FAMILY PROCESS

A Population-Based Comparison of Female and Male Same-Sex Parent and Different-Sex Parent Households

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*This investigation compared Dutch same-sex parent and different-sex parent households on children's psychological well-being, parenting stress, and support in child rearing. It was also assessed whether associations among children's well-being, parenting stress, and support in child rearing were different in the two household types. Data were based on a nationally representative survey (*N = *25,250). Matching was used to enhance similarity in background characteristics between both types of families. Parental and child characteristics were matched for 43 female same-sex parent, 52 male same-sex parent, and 95 different-sex parent households with offspring between 5 and 18 years old. No significant differences were found on children's well-being, problems in the parent–child relationship, being worried about the child, or the use of formal and informal support between mothers in same-sex and different-sex parent households or for fathers in same-sex and different-sex parent households. Regarding perceived confidence in child rearing, fathers in same-sex parent households and mothers in different-sex parent households felt less competent than their counterparts. Neither the associations between children's well-being and the predictors (parenting stress variables) nor those between support and the predictors (parenting stress and children's well-being) differed along household type. In this population-based study, the similarity in child outcomes regardless of household type confirms the results of prior investigations based on convenience samples. These findings are pertinent to family therapists, practitioners, court officials, and policymakers who seek information on parenting experiences and child outcomes in female and male same-sex parent families.*

Keywords: Same-Sex Parenting; Children's Psychological Well-Being; Use of Support in Child Rearing; Parenting Stress; Social Support

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Same-sex parent families are an integral part of the social structure of many countries (Gates, 2014). Alongside the increased visibility of these families is a growing body of research on the well-being of children reared by same-sex parents (for overviews, see Goldberg, 2010). Most of these studies relied on nonprobability sampling techniques (Meyer &

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Wilson, 2009), which have been critiqued because the results may not be generalizable. The current study is designed to contribute to the knowledge on same-sex parenting using a Dutch population sample to compare female same-sex, male same-sex, and different-sex parent households containing children between 5 and 18 years old.

Planned Same-Sex Parent Family Studies Using Nonprobability Samples

Increased access to assisted reproductive technology and adoption led to a lesbian baby boom that preceded the gay baby boom by nearly two decades. As a result, most of the early nonprobability studies were conducted on female same-sex parent families (Russell & Muraco, 2012). These studies showed that children born into such families had comparable well-being to that of children born into different-sex parent households (for overview, see Goldberg, 2010). Some studies found that when compared to those reared in different-sex parent families, adolescents raised since birth in female same-sex parent households had higher levels of self-esteem and less externalizing problem behavior (Bos, Van Gelderen, & Gartrell, 2014; Gartrell & Bos, 2010).

Recent studies on male same-sex parent families reported similar results as studies on female same-sex parent families: There were no significant differences in children's well-being between those raised in male same-sex parent and different-sex parent families (e.g., Baiocco et al., 2015; Farr & Patterson, 2013). One study on male same-sex adoptive parents found that their adopted children showed lower levels of externalizing problems than adopted children in different-sex parent families (Golombok et al., 2014).

Both the female and male same-sex parent families in the abovementioned studies were recruited through nonprobability sampling techniques, such as lesbian/gay organizations, adoption agencies (Farr & Patterson, 2013; for overview, see Bos, 2012), or hospital fertility departments, or through a combination of these methods (Bos, Van Balen, & Van den Boom, 2007). Such recruiting techniques may limit generalizability, particularly if the parents in either type of family sought to enhance their scores to demonstrate the greater efficacy of same- or different sex parenting.

Same-Sex Parent Family Studies Based on Nationally Representative Samples

To minimize potential sampling bias, other researchers have focused on large nationally representative samples in which same- and different-sex parent families can be identified (Russell & Muraco, 2012). The recognition that same-sex parent families are legitimate family forms has prompted designers of large-scale surveys to include questions which make it possible to distinguish same- and different-sex parent households with children. Examples of such surveys are the US Census, the National Longitudinal Survey of Adolescent Health (Add Health), the National Health Interview Survey (NHIS), the US Early Childhood Longitudinal Study (ECLS), and the 2011–2012 National Survey of Children's Health (NSCH; for overview, see Russell & Muraco, 2012). These surveys have all been carried out in the United States.

Studies based on US nationally representative samples have found that children in same-sex parent families showed comparable progress through school (Rosenfeld, 2010, 2013), did not differ in academic achievement (Potter, 2012), and demonstrated no differences in general health, well-being, coping behavior, learning behavior (Bos, Knox, Van Rijn-Van Gelderen, & Gartrell, 2016), problem behavior, or peer relationships (e.g., Wainright & Patterson, 2006, 2008) when compared to those in different-sex parent families. The one exception to the comparable outcomes for children in the two family types was a report from Sullins (2015a, 2015b) that failed to consider family dissolution or transitions and found higher rates of emotional problems in the children of same-sex parents (based on aggregate 1997–2013 data drawn from the NHIS).

While the use of representative population samples diminishes the potential for sampling bias, several other issues remain. A more general problem of large-scale population studies on same-sex parenting is that sometimes the variables contain only single-item questions (e.g., Bos et al., 2016; Potter, 2012; Rosenfeld, 2010, 2013), which may limit the validity of the findings. In addition, child outcome studies must account for the impact of family transitions (e.g., for children whose parents break up, children who are adopted, etc.). This is important because instability in the family of origin might dominate family structure (i.e., same-sex versus different-sex parent family) as an explanatory factor in children's well-being and school behavior (Rosenfeld, 2015). Some US studies have accounted for such transitions by including them as control variables (e.g., Rosenfeld, 2010, 2013), while other studies selected only households with no history of family transition after the birth of the children (e.g., Bos et al., 2016). Aside from the issue of correcting for childhood family transitions, it should be noted that only a few US studies based on nationally representative samples included male same-sex parent families (Potter, 2012; Rosenfeld, 2010, 2013). This might limit generalizability to same-sex parenting, since men and women sometimes differ in the way they perceive their children and their own parenting (e.g., Treutler & Epkins, 2003).

Furthermore, most existing population-based studies on same- and different-sex parent households were limited in scope since they focused only on child outcomes, especially on academic achievement or, to a lesser extent, on the psychological well-being of the children. Only a few studies based on large nationally representative samples also included measures of parent–child relationships and parenting stress (e.g., Bos et al., 2016). For example, Bos et al. (2016) found that in addition to the lack of significant differences in the child outcome variables, there were no differences in parent–child and spouse/partner relationships between female same-sex parents and a matched sample of different-sex parents. However, in contrast to reports from nonprobability samples (Farr & Patterson, 2013; Goldberg, 2010; for overview, see Bos, 2012), the Bos et al. (2016) study found that the female same-sex parents reported higher levels of parenting stress. A possible explanation for reported differences in parenting stress between community- and population-based samples could be that same-sex parents recruited via communities may feel more confident in their parenting since they can share experiences and problems with similar others. Nonprobability studies have shown that female same-sex parents rely on informal (advice and help from friends, neighbors, and relatives) and formal (provided by authorities such as schoolteachers) support systems (Gartrell et al., 1996, 1999, 2000). It is well established that having social support helps to diminish parenting stress (e.g., Castillo & Fenzl-Crossman, 2010), and that higher perceived levels of social support from family are related to lower levels of parental depressive and anxious symptoms (Goldberg & Smith, 2011). Social support may also be important to male same-sex parents because of cultural objections to their family type (Smith, 2010).

It is noteworthy that Bos et al. (2016) found that despite the higher levels of parenting stress in female same-sex parent households, the associations between these stressors and the children's well-being were similar across the household types. This finding is consistent with research showing that it is not household structure (i.e., same-sex or different-sex household) but family functioning, and the extent to which household members are exposed to family stress, that are important for healthy child development (e.g., Goldberg, 2010; for overview, see Bos, 2012; Golombok et al., 2003). This is in line with Belsky's (1984) model of the determinants of parenting which theorized that child outcomes for physical, emotional, cognitive, and social development are strongly influenced by how parents function. In theory, experiencing more stress during child rearing may cause parents to have negative feelings about their parenting, thus influencing the parent–child relationship, which in turn may affect child outcomes (American Academy of Pediatrics,

2003). A longitudinal study of adoptive families with same-sex and different-sex parents found that early experience of parenting stress was a significant predictor of later child behavior problems across all family types (Farr, 2016).

Although all parents experience some level of parenting stress, however transient, the circumstances of female and male same-sex parent households are unique because of cultural attitudes toward same-sex parenting. Although the Netherlands is more socially and legally progressive than many other countries regarding lesbian, gay, and bisexual (LGB) individuals and same-sex parenting, a majority of Dutch people still believe that "a child needs a home with both a father and a mother to grow up happily" (Arieke & Liefbroer, 2011).

The Current Study

The current study extends population-based research that comes primarily from the United States to a national sample from the Netherlands, and strives to expand the understanding of same-sex parenting by avoiding the limitations of prior investigations. To minimize family-of-origin instability as a possible confounding variable (e.g., Fomby & Cherlin, 2007; Moore & Stambolis-Ruhstorfer, 2013), the current investigation focuses only on intact families with no adopted, fostered, or stepchildren. Building on the Bos et al. (2016) report from a US population-based sample, the present study uses a Dutch national population survey to compare same-sex and different-sex parent families. This study assesses both female and male same-sex and different-sex parent households, and it employs existing and reliable scales with multiple-item questions to assess child outcomes, parenting stress, and the use of informal and formal supports in child rearing.

The aim of the current study is to investigate whether there are differences between household types (female and male same-sex parent versus different-sex parent families) in children's psychological well-being, in parenting stress (problems in the parent–child relationship, perceived parental competency, and being worried about the child) and in the parents' use of informal and formal support in child rearing. Based on findings that family functioning is a better predictor of children's socioemotional development than is family structure (Goldberg, 2010; for overview, see Bos, 2012), the present study will also assess which of the studied aspects of parenting stress predict children's psychological well-being, and whether these predictors are different between household types. In addition, this study will examine which variables (children's psychological well-being or parenting stress) predict the parents' use of informal and formal support in child rearing and whether these associations differ between household types.

METHODS

Procedure

Data were derived from the Dutch study "Youth and Development" which was carried out by The National Institute of Social Research (Sociaal Cultureel Planbureau, SCP) in collaboration with Statistics Netherlands. Statistics Netherlands governs the Municipal Personal Records Database which contains information about Dutch residents. From the Municipal Personal Records Database, Statistics Netherlands drew a random sample of 41,280 individuals from the target population (i.e., households with children under 18 years old, in which at least one parent lived in the Netherlands and was not institutionalized, and in which the parent and the sample child were registered in the municipal administration). Of this initial sample, 34,400 households received a written invitation to participate in the survey. Reasons for not receiving an invitation included, for example, because there was no phone number available or because members of the household had

already participated in another survey by Statistics Netherlands during the previous 12 months (for a detailed description of the method, see SCP, 2011).

The fieldwork took place between November 11, 2010, and May 31, 2011. Of the households receiving invitations, 25,250 participated in the survey. If there were multiple eligible children within a household, one was randomly selected to be the sample child. Data were collected through home interviews with one of the parents who answered the questions (by means of a computer-assisted web interview). The study design and recruitment procedure were approved and monitored by an internal review committee of the Statistics Netherlands (SCP).

Parents of sample children younger than 5 years old received a different questionnaire than those with children between 5 and 18 years old. Preliminary analyses of the data showed that the number of children younger than 5 years old was too small in the same-sex parent families (female same-sex families $n = 20$ and male same-sex families $n = 19$). Therefore, the current study focused only on households with children between 5 and 18 years old.

Nearly 73% ($N = 18{,}404$) of the households in the original sample had one or more children between 5 and 18 years old living with their parents. In 88.5% ($N = 16{,}285$) of these households, the participant resided with a partner. The survey questions provided information about the gender of the participating parent and the gender of the participant's partner. In this way, it was possible to identify female same-sex (0.39%, $n = 63$), male same-sex (0.42%, $n = 68$), and different-sex couples (99.19%, $n = 16{,}154$).

In two-parent households, the participating parent was asked to report her/his relation to the sample child (i.e., "own child," "stepchild," "foster child," or "adopted child"). The participating parent also reported the relation between the sample child and the participant's partner, using the same terminology. For the current study, same-sex parent households were identified as those in which the participating parent and her/his partner were of the same sex, the couple had not divorced/broken up during the prior 2 years, and their offspring was identified as the parent's and the partner's "own child" (and not their "stepchild," "foster child," or "adopted child"). In the Netherlands, the term "stepchild" is used by a partner who enters the family unit and becomes a co-parent after a child is born to, fostered by, or adopted by the original parent. By excluding "step-," "foster," and "adopted" children, it was possible to identify 106 same-sex co-parents (47 female same-sex and 59 male same-sex) of their "own" children. No information was available regarding the biological or legal relationship between the responding parent or the respondent's partner and the child.

To minimize any potential confounding effect of differences in demographics between same-sex and different-sex parent households on children's psychological well-being, parenting stress, and parents' use of informal and formal support, a one-to-one matching procedure (random sampling method) was used (e.g., Rothman & Hatch, 2002). Such a matching procedure has also been used in other population-based investigations on female same-sex couples with children (e.g., Bos et al., 2016; Wainright & Patterson, 2006, 2008). In our study, each participant from a same-sex parent family was matched with a participant from a different-sex parent family (within the same sample) on the following characteristics: parental age, education, marital status, and ethnic background; child age, gender, and learning/developmental disability status. Because there were some different-sex parent households in which mothers (71.4%) and others in which fathers (28.6%) completed the questionnaire, the matching for female same-sex parent households was done with different-sex parent households in which the mother completed the survey, and the male same-sex parent households were matched with different-sex parent households in which the father completed the survey. The matching was done with case–control-matching option in SPSS version 22.

For the matching, we included only different-sex parents who were coupled, had not divorced/broken up during the prior 2 years, and of whom the participating parent indicated that the sample child was her/his "own child" and that of her/his partner, and not their "stepchild," "foster child," or "adopted child". For 43 of the 47 female same-sex parent households and 52 of the 59 male same-sex parent households, a match was found with a different-sex parent household based on all child characteristics (age, gender, and learning or developmental disabilities) and on almost all parental variables (parental age, education, and marital status). It was not possible to obtain an identical match on the participating parent's ethnic background.

Study Sample

The final analytic sample included 190 households, including 43 female same-sex parent households, 52 male same-sex parent households, and 95 different-sex parent households (43 in which the data are based on mother reports and 52 based on father reports). The parents were, on average, 40 years old. Most had an educational level of higher vocational or university level (72.6%), were married (86.3%), and had a Dutch or Western ethnic background (82.6%). The children (47.4% girls and 52.6% boys) were, on average, 11 years old, and most (90.4%) did not have learning or developmental disabilities. The demographic characteristics of the matched samples are provided in Table 1.

Measures

Children's psychological well-being

Children's psychological well-being was assessed by means of the widely used Strengths and Difficulties Questionnaire (SDQ/4- to 16-year-olds; Goodman, 2001). While the SDQ was originally developed as a scale measuring the well-being of 4–16-year-olds, studies have found that the SDQ/4–16 is also reliable for children between 16 and 18 years old (e.g.,Van Roy, Veenstra, & Clench-Aas, 2008). Therefore, the SDQ was used to measure the well-being of the children between 5 and 18 years old. Each parent completed the questionnaire for the sample child by reflecting on the child's behavior in the prior 6 months and responding on a 3-point Likert scale (0 = *not true*, 1 = *somewhat true*, 2 = *certainly true*). In the current study, we computed a total problem scale score (20 items; range 0–80, with higher scores indicating more problems; $0.25 < r < 0.40$, $p < .001$) based on the sum score of the following inter-correlated SDQ subscales: emotional problems (e.g., "Often unhappy, depressed or tearful"), conduct problems (e.g., "Often lies or cheats"), hyperactivity (e.g., "Restless, overactive, cannot stay still for long"), and peer problems (e.g., "Picked on or bullied by other children"). The Cronbach's alpha for the total sample was .81, and it was .88 and .68 for same-sex parent and different-sex parent families.

Parenting stress

Parenting stress was measured with the Parenting Stress Questionnaire (Vermulst, Kroes, De Meyer, Nguyen, & Veerman, 2015), which is frequently used in Dutch studies (e.g., Lamers, Van Nieuwenhuizen, Siebelink, Blaauw, & Vermeiren, 2015). Two subscales of this questionnaire were available in the dataset and used in the current study: problems in the parent–child relationship (six items, e.g., "I feel happy when I am with my child"), and perceived parental competency (seven items, e.g., "I know I am doing well as a parent in rearing my child"). The answer categories for both scales ranged from *very true* (1) to *not true* (4). For perceived problems in the parent–child relationship, a mean score was computed, with a high score indicating more perceived problems and as such more

TABLE 1
Demographic Characteristics of Study Samples

	Household Type	
A.	**Female Same-Sex Parent**	**Different-Sex Parent[a]**
Number of families	43	43
Parent characteristics		
Parent age in years (*M*, *SD*)[1]	40.26 (11.74)	40.14 (11.67)
Parent education, %		
Low	14.3	14.3
Middle	45.7	45.7
High	40.0	40.0
Marital status, % married	79.1	79.1
Ethnic background, % Dutch/Western[2]	69.8	90.7
Child characteristics		
Child age in years (*M*, *SD*)[3]	11.14 (4.06)	11.47 (3.48)
Child gender, % female	74.4	74.4
Learning or developmental disabilities, % no	91.2	91.2
B.	**Male Same-Sex Parent**	**Different-Sex Parent[b]**
Number of families	52	52
Parent characteristics		
Parent age in years (*M*, *SD*)[4]	40.04 (13.57)	40.92 (13.88)
Parent education, %		
Low	13.3	11.5
Middle	48.9	42.3
High	37.8	32.7
Marital status, % married	92.3	92.3
Ethnic background, % Dutch/Western[5]	85.5	82.7
Child characteristics		
Child age in years (*M*, *SD*)[6]	11.29 (03.93)	11.37 (03.73)
Child gender, % female	25.0	25.0
Learning or developmental disabilities, % no	89.9	89.9

[a]Based on mother reports.
[b]Based on father reports.
[1]$p = .963$.
[2]$p = .015$.
[3]$p = .691$.
[4]$p = .743$.
[5]$p = .587$.
[6]$p = .919$.

parenting stress. For perceived parental competency, a mean score was computed, with a high score indicating feeling less competent in child rearing. In the present study, the Cronbach's alpha for perceived problems in the parent–child relationship was .84 (.70 for same-sex parent families, and .95 for different-sex parent families), and for perceived parental competency it was .68 (.71 for same-sex parent families, and .63 for different-sex parent families).

In addition to the instrument used for measuring parental stress, a single-item question was used to examine whether the parent felt worried about child rearing or the behavior or development of the child during the last 12 months (0 = *no*; 1=*yes*).

Support in child rearing

To measure the use of parental informal and formal support in child rearing, an adapted and shortened version of the Parenting and Child Rearing Support Questionnaire

was used (Dekovic, Groenendaal, Noom, & Gerrits, 1996). Informal support was measured by four items. Each item/question started with "How often do you use advice or practical help from . . . " (1) parents/parents-in-law, (2) other family members, (3) friends/acquaintances, and (4) neighbors. The answer categories ranged from *every day* (1) to *never* (6), but were reversed for the analyses in such way that a high score indicated more use of informal support; a mean score was calculated on this variable based on the four items (total sample: Cronbach's alpha = .62; same-sex families: .74 and different-sex families: .48). Formal support was measured by providing the participants with a list of five official authorities to which parents could go for advice or support in child rearing (i.e., a teacher, school medical officer, general practitioner, psychologist, Youth Care Officer). For each of these authorities, parents were asked to indicate whether or not they had contacted them for advice or support in the prior 12 months (0 = *no*; 1 = *yes*). Sum scores were calculated (min. = 0; max. = 5. Higher scores indicated more contact with authorities).

Analyses

To assess differences in children's psychological well-being, parenting stress, and parental support between same- and different-sex parent households, a multivariate analysis of covariance (MANCOVA) was conducted with household type as independent variable and children's total problem behavior, problems in the parent–child relationship, perceived parental competency, and informal and formal support as dependent variables. One aspect of parenting stress, namely being worried about child rearing or the behavior/development of the child, was a categorical variable; hence, a chi-square test was conducted to examine whether same-sex and different-sex parent households differed on this variable. These structural comparison analyses were conducted separately for differences between female same-sex parent and different-sex parent households in which the information was based on mother reports and for male same-sex parent and different-sex parent households in which the information was based on father reports.

To examine whether children's psychological well-being was associated with parenting stress, a multiple linear regression (MLR) analysis was conducted. For the MLR, household type and the parenting stress variables, as well as the interaction between household type and each parenting stress variable, were entered as simultaneous predictors. Continuously scaled predictor variables were centered (subtracting the sample mean from the individual mean score of a participant; Hayes, 2013) prior to forming interaction terms, and dichotomous predictors were dummy-coded. Similar analyses were conducted to investigate whether parenting stress and children's psychological well-being (based on the total problem behavior score) were significantly related to the use of informal and formal support, and whether these associations differed along household types.

For all analyses, ethnicity (measured with two categories: 1 = Dutch or Western, 2 = Non-Western) was used as control variable since it was not possible to match family types on ethnicity and preliminary analyses showed that ethnicity was significantly correlated with perceived parental competency (Spearman $r = -.17$, $p = .019$) and being worried about child rearing (Spearman $r = -.14$, $p = .049$). All analyses were done in SPSS version 22.

RESULTS

Structural Comparisons

Means, standard deviations, and percentages for all dependent variables are presented in Table 2 with part A showing the figures for the structural comparisons between mother reports in female same-sex parent and different-sex parent households and part B the figures for the father reports.

TABLE 2

Parents' Reports on Children's Psychological Well-Being (Total Problem Behavior)[a], Parenting Stress (Problems in Parent–Child Relationship and Perceived Parental Competency)[b], and Use of Support (Informal and Formal) in Child Rearing[c]

	Same-Sex Parent Household	Different-Sex Parent Household	Same-Sex Versus Different-Sex Parent Household		
	Means (Standard Deviations)/ Percentage	Means (Standard Deviations)/Percentage	*F*/chi^2	*p*	Cohen's |*d*|
A. Female same-sex parent versus different-sex parent household (based on mother reports)[d,e]					
Children's psychological well-being					
Total problem behavior	5.15 (5.79)	6.09 (4.82)	0.41	.523	.26
Parenting stress					
Problems in parent–child relationship	1.53 (0.67)	1.47 (0.61)	0.54	.464	.09
Perceived parental competency	1.38 (0.26)	1.57 (0.27)	7.33	.008	.72
Being worried about child rearing (yes, %)	18.6	37.2	3.70	.054	.61
Use of support in child rearing					
Informal support	1.95 (0.77)	2.03 (0.66)	0.10	.747	.11
Formal support	0.73 (0.87)	0.70 (1.04)	0.00	.994	.03
B. Male same-sex parent versus different-sex parent household (based on father reports)[f,g]					
Children's psychological well-being					
Total problem behavior	5.94 (5.38)	5.20 (4.24)	0.57	.452	.06
Parenting stress					
Problems in parent–child relationship	1.51 (0.61)	1.45 (0.59)	0.26	.610	.10
Perceived parental competency	1.66 (0.34)	1.54 (0.24)	4.38	.039	.41
Being worried about child rearing (yes, %)	25.0	23.1	0.05	.819	.06
Use of support in child rearing					
Informal support	2.04 (0.76)	2.11 (0.66)	0.25	.621	.10
Formal support	0.81 (0.97)	0.74 (0.78)	0.11	.737	.08

Notes Mean scores and percentage for households with a child between 5 and 18 years old (who was living in the household) of the core sample of Youth and Development (without including the households of the sample in the present study) were: total problem behavior: $M = 5.92$ ($SD = 5.13$), problems in parent–child relationship: $M = 1.53$ ($SD = 0.64$), perceived parental competency: $M = 1.52$, $SD = 0.30$), being worried about child rearing (yes, %): 27.0, informal support: $M = 2.14$ ($SD = 0.80$), and formal support: $M = 0.92$ ($SD = 0.96$). Comparing our sample with this core sample, one-sample t tests and a chi^2 test were conducted: total problem behavior: $p = .397$, problems in parent–child relationship: $p = .525$, perceived parental competency: $p = .175$, being worried about child rearing: $p = .543$, informal support: $p = .090$, formal support: $p = .016$.

[a]Based on sum score of emotional problems, conduct problems, hyperactivity, and peer problems. High score indicating more problem behavior.

[b]High score indicating more problems in parent–child relationship and feeling less competent in child rearing.

[c]High score indicating more use of informal and formal support in child rearing.

[d]Post-hoc power analyses for MANCOVA: 1 − β error probability = .70, $f^2 = .011$ ($N = 84$, $p < .05$).

[e]Post-hoc power analyses for χ^2: 1 − β error probability = .49, $w = .21$ ($N = 86$, $p < .05$).

[f]Post-hoc power analyses for MANCOVA: 1 − β error probability = .38, $f^2 = .05$ ($N = 102$, $p < .05$).

[g]Post-hoc power analyses for χ^2: 1 − β error probability = .06, $w = .02$ ($N = 102$, $p < .05$).

Female same-sex parent versus different same-sex households (mother reports)

Multivariate analysis of covariance for the structural comparison between female same-sex parent and different same-sex households (mother reports) showed no significant effect for children's psychological well-being, problems in the parent–child relationship, perceived parental competency, and informal and formal support in child-rearing; Wilks' $\lambda = .90$, $F(5, 77) = 1.71$, $p = .142$, partial $\eta^2 = .10$. Despite this lack of significant effect of household type in the MANCOVA, inspection of the between-subject effects (see Table 2) showed that mothers in different-sex parent households felt less competent in parenting than mothers in same-sex parent households. The Chi-square test on being worried about rearing the child also showed no significant difference between mothers in same- and different-sex parent households.

Male same-sex parent versus different same-sex households (father reports)

For fathers in same- and different-sex parent households, MANCOVA showed no significant household type effect for children's psychological well-being, problems in the parent–child relationship, perceived parental competency, and informal and formal support in child-rearing, Wilks' $\lambda = .95$, $F(5, 95) = 1.04$, $p = .401$, partial $\eta^2 = .05$. Despite this lack of significant household type effect in the MANCOVA, inspection of the between-subject effects (see Table 2) showed that fathers in same-sex parent families reported feeling significantly less competent in rearing their children than fathers in different-sex parent households. The Chi-square test on being worried about rearing the child also showed no significant difference between fathers in same-sex and different-sex parent-households.

Associations Regarding Parenting Stress and Children's Psychological Well-Being

Predictors of children's psychological well-being based on parental stress and household type are shown in Table 3. The MLR for mothers in same- and different-sex parent households and the MLR for fathers in same- and different-sex parent households showed significant R^2s (see Table 3). Being worried about child rearing was independently related to maternal reports on their children's problem behavior. Mothers who gave their children higher scores on the total problem behavior scale also gave themselves high scores on concerns about their child rearing. This was also found for fathers in same- and different-sex parent households. In addition, the fathers' sense of their own parental competency was significantly related to their children's total problem behavior. Fathers who reported higher levels of problem behavior in their children felt less competent in child rearing (see Table 3).

For the analyses on female same- and different-sex parent households, none of the interactions between household types and the predictors were significant (see Table 3). No significant effects on the interaction terms were found for the analyses of male same- and different-sex parent households (see Table 3). These results indicated that the associations between parenting stress and children's psychological well-being did not differ in same- and different-sex parent households.

Associations Among Parenting Stress, Children's Psychological Well-Being, and Informal and Formal Support

The findings of the MLR analyses on the use of informal and formal support in child rearing, with parenting stress, children's problem behavior, and household type as predictors (and the interactions between the predictors and household type), are shown in Table 3.

TABLE 3

Multiple Linear Regression Analyses on Children's Total Problem Behavior[a] and Use of Support (Formal and Informal) in Child Rearing

	Same-Sex and Different-Sex Parent Households Based on Mother's Report		Same-Sex and Different-Sex Parent Households Based on Father's Report	
	β	***p***	**β**	***p***
Children's total problem behavior[b]				
Ethnicity	.01	.932	−.03	.724
Household type	−.01	.912	.00	.964
Problems in parent–child relationship	.05	.620	.13	.133
Perceived parental competency	.02	.888	.32	.001
Being worried about child rearing	.51	<.001	.31	<.001
Household type × problems in parent–child relationship	−.01	.964	.02	.802
Household type × perceived parental competency	−.04	.727	−.15	.121
Household type × being worried about child rearing	−.10	.352	.07	.393
R^2		26		.33
F		3.26		5.87
p		.003		<.001
Use of informal support in child rearing[c]				
Ethnicity	−.10	.420	−.02	.835
Household type	.06	.603	.10	.312
Problems in parent–child relationship	.14	.248	−.24	.019
Perceived parental competency	−.16	.240	.29	.014
Being worried about child rearing	.18	.209	.06	.554
Children's total problem behavior	−.03	.828	.04	.736
Household type × problems in parent–child relationship	.01	.955	.13	.193
Household type × perceived parental competency	.03	.828	−.04	.742
Household type × being worried about child rearing	.02	.866	−.03	.785
Household type × children's total problem behavior	−.12	.369	.00	.978
R^2		.07		.15
F		0.57		1.57
p		.832		.127
Use of formal support in child rearing[d]				
Ethnicity	.12	.231	−.11	.245
Household type	−.05	.635	.02	.810
Problems in parent–child relationship	.15	.148	−.05	.580
Perceived parental competency	−.09	.423	.12	.284
Being worried about child rearing	.47	<.001	.11	.300
Children's total problem behavior	.18	.11	.35	.003

The two separate MLRs on informal support in child rearing (one for mothers in same- and different-sex parent households and one for fathers in same- and different-sex parent households) showed no significant R^2; however, the R^2 was significant for the MLRs on formal support. Regarding the use of formal support for mothers in same- and different-sex parent households, being worried was the only significant predictor. Mothers who reported high scores on the use of formal support said that they had worries regarding rearing their child. In the MLR for fathers, high scores on children's total problem

TABLE 3
Continued

	Same-Sex and Different-Sex Parent Households Based on Mother's Report		Same-Sex and Different-Sex Parent Households Based on Father's Report	
	β	*p*	β	*p*
Household type × problems in parent–child relationship	.01	.963	.04	.685
Household type × perceived parental competency	−.01	.954	−.10	.384
Household type × being worried about child rearing	.04	.734	−.08	.406
Household type × children's total problem behavior	−.07	.533	.09	.407
R^2		.33		.24
F		3.68		2.84
p		.001		.004

[a]Based on sum score of emotional problems, conduct problems, hyperactivity, and peer problems. Same-sex and different-sex parent households based on mother's report: $M = 5.62$, $SD = 5.28$; Same-sex and different-sex parent households based on father's report: $M = 5.55$, $SD = 4.83$.

[b]Post-hoc power analyses for: (1) same-sex and different-sex parent households based on mother's report: 1 − β error probability = .98, $f^2 = .35$ ($N = 85$, $p < .05$) and (2) same-sex and different-sex parent households based on father's report: 1 − β error probability = .99, $f^2 = .50$ ($N = 103$, $p < .05$).

[c]Post-hoc power analyses for: (1) same-sex and different-sex parent households based on mother's report: 1 − β error probability = .32, $f^2 = .08$ ($N = 84$, $p < .05$) and (2) same-sex and different-sex parent households based on father's report: 1 − β error probability = .81, $f^2 = .18$ ($N = 102$, $p < .05$).

[d]Post-hoc power analyses for: (1) same-sex and different-sex parent households based on mother's report: 1 − β error probability = .99, $f^2 = .50$ ($N = 85$, $p < .05$) and (2) same-sex and different-sex parent households based on father's report: 1 − β error probability = .98, $f^2 = .32$ ($N = 103$, $p < .05$).

behavior significantly predicted the use of formal support. None of the interaction terms in the MLRs (household types with the predictors) on the use of formal support was significant.

DISCUSSION

The current study set out to explore differences in same- and different-sex parent households in children's well-being and parents' experiences (parenting stress and support in child rearing). The study extends the current knowledge base by drawing data from a Dutch population-based survey, by limiting the influence of family transitions in focusing only on co-parents of their "own" offspring (not "step-," "adopted," or "foster" children), using matching to enhance similarity in background characteristics, by mainly using standardized instruments based on multiple-item questions, and by also including male same-sex parent families.

There were no significant differences found on any assessment of children's psychological well-being in female same-sex and male same-sex parent households versus different-sex parent households. This similarity in child outcomes regardless of household type parallels the results of most other studies on same-sex parent households in which the participants were recruited through nonprobability sampling techniques (for overview, see Goldberg, 2010). Our findings on children's well-being are also similar to those from the Bos et al. (2016) study on female same-sex continuously coupled households that were drawn from the population-based NSCH in the United States.

Aside from their own perceptions of parental competency, when mothers in same- and different-sex parent households and fathers in same- and different-sex parent households were compared, no significant differences were found in the parent–child relationship, parental worries about child rearing, or parents' use of informal and formal support. However, in the between-subject analysis (but not the overall MANCOVA), the mothers in different-sex parent families reported feeling less competent as parents than their counterparts in female same-sex parent families. The division of labor within mother–father families may provide a possible explanation for this finding. Nonprobability studies show that the division of labor is less equal in heterosexual two-parent families than in lesbian mother families (e.g.,Farr & Patterson, 2013), and that heterosexual mothers are less satisfied about their partners' co-parenting than lesbian mothers (Bos et al., 2007). That mothers in different-sex parent households carry a greater burden of household responsibilities may contribute to their feeling they have less time to devote to competent parenting. In contrast to the findings for mothers, fathers in same-sex parent households felt significantly less competent as parents than fathers in different-sex parent households. Although these data should be interpreted with caution since the overall MANCOVA was not significant when "problems in the parent–child relationship" and "feeling less competent in parenting" were used as dependent variables, our results concerning the fathers' perceptions of parental competency are consistent with a comparison of gay and heterosexual fathers in a Dutch convenience-sample study (Bos, 2010). It is possible that fathers in same-sex parent families report feeling less competent in parenting than their counterparts in different-sex parent households because the gay baby boom is still a relatively new phenomenon. Furthermore, the male couples became parents at a time when society questioned their right to raise children (Arieke & Liefbroer, 2011), thus potentially sowing doubts about their parenting capabilities. Future studies concerning perceptions of parental competency in father–parent families may shed light on whether the findings in the present study are associated with the sexual orientation of the responding father or are reflective of father–parent families in general.

For all parents in the current investigation, the MLR analyses showed that being worried about child rearing was a significant predictor for reporting higher levels of problem behavior in their children. In addition, self-perceptions of parental incompetency were related to fathers scoring their children higher on problem behavior. Being worried about either child rearing or the child's development was a significant predictor for the use of formal support by mothers (e.g., a teacher), whereas children's total problem behavior was a predictor for the use of formal support by fathers. None of the interactions between the predictors and household types in the MLRs were significant. Although it was not possible to determine causality, in both types of families, parents who were concerned about their children's problem behavior sought formal help (e.g., from a teacher, school medical officer, general practitioner, etc.).

It should be noted that the effect size for the MANCOVAs computed to analyze the differences in children's psychological well-being, parent–child relationship, perceived parental competency, and informal and formal support between mothers in same- and different-sex parent households was adequate, and for fathers it was moderate (Cohen, 1988). G*Power version 3.1.9.1 was used to conduct post-hoc power analyses ($\alpha = .05$) (Faul, Erdfelder, Buchner, & Lang, 2009). Analyses revealed moderate power to detect an effect size for the comparison of being concerned about their children's problem behavior between mothers in same-sex versus different-sex households, and this power was minor for the comparison between fathers in both household types. The statistical power of the MLR for informal support was moderate for the analyses on female same- and different-sex parent households, but the other MLRs (total problem behavior and formal support) showed adequate power.

Regarding the implications for practice, family therapists and practitioners should be aware that this Dutch population-based study supports and extends prior investigations based on convenience samples and US-based national samples showing that there are no significant differences in child outcomes based on parental sexual orientation. The current findings support the empirical evidence that family functioning is a far better predictor of child outcomes than family structure. In working with same-sex parent families, clinicians should explore whether family members have internalized negative stereotypes of same-sex parents. If so, therapists and practitioners can help these families develop more and more realistic understanding of positive child outcomes in same-sex parent families. In addition, clinicians should be attentive to potential stresses for fathers in same-sex parent families and mothers in different-sex parent families who may have insecurities about their competency as parents. It is also incumbent upon court officials and policymakers to be current on population-based research concerning same-sex parenting experiences and child outcomes so that custody and placement decisions, as well as legislative and policy proposals, reflect accurate and up-to-date findings.

There are limitations in the current study. First, for both family types, information about the method of child conception and the genetic linkage of each parent to the child was unavailable. Paternity tests are rarely conducted on offspring in different-sex parent households, and therefore such questions are not routinely asked. For female same-sex parents, questions about co-mother–child genetic linkage (e.g., egg donation) were also not asked. For the male same-sex parents, since there were no adopted, step-, or foster children in our study sample, two possibilities exist: The fathers became parents through surrogacy, or they shared child rearing with a woman or women who became pregnant with their sperm. In Dutch law, there are numerous barriers to surrogacy. For example, it is illegal to advertise that one seeks a surrogate, or for agencies to mediate between the intended gay parent, a surrogate, and an egg donor (Margalit, in press). Therefore, Dutch men who desire parenthood through surrogacy must have the financial resources to go to other countries where surrogacy is allowed (Curry-Sumner & Vonk, 2013). Due to the exorbitant costs of such arrangements, many participating fathers from same-sex parent households in the current study may be involved in a co-parenting construction with the mother(s) of the child.

A second limitation is that the dataset contained no information about the parents' experiences of stigmatization or their concerns about discrimination against their children. Therefore, no analyses could be conducted on whether stigmatization is associated with parenting stress and/or their children's well-being. In addition, no background information is available on the self-identification as LGB of the parents. Identifying LBG parent households in population-based surveys continues to be challenging, often because questions about parental sexual orientation are not asked (Prickett, Martin-Storey, & Crosnoe, 2015). For example, no data are available in the Netherlands regarding how many LGB couples are raising children born in the context of the parents' relationship. Although the current study uses a random population sample that is a methodological improvement over estimates provided by convenience and non-probability samples, caution is urged regarding generalizing the findings to all same-sex parent families in the Netherlands. Future studies that incorporate more questions on the various aspects of same-sex parenting (such as biological and legal relationship of the parents with the child, and items on the sexual orientation of the parents) will be more effective in determining how representative the current sample is of the Dutch LGB parent population. As is also recommended by Fedewa, Black, and Ahn (2015) in their meta-analyses, future research on parenting and child development should ask the participants to self-identify sexual orientation.

A further limitation is that there were no data available regarding household income and as such it was not possible to match the family types on this variable. In lieu of income, parental education was used as a matching variable as studies have found income and education to be highly correlated (U.S. Census Bureau, 2015). The dataset also contained no information about the number of children in the household, a factor that could be associated with parenting stress (Lawson & Mace, 2010). Another limitation is that one single-item measure was included in this study. Also, of the four scales utilized, one Cronbach's alpha was low (informal support for different-sex families), suggesting a possible underestimation of relationships between concepts. While the power of most analyses was moderate to adequate, the power for the analyses assessing differences between the two household types on support for child rearing was minor. These results need to be confirmed in future studies using larger samples.

In terms of internal validity, it was a strength that in our investigation we only included co-parents of their "own" offspring (not "step-," "adopted," or "foster" children), thus reducing the impact of family transitions on outcomes. However, this inclusion criterion is simultaneously a limitation for the external validity of the study, since preliminary analyses of the study sample showed that the percentages of households with children between 5 and 18 years old in which the child was identified as the "own child" of both parents (as reported by the participating parent) were 84.1% in the same-sex parent families and 93.7% in the different-sex parent families.

Notwithstanding these limitations, the current study makes an important contribution to the existing literature on same-sex parents. Our findings are consistent with research showing that it is not household structure (i.e., same-sex or different-sex household; e.g., Goldberg, 2010; for overview, see Bos, 2012; Golombok et al., 2003) but family functioning, and the extent to which household members are exposed to family stress, that are important for healthy child development (American Academy of Pediatrics, 2003; Belsky, 1984). These findings may benefit the culture at large and prospective same-sex parents who are concerned about children growing up in sexual minority parent families, as well as professionals working with these families.

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