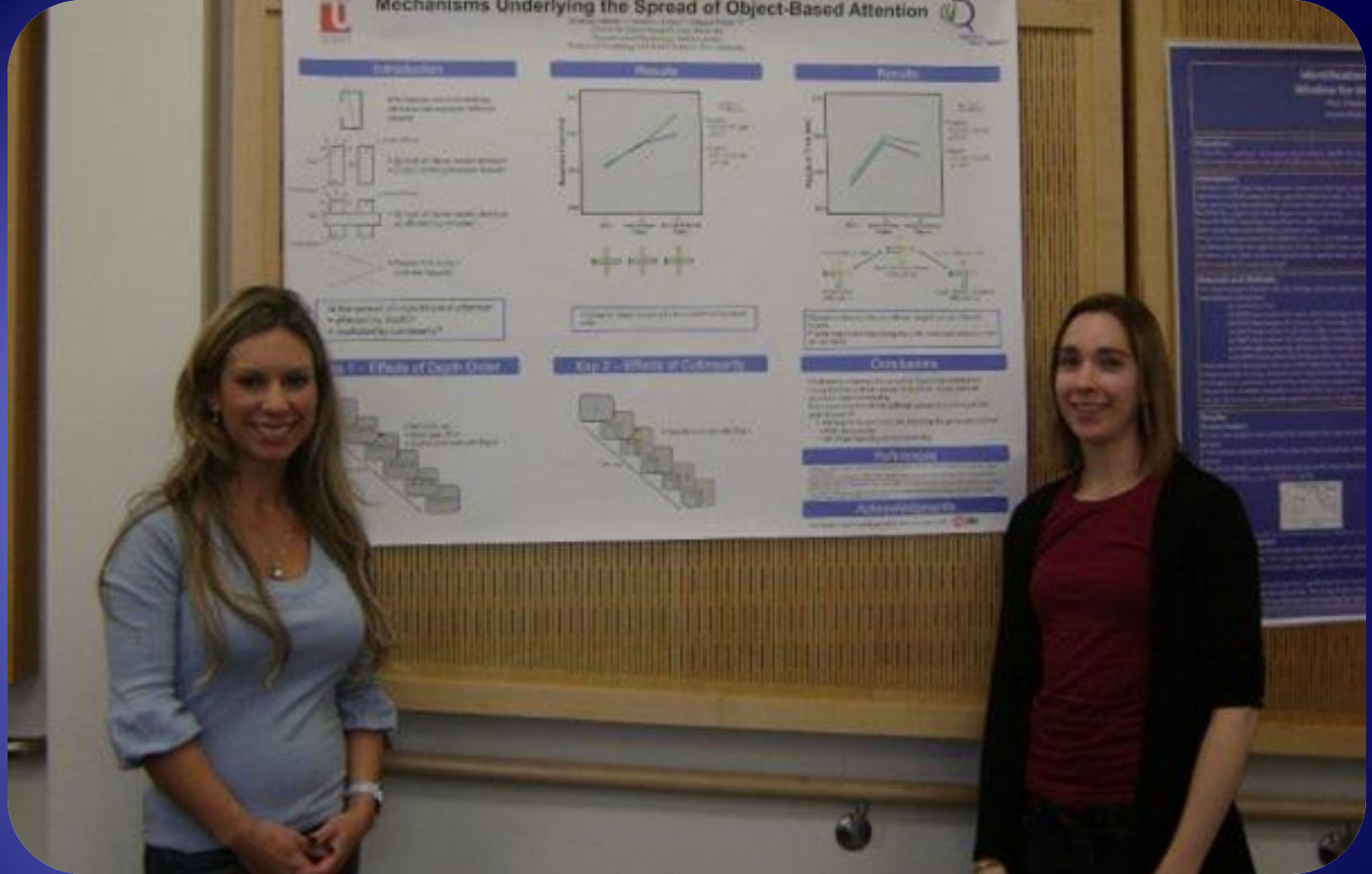




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# I Do But You Can't: The Effects of Marriage Legislation on Parental Stress for Lesbian Mothers

Crystal Young and Joel Dickinson

## Abstract

Lesbian mothers have experienced increased stress due to the effects of marriage legislation. This study examined the effects of marriage legislation on parental stress for lesbian mothers. The study found that lesbian mothers who were in a legal marriage reported lower levels of parental stress than those who were not in a legal marriage. The study also found that lesbian mothers who were in a legal marriage reported higher levels of parental stress than those who were not in a legal marriage.

## Introduction

Lesbian mothers have experienced increased stress due to the effects of marriage legislation. This study examined the effects of marriage legislation on parental stress for lesbian mothers. The study found that lesbian mothers who were in a legal marriage reported lower levels of parental stress than those who were not in a legal marriage.

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The purpose of the present study was to explore differences in parental stress for lesbian mothers in areas where same-sex marriage is legal versus not and the impact of marriage legislation on parental stress.

## Definitions

**Lesbian:** The term refers to a woman who is sexually attracted to and has a sexual relationship with another woman.

**Parental Stress:** The term refers to the stress experienced by parents in relation to their children.

**Marriage Legislation:** The term refers to laws that govern the legal status of marriage.

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## Method

**Participants:** The study included 100 lesbian mothers who were in a legal marriage or not in a legal marriage.

**Measures:** The study used a Parental Stress Scale to measure parental stress.

**Procedure:** The study was conducted in a community setting.

## Results



## References

- Young, C., & Dickinson, J. (2010). I Do But You Can't: The Effects of Marriage Legislation on Parental Stress for Lesbian Mothers. *Journal of Family Psychology, 24*(1), 1-10.
- Young, C., & Dickinson, J. (2010). I Do But You Can't: The Effects of Marriage Legislation on Parental Stress for Lesbian Mothers. *Journal of Family Psychology, 24*(1), 1-10.
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- Young, C., & Dickinson, J. (2010). I Do But You Can't: The Effects of Marriage Legislation on Parental Stress for Lesbian Mothers. *Journal of Family Psychology, 24*(1), 1-10.

## Discussion

The results of the present study suggest that parental stress is lower for lesbian mothers who are in a legal marriage than those who are not in a legal marriage. This finding is consistent with previous research that has found that legal marriage is associated with lower levels of parental stress.

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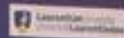
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Research Second to None



# Autism and the Family: How Hope Can Help a Family Transform

Stephanie A. Hayes & Shelley L. Watson



Board #3

## Abstract

Families face many challenges when seeking a diagnosis and access to interventions and support for a child with autism. According to Joseph's Hope (Joseph et al., 1999), having hope may facilitate a family's positive relationships and help them access the professional and personal support needed. Hope is conceptualized as agency (motivation) and pathway (strategy) which generate multiple routes, both of which are valuable tools for families when faced with the difficulties associated with autism.

"Well we're always in one sort of crisis or another... we've never been able to just count on a school, or count on the daycare."

## Background

Families with autism experience higher rates of stress and distress, as compared to families of children with any other developmental disability (e.g., Anderson et al., 2004; Cummings et al., 2005; Fuchs et al., 2006). The impact (contributing factor) to their experience is the experience of problems, behaviors (Bryce et al., 2000; Kay & Seid, 2006). Following an autism diagnosis, families can pursue interventions that address some of the behavioral symptoms and this can lead to the positive adjustment of the family to the diagnosis. Current research highlights the importance of early diagnosis and early intervention as predictors for successful outcomes of autism (Anderson & Smith, 2007; Perry et al., 2008). These factors are not mutually exclusive as increasing interventions in the public system require a formal diagnosis. Consequently, accessing an early diagnosis becomes a critical goal for the family (Fuchs et al., 1999; Smith et al., 2002) and represents a shared goal in their journey (Smith, 2008).

There are two further challenges when accessing an autism diagnosis and services (such as publicly funded 30 programs) in small towns and rural areas where demand exceeds availability. For example, in Northern Ontario, Canada, there are 42 children currently receiving treatment and an additional 100 children waiting an average of two years before services become available (NCTA, 2008). In rural areas, a parent, family and community are affected by the opportunity to obtain services within the local healthcare framework, which leads to the incorporation of family members, with limited access to professionals, and long wait times, services with autism in rural and small towns are in crisis.

According to Joseph's Hope (Joseph et al., 1999), hope refers to goal attainment and is conceptualized as agency (motivation) and pathway (strategy) for working to generate multiple ways to reach a goal. In this context, the family's goal is to access a diagnosis and intervention for their child. Literature suggests hope and family functioning has been found. Researchers have suggested that hope is a strong predictor of effectiveness and hope provides families with an overall sense of optimism, transcendence, and meaning to life (Hayes et al., 2005). Consequently, hope may be a valuable construct when measuring family transformation.

## Research Question

Does having hope help families having higher levels of hope, agency, and pathway (motivation, strategy) to have more resources for able to access and transform to diagnosis?

## Method

This study is presented as a preliminary analysis of an ongoing, mixed methods study of families with a child with autism living in Northern Ontario, Canada.

**Participants.** Participants include 8 mothers and 4 fathers recruited through various parent support groups and word of mouth.

**Measures.** The Hope Scale (Snyder et al., 1991). Parents completed the Hope Scale, a 12 item self-report questionnaire which assesses agency, pathway, thinking, and overall hope.

**Qualitative component.** Semi-structured interviews were conducted with parents, asking individuals as to a possible diagnosis is based on an interview approach in order to access and understand understanding (Snyder, 2002).



## Preliminary Results: Hope Scale

Results suggest that parents with children with autism exhibit responses in the range of hope, agency, and pathway thinking. These findings will allow for further to report research examining the relationship between agency, agency, and pathway and hope.

## Preliminary Results: Interview Analysis

Parents were able to identify agency - parents report having to manage care, facilities, diagnosis, find resources, personal resources, and be an agent in their child's education.

"The second biggest reason [of the child] to take care of him... the doctor or medical... it's like to go... to read and research and understand their child."

**Diagnosis and pathway:** How a diagnosis is accessed is extremely helpful. However, most parents report frustration and time delay and the need to have a diagnosis to access school supports.

"This takes about three years and it's like to have to wait... you wait, but I can go ahead to have a school because that gives me the time for everything at school."

**Help:** I need something... additional goal, knowledge and experience due to the lack of rural professionals, and experts (psychologists, social workers, teachers, etc.) and long wait times for services.

"...even if it would be a problem for it to be able to access of parents... as I'm required to read and understand that it's not parents... just do nothing... I can't do nothing."

**Be a stronger person:** Be a stronger person... need to influence personal, network, resources, to work through grief and gain to get to be present for your child and family.

"It's a battle zone... I think the biggest thing that I've learned is that I have to take care of myself, and then I can take care of my child... I have to take care of my child."

**Be diagnosed:** diagnosis, parents report having their expectations for their child's future, planning and accommodations and a solid to emphasize, resources, resources.

"I can have something like diagnosis if we could have some resources."



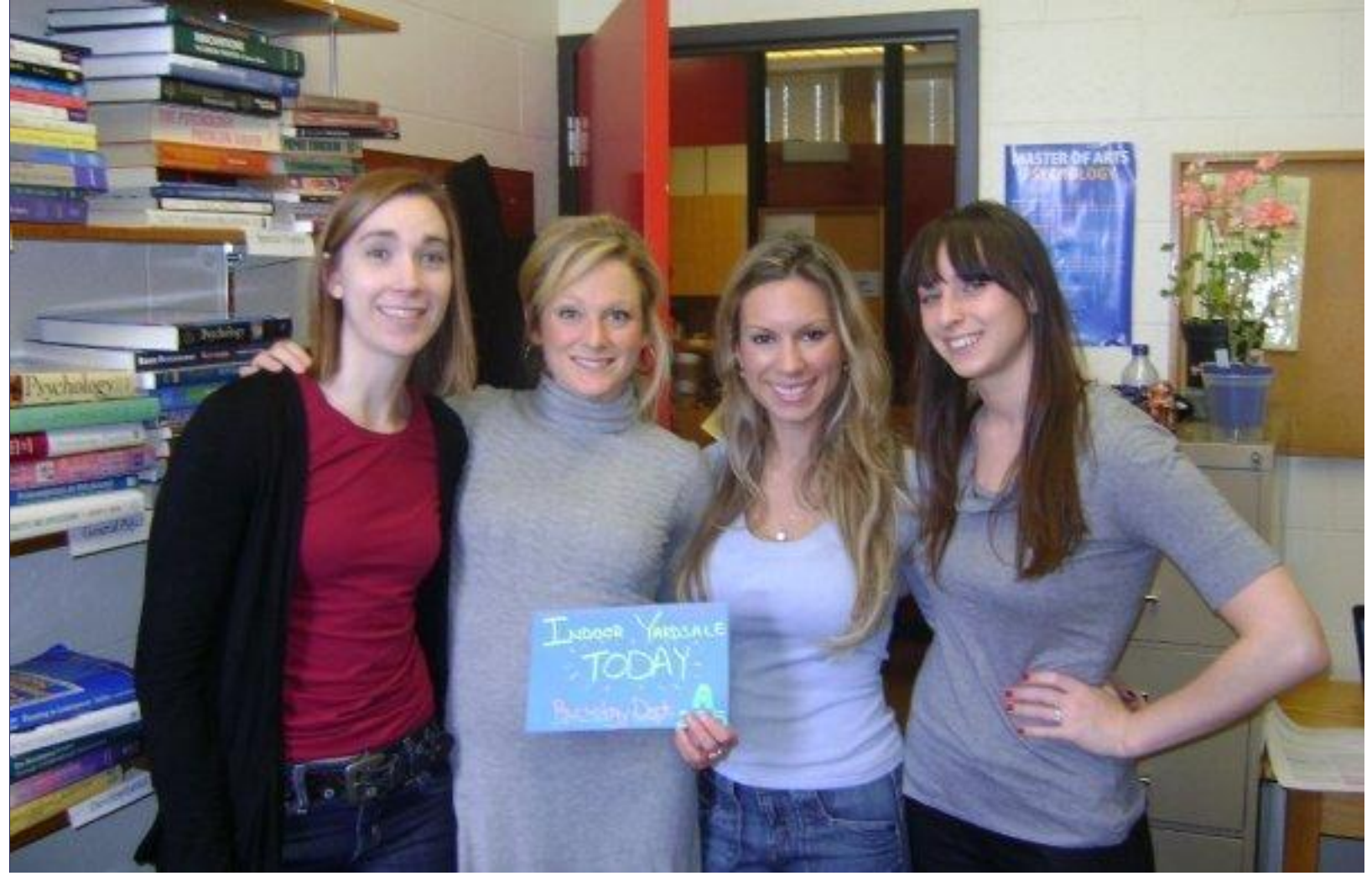


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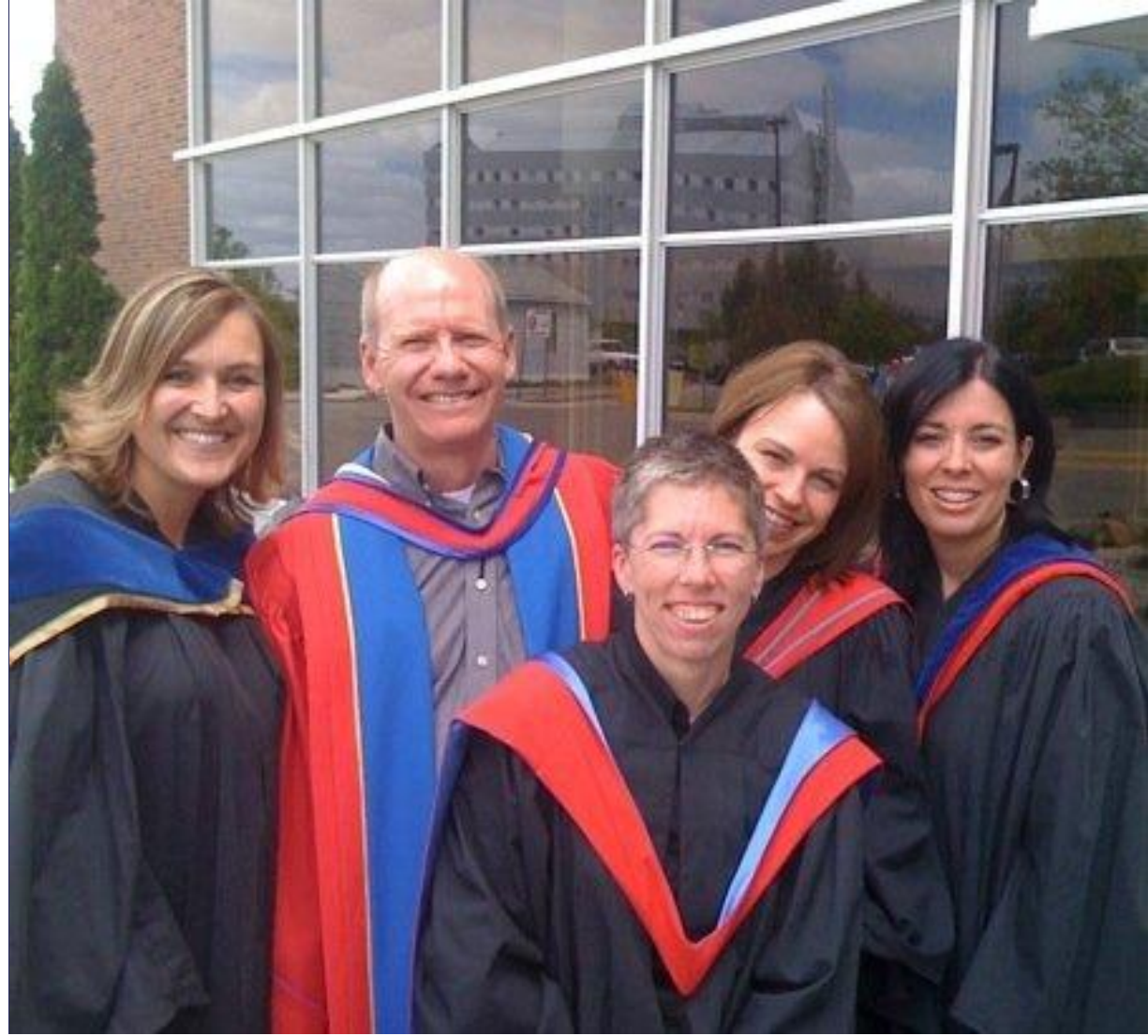


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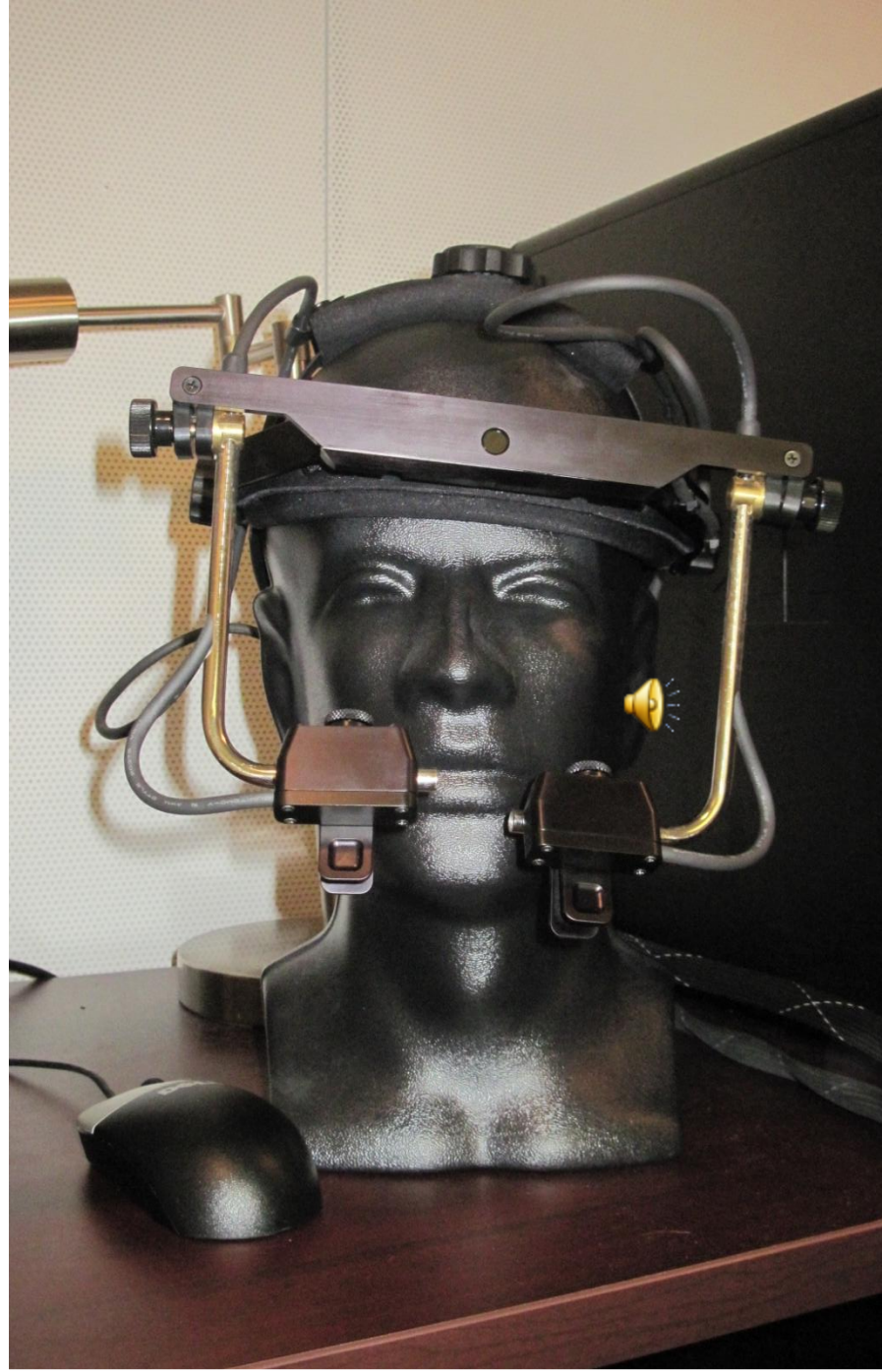


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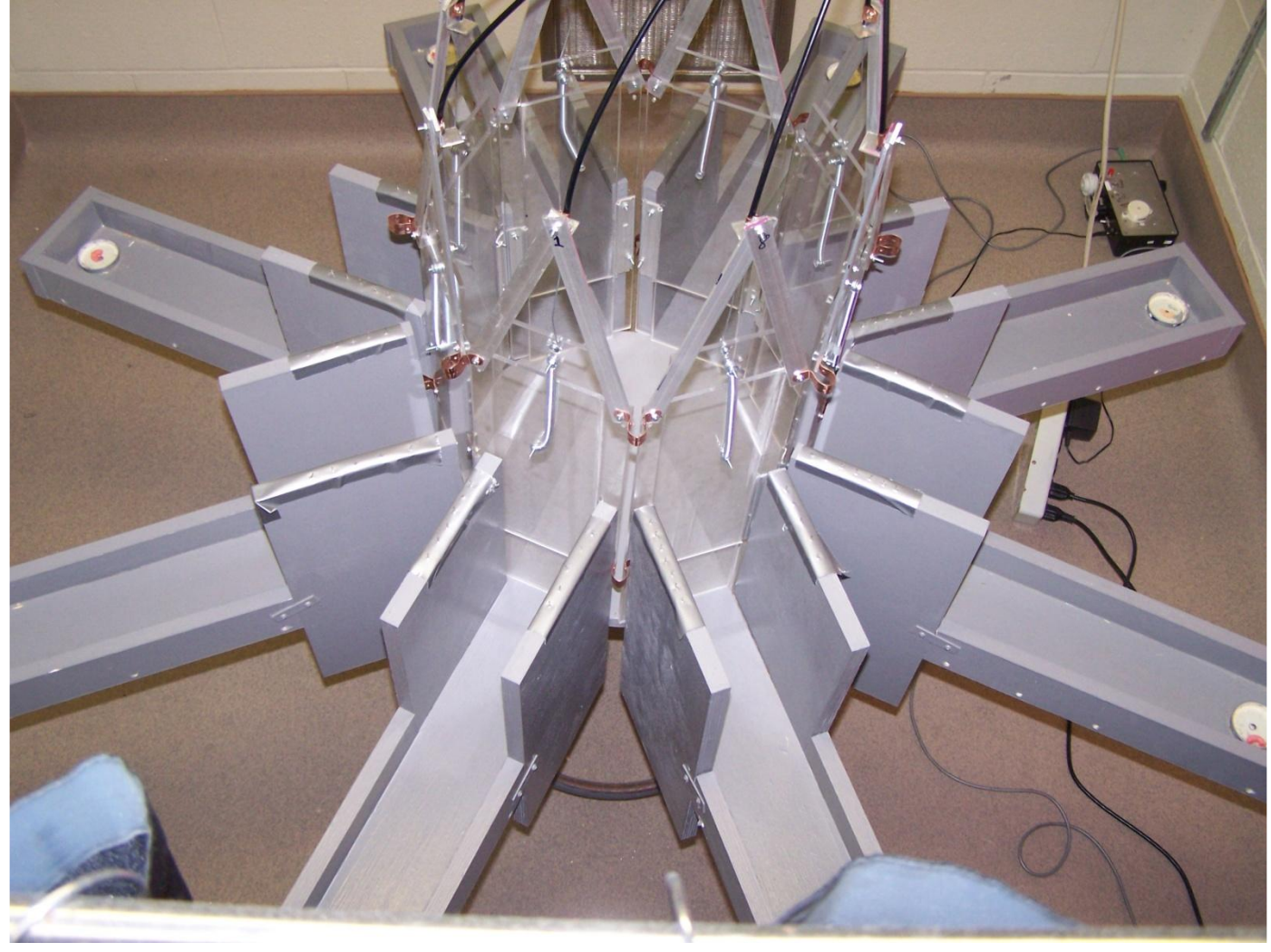


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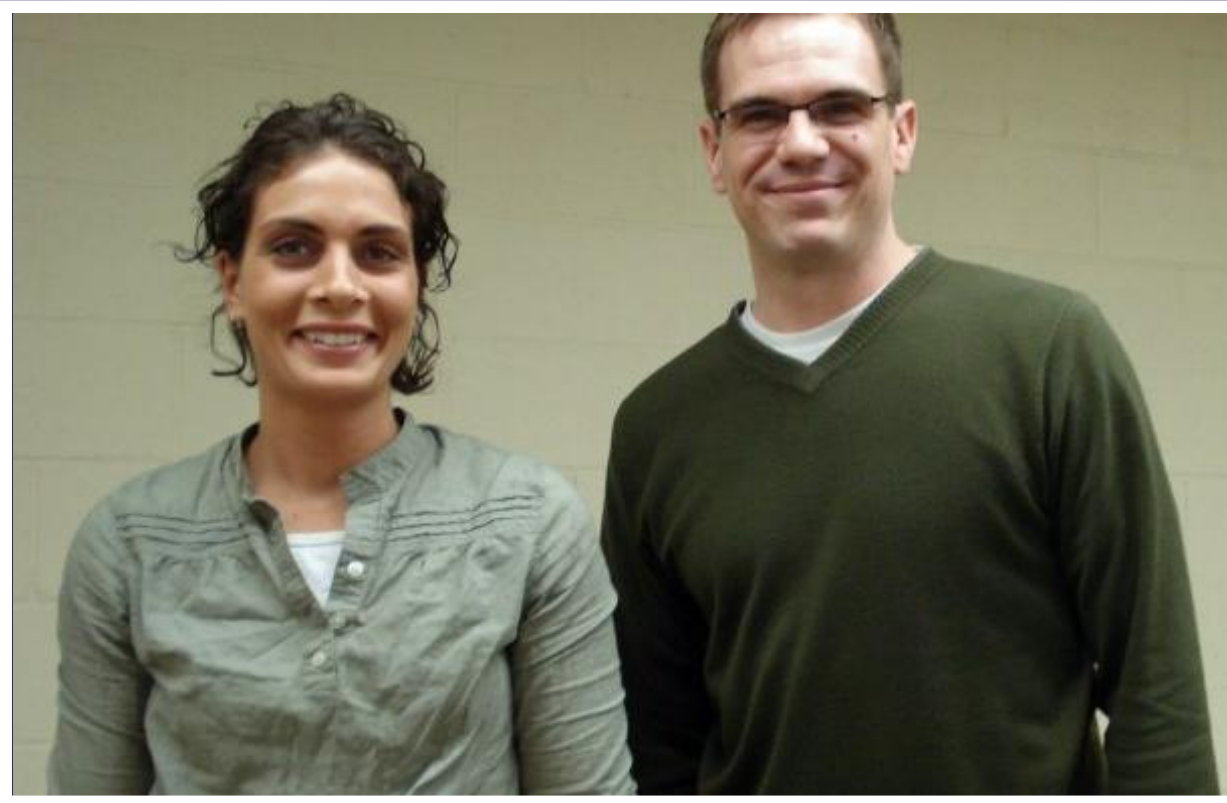


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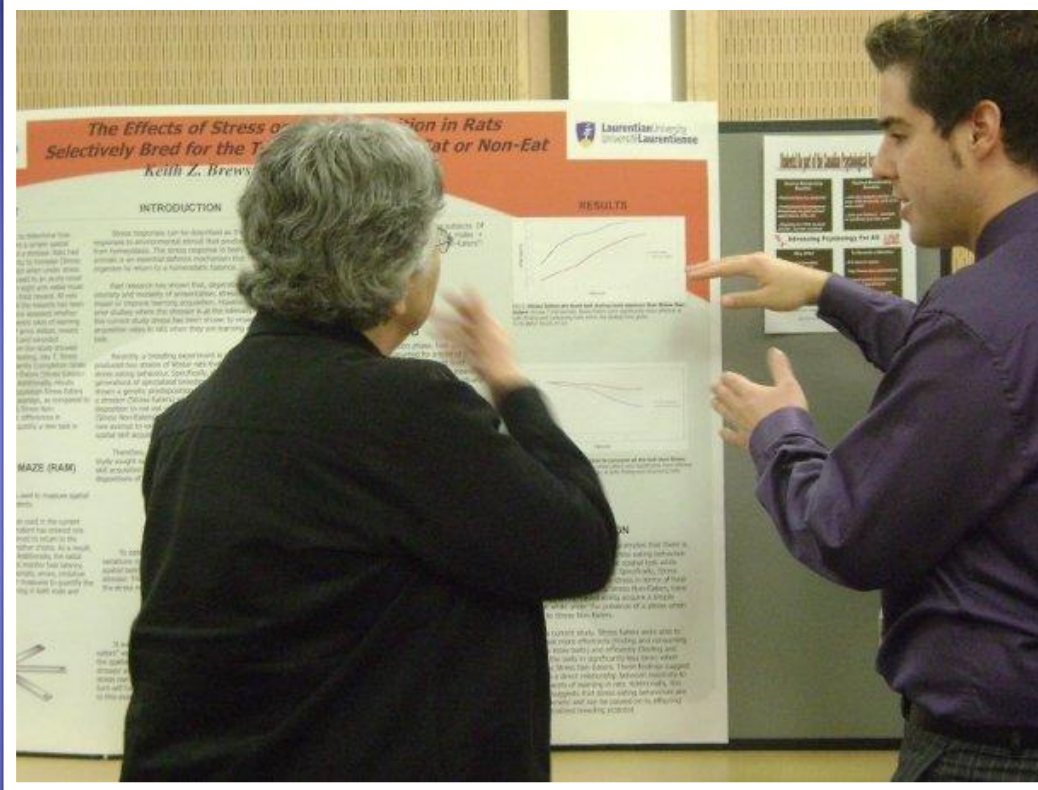
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