Socio-Economic Inequalities and Stigma Management among Same-Sex parents in France

Marta de la Torre Carreira, Centre de Recherche sur les Inégalités Sociales (CRIS), Sciences Po, Paris, France

Introduction

This study analyzes the role of socio-economic inequalities in explaining the disparity of stigma management strategies of same-sex parents when confronted with stigmatizing attitudes, particularly within educational settings.

Same-sex households with children represent a growing demographic in the French context (Meslay 2021). In 2018, there were 31,000 children living in same-sex households, with the majority being comprised of two women (HCFEA 2021). Until 2013, same-sex parents had no legal recognition, children in these types of family thus having one "legal" and one "social" parent. In 2013, same-sex couples gained the right to marry and adopt children – with the possibility of the "social" parent adopting the child of the "legal" parent. Since 2021, female same-sex couples can access assisted reproduction techniques which are fully covered by the social security system, and be recognized as parents of their children conceived through these techniques without undergoing an adoption procedure (Prauthois and Biland 2022).

As this family structure gains legal recognition and the necessary technology becomes more readily available, the opportunity for same-sex parenting becomes more accessible. We may consequently expect the overall number of female same-sex households to grow, in particular among those who may have been deterred by economic, social, or legal barriers in the past. It is thus essential to examine the socio-economic inequalities within this demographic concerning stigmatization and its management.

While a substantial body of scholarly literature has focused on the parenting practices and outcomes of children raised by same-sex couples, most studies have concentrated on the influence of having same-sex parents on children's development. These studies have consistently shown that there are no significant differences in the social or emotional development of these children compared to those raised by heterosexual couples (Maccallum and Golombok 2004). However, research focusing on external stigmatization rather than parenting practices has shown that children growing up in same-sex households do tend to experience well-being challenges due to the stigmatization of their family structure, particularly in the school context (Mercier and Harold 2003; Vyncke 2009; Van Gelderen et al. 2009; McDonald and Morgan 2019).

Recent studies have examined how same-sex parents manage stigma, especially within the school context. These studies reveal that parents employ various strategies to prevent stigma or mitigate its impact on their children, such as establishing a network of supportive families and fostering communication with their children to ensure their well-being when faced with stigmatizing incidents (Bos and Sandfort 2009). In the school context, parents may be particularly invested in school organizations such as school councils (Kosciw and Diaz 2008; Gross 2011; McDonald and Morgan 2019) and have conversations with teachers about their family structure and how it may be perceived by other kids (Richardot and Bureau 2020).

However, these studies have yet to delve into the social class disparities that may favor some families' capacity to act against stigmatization, while simultaneously hindering others'

ability to do so. Class advantage can indeed be utilized by some middle-class same-sex families to protect their children from stigmatization, for instance, by seeking schools or neighborhoods perceived as "gay friendly" (Berton, Bureau, and Rist 2014; Frémont and Prauthois 2022). Additionally, as existing research on parental management of stigma has predominantly focused on upper-middle-class parents, these practices might have been generalized as representative of all same-sex parents, while we still know little about stigma management among less advantaged families.

As the demographic of same-sex parents continues to grow and becomes increasingly diverse, the phenomena of stigmatization and its management strategies might undergo changes. It is possible that with the growth in numbers, same-sex parenting could become more normalized, potentially reducing the stigmatization of this parental configuration. However, as the profile of these families becomes more diversified and same-sex couples with a broader range of socio-economic backgrounds access parenthood, parental management strategies may also exhibit variations. In particular, parents' ability to shield their children from stigmatization may be hindered by a lower concentration of economic, cultural, and social resources.

My work thus aims to make a twofold contribution to the literature on same-sex households, as well as to the broader field of inequality studies. I will explore the stigma management strategies of a more diverse sample of the population, including parents from less advantaged backgrounds. Furthermore, I will seek to understand how socio-economic inequalities contribute to the differences in management strategies across families. My research draws from a qualitative study of 24 female same-sex families living in France conducted through interviews from April 2022 to January 2023.

Theoretical focus

My theoretical analysis is based on an original interpretation of stigma, as well as an understanding of social class derived from educational studies, which will be detailed below.

The concept of stigma, originally advanced by Goffman (1963), is commonly used in gay and lesbian studies to describe the overt rejection of a certain identity, in this case, the homosexual one (Link and Phelan 2001). I enrich my understanding of this concept by incorporating Butler's (1990) notion of (un)intelligibility, which refers to the coherence of sex, gender, sexual practices, and desire that is required for an individual's identity to exist and be understood by others. By integrating this concept into my definition of stigma, along with considering not only *enacted*, but also *felt* stigma (Mehta and Farina 1988), I aim to understand more thoroughly how this phenomenon is diversely perceived by mothers, and how these perceptions may influence their management strategies.

I predominantly analyze stigma and stigma management through the lens of socio-economic status. Mothers interviewed for this study belong to the middle classes in their broad definition – ranging from small business employees to managers, architects, and doctors. To make sense of class differences within my sample, I adopt two main distinctions which have proved to be relevant in describing parental class strategies (van Zanten 2009). First, I use Bourdieu's (1979) distinction between the upper- and intermediate-middle classes, which encapsulates significant differences in cultural and economic capital accumulation. The first group includes in particular business owners, managers, engineers, and those worming in liberal professions, as well as intellectual and artistic professions. The second group encompasses

craftsmen, shopkeepers, technical staff, and other non-managerial employees. Second, I employ Singly and Thélot's (1988) separation between *gens du privé* and *gens du public* (those working in the private and public sectors, respectively), which also greatly informs parent's relation to their children's schooling, and is particularly relevant to the French context (Chauvel 2004).

Data and methods

My research draws on the analysis of 36 semi-structured interviews conducted between April 2022 and January 2023. In total, I interviewed 31 mothers from 24 families, as well as 8 teachers who had taught children from same-sex households. I restricted the scope of my study to only include mothers, as masculine same-sex couples are much less numerous and often wealthier – in particular due to stronger economic and legal barriers to access parenting – thus making a class comparison more difficult. I prioritized meeting both parents, especially in cases with significant internal class differences within the couple concerning professional status; this was the case for 8 families. The interviews were conducted via Zoom, phone, at the interviewees' homes, or at their workplaces.

To ensure diversity in socio-economic backgrounds among the participant families, I adopted a varied recruitment strategy which included recruiting through small associations (2), personal connections (6), a call for volunteers shared by Instagram accounts with high visibility among same-sex families (6), direct messages sent on Instagram (4) and snowball sampling (6).

The 48 women comprising the couples I studied were aged between 28 and 60, with a median age of 43. When assessing their social status based on their individual professions, 25 of them were categorized as belonging to the upper-middle class, while 23 were classified as part of the intermediate-middle class. Approximately half of the women were employed in the public sector, and the other half worked in the private sector. All participants held at least a high school diploma, and only 8 of them did not have a college degree. The children in these families ranged in age from 3 to 22, with a median age of 10. The children were aged 3 to 22, the median being 10 years old. 20 of them were girls, and 19 of them were boys.

The data collection process considered the potentially sensitive aspect of certain questions regarding sexual orientation and stigmatization. Additionally, we took into account the influence of class backgrounds on the terminology used by mothers to describe their experiences (Chetcuti 2013). Consequently, we avoided using words directly tied to stigmatization ("discrimination", "homophobia", "lesbophobia", "heterosexism", etc.), and structured the interview so as to make the participants as comfortable as possible. We started the interviews with general questions about how mothers managed family life and their children's school experiences, and asked the participants to describe key moments of their children's school lives, such as enrollment, the first day of school, and any notable interactions with teachers and other parents. Questions relating to stigma were addressed toward the end if the interviewee hadn't mentioned this aspect earlier.

I collected background information about socio-economic status by administering a questionnaire at the end of each interview. This questionnaire included questions about the interviewee's and their partner's education and career trajectories, as well as similar questions regarding their respective parents.

Interviews were manually transcribed, and subsequently coded using an inductive coding approach: after an initial coding phase on a selection of transcripts, I developed a systematic coding scheme which was applied to all materials.

Results

The stigma management strategies that took place within the home were generally consistent among most respondents, with the exception of those with fewer cultural resources. These strategies seemed to be associated with middle-class parents' typical use of language with their children (Bernstein 2003). Most mothers engaged in frequent with their children about their family structure and how it could be perceived as unusual, or even stigmatized, by other children and adults. They also aimed to foster an environment of trust and open communication to enable their children to share any experiences, including negative ones, with them. Only a few mothers who displayed a lower accumulation of cultural capital did not report discussing issues relating to stigma with their children. However, such cases were relatively rare (2) and insufficient for drawing definitive conclusions.

Socio-economic inequalities between households were much more evident in parent's ability to confront others (parents, children, or staff), and influence teacher practices to better support their children and prevent stigmatization. Upper-middle class mothers in our sample, especially those in high-status professional roles in the private sector, were more assertive in dictating their approach to managing stigma in school. They actively cultivated close relationships with teachers, and closely monitored school and teacher behavior concerning inclusivity and anti-homophobia policies. Some parents explicitly asserted their influence over teachers and mentioned their willingness to, and in some instances, their actual engagement in conflicts at the school to protect their children from stigmatization. In contrast, intermediate-middle class mothers tended to be more concerned about judgement from teachers and were hesitant to reach out to them regarding stigma management, particularly if this might result in conflict. They thus limited their interactions with teachers regarding stigma unless faced with a situation deemed serious, such as bullying related to the child's family structure.

One significant limitation of our approach is that we are unable to determine to which extent these class differences in parental strategies truly affect children's experiences in the school. However, the extensive literature demonstrating the effects of class advantage on school experiences and outcomes leads us to hypothesize that class differences among same-sex households could indeed result in disparities in wellbeing due differentiated abilities to manage stigma.

Conclusion

Same-sex households constitute an increasingly important demographic, which is also becoming more diverse in terms of socio-economic status. While studies have shown the impact of the second demographic transition on children's outcomes and well-being (McLanahan 2004), some elements such as the increase in reproductive technologies and the rising number of children growing up in same-sex households remain underexplored. I contribute to this ongoing research effort by examining significant family processes within same-sex households with children and shedding light on how these processes are partially determined by socio-economic inequalities.

Theme: Families and Households, chaired by Inga Laß and Nadja Milewski.

Keywords: same-sex parenting, socio-economic inequalities, stigma management, educational inequalities, family structure.

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