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Supreme Court of the State of New York
Appellate Division: Second Judicial Department

In the Matter of the Application of:

Docket No.:
2004-10100

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AXT-OHANNESYAN, LISA AXT-OHANNESYAN, JOHN ADE,
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SUCHET, CLAIRE BONDE, TONI BONDE, GEORGE DELANCY,
JOEL EALY, DEIRDRE BERNARD-PEARL and LISA BERNARD-PEARL,

Petitioners-Appellants,

For a Judgment Pursuant to Article 78 of the CPLR and other relief,

-against-

CHARLOTTE MADIGAN, Town Clerk, Town of Orangetown, New York,
and STATE OF NEW YORK DEPARTMENT OF HEALTH.

Respondents-Respondents.

**BRIEF OF *AMICI CURIAE* AMERICAN PSYCHOLOGICAL ASSOCIATION,
NATIONAL ASSOCIATION OF SOCIAL WORKERS, NATIONAL ASSOCIATION OF
SOCIAL WORKERS NEW YORK CITY CHAPTER, and NATIONAL ASSOCIATION
OF SOCIAL WORKERS NEW YORK STATE CHAPTER IN SUPPORT OF
PETITIONERS-APPELLANTS**

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IDENTITY AND INTEREST OF *AMICI CURIAE*

The American Psychological Association is a nonprofit scientific and professional organization founded in 1892. The Association has more than 155,000 members and affiliates, including the majority of psychologists holding doctoral degrees from accredited universities in this country. Among the Association's major purposes is to increase and disseminate knowledge regarding human behavior and to foster the application of psychological learning to important human concerns. Human sexuality and familial relationships are professional concerns of a substantial number of the Association's members, either as researchers or as clinicians.

In July 2004, the Association's Council of Representatives adopted two Resolutions relevant to this case, which are reproduced in the Appendix to this brief. In its Resolution on Sexual Orientation and Marriage, the Association resolved, based on empirical research concerning sexual orientation and marriage, "That the APA believes that it is unfair and discriminatory to deny same-sex couples legal access to civil marriage and to all its attendant benefits, rights, and privileges." And in its Resolution on Sexual Orientation, Parents, and Children, the Association recognized that "There is no scientific evidence that parenting effectiveness is related to parental sexual orientation: lesbian and gay parents are as likely as heterosexual parents to provide supportive and healthy environments

for their children.” In both Resolutions the Association resolved to provide scientific and educational resources, such as this *amicus* brief, to inform public discussion and understanding of these issues.

The National Association of Social Workers (“NASW”) was established in 1955 as a nonprofit professional association dedicated to the practice and interests of the social work profession. It is the largest social work association in the world, with 153,000 members. The NASW New York City Chapter has approximately 10,000 members and the NASW New York Chapter has approximately 12,000 members. In furtherance of its purposes to develop and disseminate high standards of social work practice, NASW promulgates professional standards and criteria, conducts research, publishes studies of interest to the profession, provides continuing education and enforces the NASW Code of Ethics.

NASW has adopted a policy statement on gay issues in 1977, which was subsequently revised and expanded; that policy prohibits social workers from discriminating on the basis of sexual orientation. In 2004, NASW reaffirmed its policy supporting same-sex marriage, which is also reproduced in the Appendix.

SUMMARY OF ARGUMENT

Amici, the nation’s and state’s leading associations of psychology professionals, behavioral scientists, and social workers, have prepared this brief to provide the Court with a comprehensive, fair, and balanced review of the scientific

and professional literature pertinent to the issues before the Court. In preparing this brief, *amici* have been guided solely by criteria relating to the scientific rigor and reliability of studies and literature, not by whether a given study supports or undermines a particular conclusion.

Scientific research has firmly established that homosexuality is not a disorder or disease, but rather a normal variant of human sexual orientation. The vast majority of gay and lesbian individuals lead happy, healthy, well-adjusted, and productive lives.

In particular, many gay and lesbian people are already in same-sex relationships that are equivalent to heterosexual relationships in essential respects. Allowing same-sex couples to marry would give them access to the legal, social, and economic support that already facilitate and strengthen heterosexual marriages, with all of the psychological and health benefits associated with that support. It would also end the antigay stigma imposed by the State through its same-sex marriage ban.

In addition, a large number of children are currently being raised by lesbians and gay men, both in same-sex couples and as single parents. Ending the prohibition on marriage for same-sex partners is in the best interest of the children being raised by these parents. Empirical research has consistently shown that lesbian and gay parents do not differ from heterosexuals in their parenting skills,

and their children do not show any deficits compared to children raised by heterosexual parents. It is the quality of parenting that predicts children's psychological and social adjustment, not the parents' sexual orientation or gender. If their parents are allowed to marry, the children of same-sex couples will benefit from the legal stability and other familial benefits that marriage provides, as well as from elimination of state-sponsored stigmatization of their families.

ARGUMENT

I. The Nature of Scientific Evidence and Its Presentation in this Brief.

This brief has been prepared and reviewed by expert members of *amici* – the nation's and state's leading associations of psychological professionals, psychological researchers, and social workers – who are thoroughly familiar with current scientific theory, research methods, empirical findings, and clinical techniques concerning sexual orientation, marriage and non-marital relationships, and parenting.¹ In the informed judgment of *amici*, this brief presents an accurate and balanced summary of the current state of scientific and professional knowledge about these issues. To further assist the Court, we briefly explain the professional

¹ Counsel has assisted *amici* in preparing this brief, but *amici* and their expert members, not counsel, have taken sole responsibility for reviewing the scientific literature and summarizing the conclusions to be drawn therefrom.

standards we have followed for selecting individual studies and literature reviews for citation and for drawing conclusions from research data and theory.²

(1) We are ethically bound to be accurate and truthful in describing research findings and in characterizing the current state of scientific knowledge.

(2) We rely on the best empirical research available from peer-reviewed, reputable academic journals, focusing on general patterns rather than any single study. Not every published paper meets this standard because academic journals differ widely in their publication criteria and the rigor of their peer review. In assessing the scientific literature, we have been guided solely by criteria of scientific validity, and have neither included studies merely because they support, nor excluded credible studies merely because they contradict, particular conclusions.

(3) Before citing any study, we critically evaluate its methodology, including the reliability and validity of the measures and tests it employed, and the quality of its data-collection procedures and statistical analyses. We also evaluate the

² To comply with this Court's order, *amici* have deleted all citations to non-legal authorities. A version of the full length brief with all citations was filed in the New York Appellate Division, Third Department in *Samuels and Gallagher v. New York State Department of Health* consistent with that court's order. It is available at http://www.jenner.com/files/tbl_s18News/RelatedDocuments147/1658/American_Psychological_Association_Amicus_Brief.pdf.

adequacy of the study's sample, which must always be considered in terms of the specific research question posed by the study.³

(4) No empirical study is perfect in its design and execution. All scientific studies can be constructively criticized, and scientists continually try to identify ways to improve and refine their own work and that of their colleagues. When a scientist identifies limitations or qualifications to a study's findings or states that additional research is needed, this should not necessarily be interpreted as a dismissal or discounting of the research. Rather, critiques are part of the process by which science is advanced.

(5) Scientific research cannot prove that a particular phenomenon never occurs or that two variables are never related to each other. When repeated studies with different samples consistently fail to establish the existence of a phenomenon or a relationship between two variables, researchers become increasingly convinced that, in fact, the phenomenon does not exist or the variables are

³ To confidently describe the frequency with which a phenomenon occurs in the population at large, for example, it is necessary to collect data from a probability sample (or "representative sample"). By contrast, simply to document that a phenomenon occurs, case studies and nonprobability samples are often adequate. For comparisons of different populations, probability samples drawn from each group are desirable but not necessary and rarely feasible. Hence, researchers often rely on nonprobability samples that have been matched on relevant characteristics (e.g., educational level, age, income). Some groups are sufficiently few in number — relative to the entire population — that locating them with probability sampling methods is extremely expensive or practically impossible. In the latter cases, the use of nonprobability samples is often appropriate; when numerous studies with different samples reach similar conclusions, we place greater confidence in those conclusions than when they are derived

unrelated. In the absence of supporting data from prior studies, if a researcher wants to argue that two phenomena are correlated, the burden of proof is on that researcher to show that the relationship exists.

II. Sexual Orientation and Homosexuality.

Sexual orientation refers to an enduring pattern or disposition to experience sexual, affectional, or romantic attractions primarily to men, to women, or to both sexes. It also refers to an individual's sense of personal and social identity based on those attractions, behaviors expressing them, and membership in a community of others who share them.⁴ Although sexual orientation ranges along a continuum from exclusively heterosexual to exclusively homosexual, it is usually discussed in terms of three categories: *heterosexual* (having sexual and romantic attraction primarily or exclusively to members of the other sex), *homosexual* (having sexual and romantic attraction primarily or exclusively to members of one's own sex), and *bisexual* (having a significant degree of sexual and romantic attraction to both men and women).⁵

from a single study. We therefore rely as much as possible on empirical findings that have been replicated in multiple studies by different researchers.

⁴In this brief, "gay" refers to men and women whose social identity or sexual orientation is based on their primary erotic, affectional, and romantic attraction to members of their own sex, and "lesbian" refers to women who are gay.

⁵ In this brief, we focus specifically on persons with a homosexual orientation. It should be noted that some of the research we cite concerns bisexual as well as homosexual persons. Moreover, many bisexual persons are involved in committed same-sex relationships and, to the extent they are, many of the statements in this brief apply with equal force to them.

Though distinct from other components of sex and sexuality, sexual orientation is commonly discussed as a characteristic of the *individual*, like biological sex (the anatomical, physiological, and genetic characteristics associated with being male or female) or gender identity (the psychological sense of being male or female). Although accurate insofar as it goes, this perspective is incomplete because sexual orientation necessarily implicates actual or desired relationships with other individuals. Sexual acts and romantic attractions are categorized as homosexual or heterosexual according to the biological sex of the individuals involved in them, relative to each other. Indeed, it is by acting with another person — or desiring to act — that individuals express their heterosexuality, homosexuality, or bisexuality. This includes actions as simple as holding hands with or kissing another person. Thus, sexual orientation is integrally linked to the intimate personal relationships that human beings form with others to meet their deeply felt needs for love, attachment, and intimacy. It defines the universe of persons with whom one is likely to find the fulfilling relationships that, for many individuals, comprise an essential component of personal identity.

Though homosexuality was once viewed as a disorder, since 1973, the American Psychiatric Association has recognized that homosexuality *per se* implies no impairment in judgment, stability, reliability, or general social or vocational capabilities. After a thorough review of the scientific data, the

American Psychological Association adopted the same position in 1975, and urged all mental health professionals to help dispel the stigma of mental illness that had long been associated with homosexual orientation. The National Association of Social Workers, with nearly 150,000 members, has adopted a similar policy. Thus, mental health professionals and researchers have long recognized that being homosexual poses no inherent obstacle to leading a happy, healthy, and productive life, and that the vast majority of gay and lesbian people function well in the full array of social institutions and interpersonal relationships.

Like heterosexuals, lesbians and gay men benefit to the extent that they are able to share their lives with and receive support from their family, friends, and other acquaintances. For example, lesbians and gay men have been found to manifest better mental health when they hold positive feelings about their own sexual orientation, have developed a positive sense of personal identity based on it, and have integrated it into their lives by disclosing it to others. By contrast, lesbians and gay men who feel compelled to conceal their sexual orientation tend to report more frequent mental health concerns than their openly gay counterparts, and may even be at risk for physical health problems.

Differences in stress between the heterosexual population and the homosexual population can be attributed largely to the societal stigma directed at

the latter.⁶ To the extent that gay persons are subjected to additional stress beyond what is normally experienced by the heterosexual population, they may, as a group, manifest somewhat higher levels of illness or psychological distress.⁷ In experiencing such excess stress, the gay and lesbian population is comparable to other minority groups that face unique stressors due to prejudice and discrimination based on their minority status.⁸ Given the unique social stressors to which they are subjected, the noteworthy fact is that the vast majority of gay men and lesbians effectively cope with these challenges and lead happy, healthy and well-adjusted lives.

⁶ "Stigma" refers to an enduring condition, status, or attribute that is negatively valued by society, fundamentally defines a person's social identity, and consequently disadvantages and disempowers those who have it. Examples of stigma experienced by large numbers of lesbian, gay, and bisexual people include ostracism and personal rejection, harassment, discrimination, and violence because of their sexual orientation.

⁷ The link between experiencing stress and manifesting symptoms of psychological or physical illness is well established in human beings and other species.

⁸ In addition, lesbian, gay, and bisexual people face other stressors. For example, because the AIDS epidemic has had a disproportionate impact on the gay male community in the United States, many gay and bisexual men have experienced the loss of a life partner, and gay, lesbian, and bisexual people alike have experienced extensive losses in their personal and social networks resulting from the death of close friends and acquaintances; bereavement related to multiple losses is linked to higher levels of depressive symptoms.

III. Sexual Orientation and Relationships.

A. Gay Men and Lesbians Form Stable, Committed Relationships That Are Equivalent to Heterosexual Relationships in Essential Respects.

Like their heterosexual counterparts, substantial numbers of gay men and lesbians desire to form stable, long-lasting, committed relationships. Many are successful in doing so. Empirical studies using nonrepresentative samples of gay men and lesbians show that the vast majority of participants have been involved in a committed relationship at some point in their lives, that large proportions are currently involved in such a relationship (across studies, roughly 40 - 70% of gay men and 45 - 80% of lesbians), and that a substantial number of those couples have been together 10 or more years. Recent surveys based on more representative samples of gay men, lesbians, and bisexuals support these findings and indicate that many same-sex couples are cohabiting. A preliminary analysis of data from the 2000 US Census reported that same-sex couples headed more than 594,000 households in the United States, with at least one cohabiting same-sex couple in 99% of the nation's counties.⁹

Empirical research demonstrates that the psychological and social aspects of these committed relationships between same-sex partners strongly resemble those

⁹ These findings necessarily represent a low estimate of the number of same-sex couples in the United States because the Census form excluded couples who were not living together.

of heterosexual partnerships. Both heterosexual couples and same-sex couples form deep emotional attachments and face similar relationship issues such as intimacy, love, equity, loyalty, and stability. Empirical research examining the quality of intimate relationships also shows that most gay men and lesbians are successful in creating intimate relationships and that same-sex couples are no more vulnerable to relationship problems than their heterosexual counterparts.

Based on the empirical research, the American Psychological Association has concluded that psychological research on relationships and couples provides no evidence to justify discrimination against same-sex couples.

B. The Institution Of Marriage Offers Social, Psychological, and Health Benefits That Are Denied To Same-Sex Couples.

Social scientists have long understood that marriage as a social institution has a profound effect on the lives of the individuals who inhabit it, protecting them from social disconnectedness and providing a framework in which they can experience life as making sense. Although it is difficult to quantify how the meaning of life changes for individuals once they are married, empirical research clearly demonstrates that marriage has distinct benefits that extend beyond the material necessities of life. As a legal institution, marriage also gives legally wed spouses access to a host of economic and social benefits and obligations that

Additionally, some cohabiting same-sex couples likely did not identify themselves due to fear of stigma or ignorance about this portion of the Census form.

currently are not extended to same-sex relationships. Research establishes that both these tangible and intangible elements of the marital relationship have important implications for the psychological and physical health of married individuals and for the relationship itself. Because they are denied the opportunity to marry, partners in same-sex couples are denied these benefits.

Because marriage rights have been granted to same-sex couples only recently and only in one state (Massachusetts) and a few countries, no empirical studies have yet been published that compare married same-sex couples to unmarried same-sex couples. However, a large body of scientific research has compared married and unmarried heterosexual couples and individuals. Based on its scientific and clinical expertise, *amici* believe it is appropriate to extrapolate from the empirical research literature for heterosexual couples — with qualifications as appropriate — to anticipate the likely effects marriage would have on that segment of population that would choose to marry if allowed to do so.¹⁰ *Amici* believe that the potential benefits of marriage for gay men and lesbians in same-sex couples are similar to those previously observed for heterosexuals.

¹⁰ Researchers recognize that comparisons between married and unmarried individuals are complicated by the possibility that observed differences might be due to self-selection. People who choose to marry may differ from those who do not choose to marry in important ways. After extensive study, however, researchers have concluded that the benefits associated with marriage result largely from the institution itself rather than from self-selection.

Married men and women generally experience better physical and mental health than their unmarried counterparts. These health benefits do not appear to result simply from being in an intimate relationship because most (although not all) studies have found that married individuals generally manifest greater well-being than comparable individuals in heterosexual unmarried cohabiting couples. The health benefits of marriage may be due partly to married couples enjoying greater economic and financial security than unmarried individuals. Of course, marital status alone does not guarantee greater health or happiness. People who are unhappy with their marriage often manifest lower levels of well-being than their unmarried counterparts, and experiencing marital discord and dissatisfaction is often associated with negative health effects. Nevertheless, married couples who are satisfied with their relationships consistently manifest higher levels of happiness, psychological well-being, and physical health than the unmarried.

The health benefits of legal marriage are dramatically evident on the occasion of traumatic events, such as the serious illness, physical incapacitation, or death of a partner. Such events can often be the most stressful occasions in a person's life. The death of a partner, in particular, often has negative consequences for the surviving partner's psychological and physical health. The stress encountered in such situations can be somewhat mitigated by the legal benefits associated with marriage. In times of illness, a legal spouse is afforded

access to her or his incapacitated partner and can make health decisions for her or him, including decisions involving the continuance or cessation of heroic measures to prolong the partner's life. Such capabilities are likely to increase the extent to which the spouse experiences a sense of personal control in the situation, which is associated with better health among spousal caregivers. When a partner dies, the stress of bereavement is likely to be compounded if the death creates financial strain for the surviving partner. Some of this stress is alleviated for married partners by the legal recognition of the couple's relationship insofar as it accords the surviving spouse automatic rights of inheritance, death benefits, and bereavement leave.

By contrast, an unmarried member of a couple may be denied a right as basic as access to her or his partner in a hospital emergency room, where only "immediate family" members are allowed. Encountering such barriers to assisting even having contact with one's partner substantially compounds the stress inevitably associated with a health crisis for both partners. Such an experience is likely to add a layer of psychological trauma to what is already a highly stressful event and therefore may adversely affect the physical health of both partners.

Similarly, the unmarried partner of a decedent can experience "disenfranchised grief," i.e., the grief that persons experience when they incur a loss that is not or cannot be openly acknowledged, publicly mourned, or socially

supported. She or he may not be legally recognized as having any relationship to a deceased partner and may not even be allowed to make funeral arrangements. Such an experience can create considerable psychological distress for the surviving partner, with potentially long-term mental health consequences.

Open communication with one's partner during stressful life events represents a critically important coping mechanism for the individual and the couple. More generally, self-disclosure within a relationship is recognized by researchers and clinicians as a cornerstone of intimacy, and factors that prevent open communication between partners are likely to have a negative effect on the quality and survival of the relationship. The law recognizes the central importance of open communication for married couples through, for example, marital privileges against being compelled to testify. Unmarried couples, however, do not enjoy this same protection. Thus, at the very times when it is most critical for their relationship and individual well-being to freely communicate with each other, that is, when serious problems arise that could have legal consequences, unmarried partners may be unable to do so.

Marriage also is a source of stability and commitment for the relationship between spouses. Social scientists have long recognized that marital commitment is a function not only of attractive forces (i.e., rewarding features of the partner or the relationship) but also of external forces that serve as barriers or constraints on

dissolving the relationship. Barriers to terminating a marriage include feelings of obligation to one's spouse, children, and other family members; moral and religious values about divorce; legal restrictions; financial concerns; and the expected disapproval of friends and the community. In the absence of adequate rewards, the existence of barriers alone is not sufficient to sustain a marriage in the long term. Not surprisingly, perceiving one's intimate relationship primarily in terms of rewards, rather than barriers to dissolution, is likely to be associated with greater relationship satisfaction. Nonetheless, the presence of barriers may increase partners' motivation to seek solutions for problems when possible, rather than rushing to dissolve a relationship that might have been salvaged. Indeed, the perceived presence of barriers is negatively correlated with divorce, suggesting that barriers contribute to staying together for at least some couples in some circumstances.

Thus, although same-sex and heterosexual relationships are held together by many of the same *attracting* forces, marriage provides heterosexual couples with institutionalized barriers to relationship dissolution that do not exist for same-sex couples. Lacking access to legal marriage, the primary motivation for same-sex couples to remain together derives mainly from the rewards associated with the relationship rather than from formal barriers to separation. Given this fact, plus the

legal and prejudicial obstacles that same-sex partners face, the prevalence and durability of same-sex relationships are striking.

C. By Denying Same-Sex Couples the Right to Marry, the State Reinforces and Perpetuates the Stigma Historically Associated With Homosexuality.

As explained above, same-sex committed relationships do not differ from heterosexual committed relationships in their essential emotional qualities and capacity for long-term commitment. As explained below, they also do not differ in the context they provide for rearing healthy and well-adjusted children. Thus, *amici* conclude that the reason for according same-sex relationships a different legal status than heterosexual relationships is ultimately the sexual orientation of the individuals in the relationship.

This differentiation is, by definition, an expression of stigma. A status or characteristic is stigmatized when it is negatively valued by society and, as a consequence, is a basis for disadvantaging and disempowering those who have it. Legal prohibitions against same-sex marriage convey society's judgment that committed intimate relationships with people of the same sex are inherently inferior to heterosexual relationships, and less deserving of society's recognition. Through that judgment, the State devalues and delegitimizes the relationships that are the core of a homosexual orientation and perpetuates power differentials that afford heterosexuals greater access than non-heterosexuals to a variety of resources

and benefits. This process of according disadvantaged status to the members of one group relative to another is the crux of stigma.

Stigma gives rise to prejudice, discrimination, and violence against people based on their sexual orientation. Research indicates that the experience of stigma and discrimination is associated with heightened psychological distress among gay men and lesbians. Being the target of extreme enactments of stigma, such as an antigay criminal assault, is associated with greater psychological distress than experiencing a similar crime not based on one's sexual orientation. Moreover, fear of stigma makes some gay persons conceal their sexual orientation, thereby heightening the potential for psychological distress and stress-related physical health problems.

Additionally, to the extent that stigma motivates some lesbians and gay men to conceal their sexual orientation, it further reinforces anti-gay prejudices among heterosexuals. Research has consistently shown that prejudice against minorities, including gay people,¹¹ decreases significantly when members of the majority group knowingly have contact with minority group members.¹² Consistent with

¹¹ As noted in social psychological textbooks, although the specific content of prejudice varies across different minority groups, the psychological dynamics of prejudice are similar regardless of the group toward which that prejudice is directed.

¹² A meta-analysis of hundreds of studies of contact and prejudice based on sexual orientation, nationality, race, age, and disability found a highly robust inverse relationship between contact and prejudice. That analysis also found that more rigorous studies (based on observed contact rather than reported contact) yielded greater effects, that contact changed attitudes towards the

this general pattern, empirical research demonstrates that having personal contact with an openly gay person is one of the most powerful influences on heterosexuals' tolerance and acceptance of gay people. Anti-gay attitudes are significantly less common among members of the population who report having a close friend or family member who is gay or lesbian, particularly when the gay person has directly disclosed his or her sexual orientation to the heterosexual person.

Thus, by denying same-sex couples the right to marry legally, the State compounds and perpetuates the stigma historically attached to homosexuality. This stigma has negative consequences for all gay and lesbian people, regardless of their relationship status or desire to marry. To the extent that stigma prevents heterosexuals from interacting with openly gay people, it also reinforces and perpetuates antigay prejudice.

IV. The Children of Lesbians and Gay Men.

A. Many Same-Sex Couples Are Currently Raising Children.

A large and ever increasing number of gay and lesbian couples, like their heterosexual counterparts, raise children together. Although data are not available to indicate the exact number of lesbian and gay parents in the United States, the 2000 Census found that, among heads of household who reported cohabiting with a

entire "outgroup" (not just towards those individuals with whom subjects had contact), and that majority group participants experienced greater changes in attitude than minority group members.

same-sex partner, 33% of women and 22% of men had a son or daughter under 18 years living in their home. These percentages correspond to approximately 65,600 gay fathers and 96,000 lesbian mothers who are heads of household, have at least one child under 18 living with them, and are cohabiting with a partner. If one includes noncohabitating and single parents, parents of offspring 18 years or older, and parents who chose not to disclose to the Census Bureau that they live with a same-sex partner, researchers estimate that considerably more, perhaps millions, of American parents today identify themselves as gay, lesbian, or bisexual. They further suggest that the sons and daughters of gay, lesbian, and bisexual parents in the United States today are likely to number more than one million.

Families comprising same-sex couples and their children have diverse origins and take a variety of forms. Some couples have children conceived in one partner's prior heterosexual marriage (or nonmarital heterosexual relationship) predating that individual's present same-sex relationship. In these cases, the biological parent's same-sex partner often assumes the role of *de facto* step-parent, albeit without the legal framework provided by marriage. In addition, a growing number of same-sex couples are becoming parents through methods including donor insemination (with either an anonymous or known donor), assistance of a surrogate mother, and adoption. The children in many families headed by same-sex couples have a legal relationship with only one of the parents, either through

birth or adoption. However, both members of the couple typically function as parents for the children, even if they are not legally recognized as such. In addition, the legal trend toward allowing second-parent adoption by same-sex couples is resulting in an increasing number of families wherein both members of the same-sex couple are legally recognized as the parents of their children – even though the parents themselves are not allowed to form a legally recognized relationship with each other through marriage.

B. Gay and Lesbian Parents Are as Fit and Capable as Heterosexual Parents, and Their Children Are as Psychologically Healthy and Well Adjusted.

Although it is sometimes asserted in policy debates that heterosexual couples are inherently better parents than same-sex couples, or that the children of lesbian or gay parents fare worse than children raised by heterosexual parents, those assertions are not supported by the scientific research literature.¹³

When comparing the outcomes of different forms of parenting, it is critically important to make appropriate comparisons. For example, differences resulting from the *number* of parents in a household cannot be validly attributed to the parents' *gender* or *sexual orientation*. Research in households with heterosexual

¹³ The research literature on gay, lesbian, and bisexual parents includes more than two dozen empirical studies. These studies vary in the quality of their samples, research design, measurement methods, and data analysis techniques. However, they are impressively consistent in their failure to identify deficits in the development of children raised in a lesbian or gay household.

parents generally indicates that – all else being equal – children do better with two parenting figures rather than just one. The specific research studies typically cited in this regard do not address parents' sexual orientation, however, and therefore do not permit any conclusions to be drawn about the consequences of having heterosexual versus nonheterosexual parents, or two parents who are of the same versus different genders.

Indeed, the relevant scientific research has been remarkably consistent in showing that lesbian and gay parents are every bit as fit and capable as heterosexual parents, and their children are as psychologically healthy and well-adjusted as children reared by heterosexual parents. Empirical research over the past two decades has failed to find any meaningful differences in the parenting ability of lesbian and gay parents compared to heterosexual parents. Most research on this topic has focused on lesbian mothers and refutes the stereotype that lesbian parents are not as child-oriented or maternal as non-lesbian mothers. Researchers have concluded that heterosexual and lesbian mothers do not differ in their parenting ability.¹⁴ Studies examining gay fathers are fewer in number, but those

¹⁴ Some studies have found that a child with two lesbian parents may enjoy some advantages over a child raised by a biological mother and a stepfather. Indeed, studies find that nonbiological lesbian comothers tend to be more skilled at parenting and more involved with the children than are stepfathers. Lesbian partners in two-parent families also enjoy a greater level of synchronicity in parenting than do heterosexual partners.

that exist find that gay men are similarly fit and able parents, as compared to heterosexual men.

Turning to the children of gay parents, researchers reviewing the scientific literature conclude that studies provide no evidence that psychological adjustment among lesbians, gay men, their children, or other family members is impaired in any significant way and that every relevant study to date shows that parental sexual orientation per se has no measurable effect on the quality of parent-child relationships or on children's mental health or social adjustment. A comprehensive survey of peer-reviewed scientific studies in this area reported no differences between children raised by lesbians and those raised by heterosexuals with respect to self-esteem, anxiety, depression, behavioral problems, performance in social arenas (sports, school and friendships), use of psychological counseling, mothers' and teachers' reports of children's hyperactivity, unsociability, emotional difficulty, or conduct difficulty.

Nor does empirical research support the misconception that having a homosexual parent harms children's *gender identity* development.¹⁵ Studies concerning the children of lesbian mothers have not found any difference from those of heterosexual parents in their patterns of gender identity. As a panel of the

¹⁵ As noted above, *gender identity* concerns the child's psychological sense of *being* male or female.

American Academy of Pediatrics concluded on the basis of their examination of peer-reviewed studies, none of the more than 300 children studied to date have shown evidence of gender identity confusion, wished to be the other sex, or consistently engaged in cross-gender behavior.

Similarly, most published studies have not found reliable differences in *social gender role* conformity between the children of lesbian and heterosexual mothers.¹⁶ Data have not been reported on the gender identity development or gender role orientation of the sons and daughters of gay fathers.

Finally, concerning the adult sexual orientation of children raised by gay or lesbian parents, the factors that cause an individual to become heterosexual, homosexual, or bisexual — including possible biological, psychological, or social effects of the parents' sexual orientation — are not well understood. As noted above, homosexuality is neither an illness nor a disability, and the mental health professions do not regard a homosexual orientation as harmful, undesirable, or requiring intervention or prevention. The available evidence indicates that the vast

¹⁶ *Social gender role* refers to *adherence to cultural norms* defining feminine and masculine behavior. One group of researchers found that daughters of lesbian mothers were significantly less conforming to stereotypical social gender roles in some respects; for instance, they were more likely than daughters of heterosexual mothers to aspire to non-traditional occupations for women, such as doctor, astronaut, lawyer, or engineer. However, the majority of published studies have *not* found meaningful differences in this regard. And, to the extent such differences may exist, many psychologists would consider them healthy in a world in which gender-based discrimination persists. Indeed, less traditionally gender-typed children are arguably better prepared should the future involve more egalitarian societies.

majority of lesbian and gay adults were raised by heterosexual parents and the vast majority of children raised by lesbian and gay parents eventually grow up to be heterosexual.

Amici emphasize that the abilities of gay and lesbian persons as parents and the positive outcomes for their children are *not* areas where credible scientific researchers disagree. Thus, after careful scrutiny of decades of research in this area, the American Psychological Association concluded in its recent Resolution on Sexual Orientation, Parents, and Children that “Research has shown that adjustment, development, and psychological well-being of children is unrelated to parental sexual orientation and that the children of lesbian and gay parents are as likely as those of heterosexual parents to flourish.” Similarly, the American Academy of Pediatrics, the nation’s preeminent pediatric authority with 57,000 pediatrician members, has adopted a formal policy declaring that “Children who grow up with one or two gay and/or lesbian parents fare as well in emotional, cognitive, social, and sexual functioning as do children whose parents are heterosexual No data have pointed to any risk to children as a result of growing up in a family with one or more gay parents.” And the National Association of Social Workers has determined that “The most striking feature of the research on lesbian mothers, gay fathers, and their children is the absence of pathological findings. The second most striking feature is how similar the groups

of gay and lesbian parents and their children are to heterosexual parents and their children that were included in the studies.”

These statements by the leading associations of experts in this area reflect professional consensus that children raised by lesbian or gay parents do not differ in any important respects from those raised by heterosexual parents. It is the quality of parenting that predicts children’s psychological and social adjustment, not the parents’ sexual orientation or gender.

C. The Children of Same-Sex Couples Will Benefit If Their Parents Are Allowed to Marry.

Allowing same-sex couples to legally marry will not have any detrimental effect on children raised in heterosexual households, but it will benefit children being raised by same-sex couples in at least three ways. First, those children will benefit from having a clearly defined legal relationship with both of their *de facto* parents, particularly for those families that lack the means or wherewithal to complete a second-parent adoption. Such legal clarity is especially important during times of crisis, ranging from school and medical emergencies involving the child to the incapacity or death of a parent. The death of a parent is a particularly stressful occasion for a child. In those situations, the stable legal bonds afforded by marriage can provide the child with as much continuity as possible in her or his relationship with the surviving parent, and can minimize the likelihood of conflicting or competing claims by non-parents for the child’s custody.

Second, children will benefit from the greater stability and security that is likely to characterize their parents' relationship when it is legally recognized through marriage. Children obviously benefit to the extent that their parents are financially secure, physically and psychologically healthy, and not subjected to high levels of stress. They also benefit to the extent that their parents' relationship is stable and likely to endure.¹⁷ Thus, the children of same-sex couples can be expected to benefit when their parents have the legal right to marry.

Finally, marriage can be expected to benefit the children of gay and lesbian couples by reducing the stigma currently associated with those children's status. Such stigma can derive from various sources. When same-sex partners cannot marry, their biological children are born "out of wedlock," conferring a status that historically has been stigmatized as "illegitimacy" and "bastardy." Although the social stigma attached to illegitimacy has declined in many parts of society, being born to unmarried parents is still widely considered undesirable.¹⁸ As a result, children of parents who are not married may be stigmatized by others, such as

¹⁷ Research on parent-child relations in heterosexual parent families has consistently revealed that children's adjustment is often related to indices of parental mental health. Some research suggests that a similar pattern holds when the parents are lesbian or gay.

¹⁸ For example, one federally funded program is designed specifically to prevent pregnancies from occurring outside of marriage. *See, e.g.*, 42 U.S.C. § 603 (defining bonus program that rewards states that successfully reduce the percentage of illegitimate births).

peers or school staff members. This stigma of illegitimacy will not be visited upon the children of same-sex couples when those couples can legally marry.

In addition, children of same-sex couples may be secondary targets of stigma directed at their parents because of the parents' sexual orientation. The effects of such stigma may be indirect, as when lesbian or gay parents experience greater strain on their relationship as a result of not receiving social support to the same extent as heterosexual couples. The effects may also be direct if the children of lesbian and gay parents, like children from other minority groups, experience teasing at the hands of other children. As noted above, children of lesbians have *not* been found to differ from the children of heterosexual parents in the quality of their peer relationships. However, lesbian and gay parents and their children are generally aware of the potential for stigma and may take specific steps to avoid it. Thus, the threat of stigma represents a burden with which families headed by same-sex couples must cope and it is reasonable to predict that children will benefit by having even the threat of such stigma removed from their lives.

CONCLUSION

There is no scientific basis for distinguishing between same-sex couples and heterosexual couples with respect to the legal rights, obligations, benefits, and burdens conferred by civil marriage.

Dated: July 5, 2005

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PURSUANT TO 22 NYCRR § 670.10.3(f)

The foregoing brief was prepared on a computer. A proportionally spaced typeface was used, as follows:

Name of typeface: Times New Roman
Point size: 14 (12 point font for footnotes)
Line spacing: Double

The total number of words in the brief, inclusive of point headings and footnotes and exclusive of pages containing the table of contents, table of citations, proof of service, certificate of compliance, or any authorized addendum containing statutes, rules, regulations, etc., is 6,826.

Resolution on Sexual Orientation and Marriage

Adopted by the APA Council of Representatives, July 2004

Research Summary

Minority Stress in Lesbian, Gay, and Bisexual Individuals

Psychological and psychiatric experts have agreed since 1975 that homosexuality is neither a form of mental illness nor a symptom of mental illness (Conger, 1975). Nonetheless, there is growing recognition that social prejudice, discrimination, and violence against lesbians, gay men, and bisexuals take a cumulative toll on the well-being of these individuals. Researchers (e.g., DiPlacido, 1998; Meyer, 2003) use the term "minority stress" to refer to the negative effects associated with the adverse social conditions experienced by individuals who belong to a stigmatized social group (e.g., the elderly, members of racial and ethnic minority groups, the physically disabled, women, the poor or those on welfare, or individuals who are gay, lesbian, or bisexual).

A recent meta-analysis of population-based epidemiological studies showed that lesbian, gay, and bisexual populations have higher rates of stress-related psychiatric disorders (such as those related to anxiety, mood, and substance use) than do heterosexual populations (Meyer, 2003). These differences are not large but are relatively consistent across studies (e.g., Cochran & Mays, 2000; Cochran, Sullivan, & Mays, 2003; Gilman et al., 2001; Mays & Cochran, 2001). Meyer also provided evidence that within lesbian, gay, and bisexual populations, those who more frequently felt stigmatized or discriminated against because of their sexual orientation, who had to conceal their homosexuality, or who were prevented from affiliating with other lesbian, gay, or bisexual individuals tended to report more frequent mental health concerns. Research also shows that compared to heterosexual individuals and couples, gay and lesbian individuals and couples experience economic disadvantages (e.g., Badgett, 2001). Finally, the violence associated with hate crimes puts lesbians, gay men and bisexual individuals at risk for physical harm to themselves, their families, and their property (D'Augelli, 1998; Herek, Gillis, & Cogan, 1999). Taken together, the evidence clearly supports the position that the social stigma, prejudice, discrimination, and violence associated with not having a heterosexual sexual orientation and the hostile and stressful social environments created thereby adversely affect the psychological, physical, social, and economic well-being of lesbian, gay, and bisexual individuals.

Same-Sex Couples

Research indicates that many gay men and lesbians want and have committed relationships. For example, survey data indicate that between 40% and 60% of gay men and between 45% and 80% of lesbians are currently involved in a romantic relationship (e.g., Bradford, Ryan, & Rothblum, 1994; Falkner & Garber, 2002; Morris, Balsam, & Rothblum, 2002). Further, data from the 2000 United States Census (United States Census Bureau, 2000) indicate that of the 5.5 million couples who were living together but not married, about 1 in 9 (594,391) had partners of the same sex. Although the Census data are almost certainly an underestimate of the actual number of cohabiting same-sex couples, they indicated that a male householder and a male partner headed 301,026 households and that a female householder and a female partner headed 293,365 households.¹

Despite persuasive evidence that gay men and lesbians have committed relationships, three concerns about same-sex couples are often raised. A first concern is that the relationships of gay men and lesbians are dysfunctional and unhappy. To the contrary, studies that have compared partners from same-sex couples to partners from heterosexual couples on standardized measures of relationship

¹The same-sex couples identified in the U.S. Census may include couples in which one or both partners are bisexually identified, rather than gay or lesbian identified.

quality (such as satisfaction and commitment) have found partners from same-sex and heterosexual couples to be equivalent to each other (see reviews by Peplau & Beals, 2004; Peplau & Spalding, 2000).

A second concern is that the relationships of gay men and lesbians are unstable. However, research indicates that, despite the somewhat hostile social climate within which same-sex relationships develop, many lesbians and gay men have formed durable relationships. For example, survey data indicate that between 18% and 28% of gay couples and between 8% and 21 % of lesbian couples have lived together 10 or more years (e.g., Blumstein & Schwartz, 1983; Bryant & Demian, 1994; Falkner & Garber, 2002; Kurdek, 2003). Researchers (e.g., Kurdek, in press) have also speculated that the stability of same-sex couples would be enhanced if partners from same-sex couples enjoyed the same levels of social support and public recognition of their relationships as partners from heterosexual couples do.

A third concern is that the processes that affect the well-being and permanence of the relationships of lesbian and gay persons are different from those that affect the relationships of heterosexual persons. In fact, research has found that the factors that predict relationship satisfaction, relationship commitment, and relationship stability are remarkably similar for both same-sex cohabiting couples and heterosexual married couples (Kurdek, 2001, in press).

Resolution

WHEREAS APA has a long-established policy to deplore "all public and private discrimination against gay men and lesbians" and urges "the repeal of all discriminatory legislation against lesbians and gay men" (Conger, 1975, p. 633);

WHEREAS the APA adopted the Resolution on Legal Benefits for Same-Sex Couples in 1998 (Levant, 1998, pp. 665-666.

WHEREAS Discrimination and prejudice based on sexual orientation detrimentally affects psychological, physical, social, and economic well-being (Badgett, 2001; Cochran, Sullivan, & Mays, 2003; Herek, Gillis, & Cogan, 1999; Meyer, 2003);

WHEREAS "Anthropological research on households, kinship relationships, and families, across cultures and through time, provide[s] no support whatsoever for the view that either civilization or viable social orders depend upon marriage as an exclusively heterosexual institution" (American Anthropological Association, 2004);

WHEREAS Psychological research on relationships and couples provides no evidence to justify discrimination against same-sex couples (Kurdek, 2001, in press; Peplau & Beals, 2004; Peplau & Spalding, 2000);

WHEREAS The institution of civil marriage confers a social status² and important legal benefits, rights, and privileges³;

² Turner v. Safley, 482 U.S. 78, 95-96 (1987) (summarizing intangible social benefits of marriage in the course of striking down state restrictions on prisoner marriage, "[m]arriages . . . are expressions of emotional support and public commitment. These elements are an important and significant aspect of the marital relationship."); *Maynard v. Hill*, 125 U.S. 190, 211 (1888) (marriage is more than a mere contract, it is "the foundation of the family and of society"); *Goodridge v. Dep't of Public Health*, 798 N.E.2d 941 (Mass. 2003) ("[m]arriage also bestows enormous private and social advantages on those who choose to marry. Civil marriage is at once a deeply personal commitment to another human being and a highly public celebration of the ideals of mutuality, companionship, intimacy, fidelity, and family"); James M. Donovan, *Same-Sex Union Announcements: Whether Newspapers Must Publish Them, and Why Should we Care*, 68 BROOK. L. REV. 721, 746 (2003) ("the intangible benefit of public recognition is arguably the most important benefit of marriage to the couple as a unit"); Gil Kujovich, *An Essay on the Passive Virtue of* Baker v. State, 25 VT. L. REV. 93, 96 (2000) ("historically, marriage has been the only state-sanctioned and socially approved means by which two people commit themselves to each other. It has been the most favored context for forming a family and raising children. From this perspective, creation of a same-sex alternative to marriage amounts

WHEREAS The United States General Accounting Office (2004) has identified over 1,000 federal statutory provisions in which marital status is a factor in determining or receiving benefits, rights, and privileges, for example, those concerning taxation, federal loans, and dependent and survivor benefits (e.g., Social Security, military, and veterans);

WHEREAS There are numerous state, local, and private sector laws and other provisions in which marital status is a factor in determining or receiving benefits, rights, and privileges, for example, those concerning taxation, health insurance, health care decision-making, property rights, pension and retirement benefits, and inheritance⁴;

WHEREAS Same-sex couples are denied equal access to civil marriage⁵;

WHEREAS Same-sex couples who enter into a civil union are denied equal access to all the benefits, rights, and privileges provided by federal law to married couples (United States General Accounting Office, 2004)⁶;

WHEREAS The benefits, rights, and privileges associated with domestic partnerships are not universally available⁷, are not equal to those associated with marriage⁸, and are rarely portable⁹;

to an exclusion from the preferred and accepted status---an exclusion that could imply the inferiority or unworthiness of the couples who are excluded, even if the alternative confers precisely the same tangible benefits and protections as marriage.”); Greg Johnson, Vermont Civil Unions: The New Language of Marriage, 25 Vt. L. Rev. 15, 17 (2000) (reflecting on the inferior status of civil unions as compared to marriage).

³ See e.g., *Goodridge v. Dep’t of Public Health*, 798 N.E.2d 941, 955-958 (Mass. 2003) (outlining Massachusetts statutory benefits and rights previously available only to married persons); *Baker v. State*, 744 A.2d 864, 883-84 (Vt. 1999) (outlining Vermont statutory benefits and rights previously available only to married persons); *Baehr v. Lewin*, 852 P.2d 44, 59 (Haw. 1993) (summarizing some of the state law benefits available only to married persons in Hawaii).

⁴ See Note 3.

⁵ WILLIAM N. ESKRIDGE, JR., *GAYLAW: CHALLENGING THE APARTHEID OF THE CLOSET* 134-35 (1999) (describing the continuing exclusion of gays and lesbians from civil marriage).

⁶ William N. Eskridge, Jr., *Equality Practice: Liberal Reflections on the Jurisprudence of Civil Unions*, 64 ALB. L. REV. 853, 861-62 (2001) (describing the “unequal benefits and obligations” of civil unions under federal law); Mark Strasser, *Mission Impossible: On Baker, Equal Benefits, and the Imposition of Stigma*, 9 WM. & MARY BILL RTS. J. 1, 22 (2000) (“[S]ame-sex civil union partners still would not be entitled to federal marital benefits . . .”); Recent Legislation, *Act Relating to Civil Unions*, 114 HARV. L. REV. 1421, 1423 (2001) (“Furthermore, the parallel between civil unions and marriage extends only to those aspects of each that do not implicate federal law. As the ‘Construction’ section of ARCU [the Act Relating to Civil Union] acknowledges, [m]any of the laws of [Vermont] are intertwined with federal law, and the general assembly recognizes that it does not have the jurisdiction to control federal laws or the benefits, protections and responsibilities related to them.”).

⁷ Gary D. Allison, *Sanctioning Sodomy: The Supreme Court Liberates Gay Sex and Limits State Power To Vindicate the Moral Sentiments of the People*, 39 TULSA L. REV. 95, 137 (2003) (“Currently, eight states have domestic partnership laws in place. By the late 1990s, 421 cities and states, and over 3,500 businesses or institutions of higher education offered some form of domestic partner benefit.”) (citations and internal quotations omitted).

⁸ Eileen Shin, *Same-Sex Unions and Domestic Partnership*, 4 GEO. J. GENDER & L. 261, 272-78 (2002) (describing the limited reach of various domestic partnership laws); Mark Strasser, *Some Observations about DOMA, Marriages, Civil Unions, and Domestic Partnerships*, 30 CAP. U. L. REV. 363, 381 (2002) (noting that while domestic partnerships “provide particular financial benefits” and offer “a vehicle whereby individuals can express that they have a particular kind of relationship with someone else,” they “are neither the equivalent of civil unions nor the equivalent of marriage”).

⁹ Nancy J. Knauer, *The September 11 Attacks and Surviving Same-Sex Partners: Defining Family Through Tragedy*, 75 TEMP. L. REV. 31, 93 (2002) (“The two major drawbacks of domestic partnership are that it tends to grant relatively few rights and it is almost never portable.”).

WHEREAS people who also experience discrimination based on age, race, ethnicity, disability, gender and gender identity, religion, and socioeconomic status may especially benefit from access to marriage for same-sex couples (Division 44/Committee on Lesbian, Gay, and Bisexual Concerns Joint Task Force on Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients, 2000);

THEREFORE BE IT RESOLVED That the APA believes that it is unfair and discriminatory to deny same-sex couples legal access to civil marriage and to all its attendant benefits, rights, and privileges;

THEREFORE BE IT FURTHER RESOLVED That APA shall take a leadership role in opposing all discrimination in legal benefits, rights, and privileges against same-sex couples;

THEREFORE BE IT FURTHER RESOLVED That APA encourages psychologists to act to eliminate all discrimination against same-sex couples in their practice, research, education and training ("Ethical Principles," 2002, p. 1063);

THEREFORE BE IT FURTHER RESOLVED That the APA shall provide scientific and educational resources that inform public discussion and public policy development regarding sexual orientation and marriage and that assist its members, divisions, and affiliated state, provincial, and territorial psychological associations.

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Resolution on Sexual Orientation, Parents, and Children

Adopted by the APA Council of Representatives, July 2004

Research Summary

Lesbian and Gay Parents

Many lesbians and gay men are parents. In the 2000 U. S. Census, 33% of female same-sex couple households and 22% of male same-sex couple households reported at least one child under the age of 18 living in the home. Despite the significant presence of at least 163,879 households headed by lesbian or gay parents in U.S. society, three major concerns about lesbian and gay parents are commonly voiced (Falk, 1994; Patterson, Fulcher & Wainright, 2002). These include concerns that lesbians and gay men are mentally ill, that lesbians are less maternal than heterosexual women, and that lesbians' and gay men's relationships with their sexual partners leave little time for their relationships with their children. In general, research has failed to provide a basis for any of these concerns (Patterson, 2000, 2004a; Perrin, 2002; Tasker, 1999; Tasker & Golombok, 1997). First, homosexuality is not a psychological disorder (Conger, 1975). Although exposure to prejudice and discrimination based on sexual orientation may cause acute distress (Mays & Cochran, 2001; Meyer, 2003), there is no reliable evidence that homosexual orientation per se impairs psychological functioning. Second, beliefs that lesbian and gay adults are not fit parents have no empirical foundation (Patterson, 2000, 2004a; Perrin, 2002). Lesbian and heterosexual women have not been found to differ markedly in their approaches to child rearing (Patterson, 2000; Tasker, 1999). Members of gay and lesbian couples with children have been found to divide the work involved in childcare evenly, and to be satisfied with their relationships with their partners (Patterson, 2000, 2004a). The results of some studies suggest that lesbian mothers' and gay fathers' parenting skills may be superior to those of matched heterosexual parents. There is no scientific basis for concluding that lesbian mothers or gay fathers are unfit parents on the basis of their sexual orientation (Armesto, 2002; Patterson, 2000; Tasker & Golombok, 1997). On the contrary, results of research suggest that lesbian and gay parents are as likely as heterosexual parents to provide supportive and healthy environments for their children.

Children of Lesbian and Gay Parents

As the social visibility and legal status of lesbian and gay parents has increased, three major concerns about the influence of lesbian and gay parents on children have been often voiced (Falk, 1994; Patterson, Fulcher & Wainright, 2002). One is that the children of lesbian and gay parents will experience more difficulties in the area of sexual identity than children of heterosexual parents. For instance, one such concern is that children brought up by lesbian mothers or gay fathers will show disturbances in gender identity and/or in gender role behavior. A second category of concerns involves aspects of children's personal development other than sexual identity. For example, some observers have expressed fears that children in the custody of gay or lesbian parents would be more vulnerable to mental breakdown, would exhibit more adjustment difficulties and behavior problems, or would be less psychologically healthy than other children. A third category of concerns is that children of lesbian and gay parents will experience difficulty in social relationships. For example, some observers have expressed concern that children living with lesbian mothers or gay fathers will be stigmatized, teased, or otherwise victimized by peers. Another common fear is that children living with gay or lesbian parents will be more likely to be sexually abused by the parent or by the parent's friends or acquaintances.

Results of social science research have failed to confirm any of these concerns about children of lesbian and gay parents (Patterson, 2000, 2004a; Perrin, 2002; Tasker, 1999). Research suggests that sexual identities (including gender identity, gender-role behavior, and sexual orientation) develop in much the same ways among children of lesbian mothers as they do among children of heterosexual parents (Patterson, 2004a). Studies of other aspects of personal development (including personality, self-concept, and conduct) similarly reveal few differences between children of lesbian mothers and children

of heterosexual parents (Perrin, 2002; Stacey & Biblarz, 2001; Tasker, 1999). However, few data regarding these concerns are available for children of gay fathers (Patterson, 2004b). Evidence also suggests that children of lesbian and gay parents have normal social relationships with peers and adults (Patterson, 2000, 2004a; Perrin, 2002; Stacey & Biblarz, 2001; Tasker, 1999; Tasker & Golombok, 1997). The picture that emerges from research is one of general engagement in social life with peers, parents, family members, and friends. Fears about children of lesbian or gay parents being sexually abused by adults, ostracized by peers, or isolated in single-sex lesbian or gay communities have received no scientific support. Overall, results of research suggest that the development, adjustment, and well-being of children with lesbian and gay parents do not differ markedly from that of children with heterosexual parents.

Resolution

WHEREAS APA supports policy and legislation that promote safe, secure, and nurturing environments for all children (DeLeon, 1993, 1995; Fox, 1991; Levant, 2000);

WHEREAS APA has a long-established policy to deplore "all public and private discrimination against gay men and lesbians" and urges "the repeal of all discriminatory legislation against lesbians and gay men" (Conger, 1975);

WHEREAS the APA adopted the Resolution on Child Custody and Placement in 1976 (Conger, 1977, p. 432)

WHEREAS Discrimination against lesbian and gay parents deprives their children of benefits, rights, and privileges enjoyed by children of heterosexual married couples;

WHEREAS some jurisdictions prohibit gay and lesbian individuals and same-sex couples from adopting children, notwithstanding the great need for adoptive parents (Lofton v. Secretary, 2004);

WHEREAS There is no scientific evidence that parenting effectiveness is related to parental sexual orientation: lesbian and gay parents are as likely as heterosexual parents to provide supportive and healthy environments for their children (Patterson, 2000, 2004; Perrin, 2002; Tasker, 1999);

WHEREAS Research has shown that the adjustment, development, and psychological well-being of children is unrelated to parental sexual orientation and that the children of lesbian and gay parents are as likely as those of heterosexual parents to flourish (Patterson, 2004; Perrin, 2002; Stacey & Biblarz, 2001);

THEREFORE BE IT RESOLVED That the APA opposes any discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services;

THEREFORE BE IT FURTHER RESOLVED That the APA believes that children reared by a same-sex couple benefit from legal ties to each parent;

THEREFORE BE IT FURTHER RESOLVED That the APA supports the protection of parent-child relationships through the legalization of joint adoptions and second parent adoptions of children being reared by same-sex couples;

THEREFORE BE IT FURTHER RESOLVED That APA shall take a leadership role in opposing all discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services;

THEREFORE BE IT FURTHER RESOLVED That APA encourages psychologists to act to eliminate all discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services in their practice, research, education and training ("Ethical Principles," 2002, p. 1063);

THEREFORE BE IT FURTHER RESOLVED That the APA shall provide scientific and educational resources that inform public discussion and public policy development regarding discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services and that assist its members, divisions, and affiliated state, provincial, and territorial psychological associations.

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National Association of Social Workers

Same-Sex Marriage Position Statement

June 28, 2004

The National Board of Directors of the National Association of Social Workers (NASW) reaffirms the Association's support for same-sex marriages, and strongly opposes any attempt to pass federal legislation or amend the United States Constitution to discriminate against same-sex couples or prohibit governmental recognition of these relationships.

Specifically, the Board of Directors supports working toward implementation of domestic partnership and marriage legislation at local, state, and national levels that includes lesbians, gays, bisexuals, and transgender people. The Board also endorses the development and dissemination of model anti-discrimination, domestic partnership, and marriage legislation, which may be used in municipal, state, and national legislatures.

This statement arises from the following fundamental principles, articulated in the NASW Code of Ethics, as well as from positions adopted in various policy statements by numerous delegate assemblies (the policy setting body of the National Association of Social Workers):

The *NASW Code of Ethics* states:

"Social workers should not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, or mental or physical disability."

"Social workers should act to prevent and eliminate domination of, exploitation of, and discrimination against any person, group, or class on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, or mental or physical disability."

NASW encourages the adoption of laws that recognize inheritance, insurance, same-sex marriage, child custody, property, and other rights in lesbian, gay, bisexual, and transgender relationships. The Association firmly believes that all federal protections and responsibilities available to legally married people in the United States should be available to people who enter same sex unions (including domestic partnerships, civil unions, and same sex marriages).

Furthermore, NASW promotes equal protection under the law, and strongly supports the full implementation of existing civil rights legislation and its application to women; to people of color; and to gays, lesbians, bisexuals, and transgender people. And, because we believe that everyone is entitled to equal opportunity — regardless of age, disability, gender, language, race, religion, or sexual orientation — NASW endorses local, state, and federal policies and programs that give all people equal access to the resources, services, and opportunities that they require.

It is imperative that social workers advocate for the rights of vulnerable people. It is equally critical, NASW believes, that social workers condemn policies, practices, and attitudes of bigotry, intolerance, and hate that put any person's human rights in jeopardy, including — but not limited to — violation of human rights based on sexual orientation.

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