive families. Finally, data on the attachment patterns of the adoptive parents was also unavailable. There is evidence to suggest that attachment patterns can be transmitted across generations (Steele, Hodges, Kaniuk, Hillman, & Henderson, 2003; Van IJzendoorn, 1995). Future research should explore how the attachment representations of gay and lesbian parents influence the attachment of their adopted children.

The present study was the first to focus on the attachment patterns of children in gay father families and the predictors of attachment in this family type. Existing research has

grouped lesbian and gay parents together in the analysis of children's attachment security (Erich et al., 2009). An advantage of the current study was that gay, lesbian and heterosexual parent families were examined separately, enabling an assessment of the impact of motherless parenting on attachment formation. The only existing studies to have investigated attachment in same-sex parent families (Erich et al., 2009) utilised self-report questionnaires that are subject to reporter bias. Given the stigma surrounding same-sex parent families, children may be motivated to portray their relationships with their parents as especially positive. However, the FFI is less likely to be subject to bias than other measures as coherence of the child's narrative plays a central role in coding the FFI (Kriss et al., 2012). Coders are trained to spot discrepancies between the claims made about relationships and the available supporting information. The longitudinal research design was advantageous; providing insight into two developmental stages (childhood and early adolescence) and permitting the exploration of the influence of early experiences on later attachment patterns.

The findings are in line with the growing evidence that gay men make capable parents and that men are suitable primary attachment figures. As such, these results have important implications for policy and legislation regarding the formation of gay father families through adoption. Given the number of children waiting to be adopted and the scarcity of suitable adoptive parents, it is important that potential adopters are not discriminated against based on their gender or sexual orientation.

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Table 1. Means, Standard Deviation, F and p values for Sociodemographic Information by Family Type

	Gay(G)		Lesbian (L)		Heterosexual (H)		F	p	G vs M	G vs H
	M	SD	M	SD	M	SD				
Age of child	11.48	1.06	11.83	1.42	11.13	1.03	4.1	0.05	0.26	0.22
Age of child at adoption (months)	40.62	18.44	37.07	23.69	27.23	18.71	4.07	0.02	0.51	0.01
Length of placement (years)	8.23	1.62	8.97	1.84	8.86	1.9	1.48	0.23	0.75	0.64
Age of Parent A	46.3	6.38	48.64	7.44	48.64	5.71	1.27	0.29	0.18	0.15
Age of Parent B	45.74	4.52	48.46	7.13	49.32	6	2.93	0.06	0.1	0.02
	N	%	N	%	N	%	X ²		p	
Child's sex							9.2		0.01	
Male	23	76.7	11	37.9	20	52.6				
Female	7	23.3	18	62.1	18	47.4				
	N	%	N	%	N	%	Fisher's exact value		p	
Parent A working status							6.05		0.19	
Not working	3	10	3	10.3	8	21.1				
Part time	9	30	13	44.8	18	47.4				
Full time	18	60	13	44.8	12	31.6				
Parent B working status							2.1		0.78	
Not working	2	6.9	1	3.8	1	2.8				
Part time	6	20.7	8	30.8	7	19.4				
Full time	21	72.4	17	65.4	28	77.8				
Number of pre-adoptive placements							4.58		0.61	
0	1	4	1	4.5	0	0				
1	16	64	10	45.5	22	66.7				
2	6	24	8	36.4	9	27.3				
3+	2	8	3	13.6	2	6.1				
Siblings							6.49		0.35	
None	7	23.3	7	25	7	18.4				
One	12	40	17	60.7	25	65.8				
Two+	11	14.3	4	14.3	6	15.8				
Parent A qualification*							0.58		0.99	
GED equivalent	7	23.3	6	20.7	7	18.4				
Vocational	4	13.3	3	10.3	5	13.2				
Higher education	19	63.3	20	69	26	68.4				
Parent B qualification*							4.32		0.36	
GED equivalent	5	17.2	3	11.5	9	25				
Vocational	1	3.4	2	7.7	5	13.9				
Higher education	23	79.3	21	80.8	22	61.1				

* GED equivalent = entry level, GCSEs and A levels, Vocational = HNCs and NHDs/NVQs, Higher education = Bachelors, Masters or Doctoral degree

Table 2. Means, Standard Deviations, F, and p Values for Child Attachment patterns by Family Type

	Gay (G)		Lesbian (L)		Heterosexual (H)			F	<i>p</i>	G vs L <i>p</i>	G vs H <i>p</i>
	M	SD	M	SD	M	SD					
Secure-Autonomous	1.85	0.68	2.02	0.6	1.63	0.59	3.24	0.04	0.87	0.045	
Insecure-Dismissive	2.57	0.82	2.05	0.76	2.05	0.85	2.14	0.12	0.14	0.05	
Insecure-Preoccupied	1.35	0.62	1.95	0.77	1.87	0.82	3.67	0.03	0.02	0.02	
Insecure-Disorganised	1.53	0.84	1.72	0.81	2.15	0.91	4.7	0.01	0.32	0.01	