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LOMA LINDA UNIVERSITY
School of Behavioral Health
in conjunction with the
Faculty of Graduate Studies

Legal Marriage, Civil Unions, Registered Domestic Partnership and Well-being among
Same-Sex Couples

by

Naomi J. Schwenke

A Dissertation submitted in partial satisfaction of
The requirements for the degree of
Doctor of Philosophy in Family Studies

June 2015

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Each person whose signature appears below certifies that this dissertation in his/her opinion is adequate, in scope and quality, as a dissertation for the degree Doctor of Philosophy.

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ABSTRACT OF THE DISSERTATION

Legal Marriage, Civil Unions, Registered Domestic Partnership and Well-being Among
Same-Sex Couples

by

Naomi J. Schwenke

Doctor of Philosophy, Graduate Program in Family Studies
Loma Linda University, June 2015
Dr. Brian Distelberg, Chairperson

This dissertation used a quantitative method of analysis to explore well-being among couples with different types of legal unions: legal marriage, civil unions, registered domestic partnership. Specifically, this study examined individual, relational, social, and familial components of well-being. Individuals in legally recognized same-sex relationships were recruited for this study. Participants were asked to complete an internet-based survey. Social constructionism provided the theoretical framework for this study. Results show differences among individuals in legally married unions compared to individuals in all other forms of legal unions on measures of satisfaction with life, psychological and physical well-being. Additionally, the results show strong effects for legal marriage on individual well-being when considering couple satisfaction and social support from families and friends. Conclusions for this study suggest that legal marriage may offer a higher level of individual well-being in comparison to other forms of legal unions, while relationship well-being is consistent across all three forms of legal unions.

CHAPTER ONE: INTRODUCTION

Recently, the United States Supreme Court ruled on the Defense of Marriage Act (DOMA) (United States v Windsor 2013) and Proposition 8 in California (United States v Hollingsworth 2013). These rulings extended federal recognition of marriage to same-sex couples and legalized marriage in California for same-sex couples. At the time of this writing, 41% of the United States population lived in a state with some form of legal recognition for same-sex couples (legal marriage, registered domestic partnership, or civil union). It is estimated that there are approximately 700,000 same-sex couples in the United States, and approximately 21% of these couples are in a legally recognized union (legal marriage, registered domestic partnership, or civil union). There are approximately 114, 100 legally married same-sex couples in the United States (Gates, United States v. Windsor, 2013). In states where some form of legal union is available to same-sex couples, 43% of same-sex couples are in a legally recognized relationship (Badgett & Herman, 2011).

Given the national debate on legal marriage recognition for same-sex couples and recent legislative enactments of other forms of legal unions, many scholars have focused on demographic characteristics (Rothblum, Balsam, & Solomon, 2008) and factors related to well-being (Fingerhut & Maisel, 2010; Todosijevic, Rothblum, & Solomon, 2005; Riggle, Rostosky, & Horne, 2010) among same-sex couples. Although a great deal of work has been done in the area of well-being among same-sex couples (see Kurdek, 2004; Fingerhut & Peplau, 2006) no previous research has examined variations of well-being between the different forms of legal unions. This study sought to advance the

knowledge in this area by examining components of individual and relational well-being among couples with different types of legal unions, specifically, legal marriage, civil unions, and registered domestic partnership. The proposed study provides a basis for future projects to explore the impact of public policies as well as strategies that support the well-being of all couples in their committed relationships.

Background

Overview of Context for this Study

The extension of legal unions to same-sex couples is a current national debate that is changing rapidly. In 2004 California became one of the first states to extend marriage to same-sex couples, yet this extension was not fully realized until a recent Federal Supreme Court ruling (*Hollingsworth v. Perry*, 2013). Additionally, the Supreme Court recently ruled on the Defense of Marriage Act (DOMA). Previous to this ruling, DOMA established the federal definition of marriage as a relationship between a man and a woman. This definition of marriage prevented the federal government from recognizing same-sex marriages legalized by the states. Essentially, the recent Supreme Court ruling made legal marriage for heterosexual and same-sex couples legally equivalent at the state and federal level. Even though several states have extended legal marriage to same-sex couples (*Freedom to Marry*, 2015), a handful of states enacted separate legal categories of recognition for same-sex couples, these being civil unions or registered domestic partnership. In some states these separate legal categories of recognition provided the same rights, responsibilities, protections, and benefits as legal marriage for heterosexual couples. However, in other states these separate legal categories are more broad in definition. Oregon, Nevada, and Wisconsin are examples of this broader definition of

legal recognition. On the other hand, Colorado, Hawaii, Illinois, and New Jersey extended civil unions to same-sex couples. In each of these states civil union is the legal equivalent of legal marriage for heterosexual couples. For example, the Illinois act states:

“a party to a civil union is entitled to the same legal obligations, responsibilities, protections, and benefits as are afforded or recognized by the law of Illinois to spouses, whether they derive from statute, administrative rule, policy, common law, or any other source of criminal or civil law.” (Illinois Religious Freedom and Civil Union Act, HB2234, Section 5, 2013)

Although civil unions in Colorado, Illinois, Hawaii, and New Jersey are legally equivalent to marriage for heterosexual couples, these rights are not equivalent to legal marriage for same-sex couples for a couple of reasons: 1) These unions are not recognized across state lines 2) There are no equivalent federal benefits (as in legal marriage). For example, Social Security is a federal benefit for legally married spouses. Upon the death of his or her spouse the surviving spouse is eligible to continue receiving the Social Security benefit. This Social Security benefit is not available to same-sex couples who are in a civil union.

Over the last decade scholars have focused on the characteristics of same-sex couples with or without legal unions. Solomon, Rothblum, & Balsam (2004, 2005) explored the first cohort of same-sex couples in civil unions in Vermont. Specifically, these researchers compared same-sex couples (without any form of legal recognition) to legally married heterosexual couples and same-sex couples in civil unions. Very few differences were found between these couples. However, gender differences were found. Heterosexual couples had more traditional division of household labor than did lesbian and gay couples. Additionally, lesbians in civil unions tended to be more open about their sexual orientation than those not in civil unions, and gay males in civil unions were closer

to their family of origin than gay men not in civil unions. Similarly, Rothblum, Balsam, and Solomon (2008), conducted one of the first studies on same-sex couples with different types of legal unions (legal marriage in Massachusetts, civil unions in Vermont, and domestic partnership in California). These researchers found very few differences between couples. In this case, legally married couples and couples with domestic partnership and civil union were not different on a variety of demographic variables: social support from friends and family, home ownership, housework, conflict, ending the relationship, contact and closeness to parents, levels of “outness”, discrimination, politics, leisure activities, and friends. More recently, two studies focused directly on well-being. In these cases, Riggle, Rostosky, & Horne (2010) found that same-sex couples (with either registered domestic partnership, civil union or legal marriage) reported less psychological distress (internalized homophobia, depressive symptoms, and stress) and a greater sense of meaning in life in comparison to gay males or lesbians who reported being single, dating but not committed, and in a committed relationship with a same-sex partner. Fingerhut & Maisel (2010) studied individual and relational well-being among couples with and without registered domestic partnership, and found that domestic partnership related to higher levels of relationship investment, whereas relationship satisfaction was not significantly different between the two groups. Therefore, the results are mixed when it comes to well-being among same-sex couples and different types of legal unions.

These studies have provided descriptive data regarding same-sex couples in civil unions, registered domestic partnership, and legal marriage, but the question of whether components of well-being relate to different legal forms of marriage remains unclear.

Therefore, the proposed study will investigate components of well-being among individuals in same-sex relationships that are legally recognized, specifically, legal marriage, civil unions, registered domestic partnership. Components of well-being in this study will include psychological, physical, financial, relational, and social measures of well-being. These measures are known to influence relationship quality, as well as vary by age, education, and length of relationship (Bradbury, Fincham, & Beach, 2000).

The overall purpose of this study is to assess whether these measures of well-being differ among the different types of legal union types. There are several specific goals for this study. First, little is known in general about couples with different types of legal unions. Very few opportunities exist to gather data from same-sex couples. Researchers have utilized population samples in cases where public records are available for civil unions. These studies have provided demographic characteristics for this population. Using a public invitation for participants in the United States, this study will employ a convenience sample. Specifically, sampling individuals married between 2004 (when marriage first became legal in Massachusetts) and 2013 (when the latest states, Minnesota, Washington, Maine, and California, extended legal marriage to same-sex couples). At the time of this writing, only one other study (Rothblum et al., 2008) has gathered preliminary demographic data on legally married and civil union same-sex couples from multiple states. Second, this study will extend the comparison research of Rothblum, Balsam, and Solomon (2008) beyond demographic variables to explore specific components of well-being such as psychological, relational, physical, and financial. This study also extends the research of Riggle, Rostosky, & Horne (2010) by differentiating varying levels of well-being between legal unions. Little is known about

how different forms of relationship formalization result in different individual and relational well-being. This study sampled individuals across the United States and provided a robust evaluation of well-being.

Well-Being and Same Sex Relationships

Well-being among couples with different legal unions is an important area to investigate for two reasons. First, it is important to distinguish between individual and relational contexts that influence well-being (Huston, 2000). Although individual and relational components of well-being have been studied, these studies (e.g. Ducharme, & Kollar, 2012; Fingerhut & Maisel, 2010; Todosijevic, Rothblum, & Solomon, 2005) only provide a cursory look at well-being, and more specifically, conceptualizing well-being as social support or mental health.

Second, as legal formalization has expanded rapidly in the last decade, an exploration of the impact of public policies is missing from the literature. In the few studies that we do have regarding legal unions among same-sex couples, it would seem as though couples in legal unions have higher levels of relationship satisfaction and happiness than couples without legal recognition (Riggle, Rostosky, & Horne, 2010; Ducharme & Kollar, 2012). While this knowledge is useful, these studies have left out a comparison across various forms of legal unions. This important, question comes from current legislative debates over what type of legal unions to enact for same-sex couples. For example, twice in the last decade joint commissions have been appointed (Vermont and New Jersey) to understand the impact of civil unions on same-sex couples. Most recently the New Jersey Civil Union Review Commission (2008) reported:

“the separate categorizations established by the Civil Union Act invites and encourages unequal treatment of same-sex couples and their children. In a number of cases, the negative effect of the Civil Union Act on the physical and mental health of same-sex couples and their children is striking, largely because a number of employers and hospitals do not recognize the rights and benefits of marriage for civil union couples.”
(p.1)

Similarly, in 2007 the Vermont Commission on Family Recognition and Protection issued a report on the experiences of same-sex couples with civil unions in Vermont. This commission reported that the “legal status of civil unions [was] generally foreign and difficult to explain” (Vermont Commission on Family Recognition and Protection, 2007, p.26). Furthermore, in 2003 the Massachusetts Supreme Court ruled that creating civil unions for same-sex couples should be “...considered choice of language that reflects a demonstrable assigning of same-sex, largely homosexual, couples to second-class status” (Goodridge v Public Health 2003). In the last decade the courts in the United States have acted to ensure the equal protection of its citizens. However, state legislatures continue to create separate categories of legal recognition for same sex couples. At issue here is how separate categories of legal recognition impact couples. As mentioned previously and outlined in the literature review, same-sex couples who are in legally recognized relationships demonstrate various levels of individual and relational well-being and satisfaction. However, to date no current literature addresses well-being among couples with different types of legal unions and empirical questions remain about whether or not well-being might be influenced by the type of legal union. This study addressed this question by investigating components of well-being among same-sex couples who are legally married and same-sex couples who are in civil unions and registered as domestic partners.

The results of this study provide long awaited information about the polices legislatures continue to enact regarding legal recognition of same-sex couples as well as differential polices across the United States regarding legal unions and same-sex couples. This study provides information for policy makers as well as insight into the lived realities of same-sex couples. This study provides an opportunity for same-sex couples to add their voice to the debate regarding legal unions.

Theoretical Perspective

Two overarching theories were used in this study: postpositivism and social constructionism. In the present study social constructionism helped the researcher identify legal unions and well-being as important constructs in society. Postpositivism provided the framework for analyzing these constructs.

According to postpositivism meaning comes from defined boundaries. It is a macro theory that assumes a critical, realistic view of the world. It is based on the idea that reality is real and reliable, however, this reality can only be imperfectly and probabilistically understood (Bengston et al., 2005). Individuals and phenomena are understood according to categories. Well-being has been categorized to include: the presence of positive emotions and moods (e.g. contentment and happiness), lack of negative emotions (e.g. depression, anxiety), satisfaction with life, fulfillment, and positive functioning (Diener, 2000). In the area of public health, physical health is also a critical factor to one's overall sense of well-being. Results from studies using a variety of methodologies reveal that well-being is directly related to the following factors: self-perceived health, longevity, healthy behaviors, mental and physical illness, social

connectedness, productivity, and factors in the physical and social environments (Diener & Seligman, 2004; Lyubomirsky, King, & Diener, 2005).

The roots of social constructionism are found in sociology (Craig, 1995; Shotter & Gergen, 1994). Berger and Luckmann (1966) were the first to describe an understanding of reality using social constructionism. Gergen (1985) later expanded social constructionism as a paradigm that emphasizes the purpose or function of discourse in constructing reality. Discourse is said to be an artifact of interactions within society through which identity is created. This identity shifts or is constructed and reconstructed across time and according to context. The social creation of phenomena in society occurs through this discursive process. Legal formalization and well-being can be said to be socially constructed. For example, the ways in which society views marriage has evolved throughout the centuries. It has evolved through the ways in which individuals talk about marriage (discourse) and the ways they engage with the institution (interactions) within society. Today marriage looks very different from the way it looked in previous decades. The extension of marrying for love (Coontz, 2010) and legal marriage extension to same-sex couples are example of this evolution. Additionally, the ways in which well-being is defined and assessed in society has undergone change through dialogue and interactions within multiple contexts (see Diener, Scollon, & Lucas; 2009)

While social constructionism was originally used to understand ways of knowing in society (Berger & Luckmann, 1966), this epistemology has been used to study such things as well-being among young people (Vilches, 2012), marital commitment (Byrd, 2009), and gender and power (Knudson-Martin & Mahoney, 1998). Gergen (2001)

proposes four assumptions that provide an understanding of phenomena in society. The assumptions are: 1) For any word that an individual uses to describe their lives, there are potentially unlimited alternative words that could be used. 2) The meaning of language and other forms of representations come from the way it is used within relationships. 3) Individuals fashion their future through describing, explaining, and representing. 4) Future well-being demands that individuals reflect on the ways in which they understand the world. Burr (2004) further extends these assumptions by describing four characteristics of social constructionism: 1) There are “taken-for-granted ways of understanding the world 2) Categories of phenomena in the world are historically and culturally specific 3) Social processes sustain knowledge 4) “Knowledge and social action go together” (Burr, 2004; p. 2). More specifically, knowledge is born through social processes, which in turn impacts how individuals and social institutions interact in the world. These assumptions remind us of the social construction of institutions and phenomena in society, e.g marriage and well-being. In summary, social constructionism describes reality as the interplay between language, individuals and their historical and cultural contexts. Specifically, in the proposed study social constructionism provides the social and historical context for understanding the meaning of legal formalizations and well-being in society. It is hypothesized that any differences found between individual and relational well-being among couples with different types of legal unions might be associated with the ways in which the institution of marriage has come to be recognized in society through discourse and interactions.

Objective

Overall Aim of this Study

The overall aim of this study was to explore well-being among couples with different types of legal unions, specifically, legal marriage, civil unions, and registered domestic partnership.

Research Questions

This study focused on the question of whether there are differences in well-being between individuals with legal marriage, in civil unions, and registered as domestic partners. Specific variables of interest are:

- Individual well-being
 - Quality of life (Physical, psychological, social relationships, environment or financial well-being).
 - Satisfaction with life
- Relational well-being
 - Relationship Quality (Marital stability, affection and sexual relationship, harmony in the relationship, and shared activities)
 - Relationship Satisfaction (Commitment and investment)
 - Perceived levels of social and familial support
- Stress
 - Measure of Gay-Related Stress (Internal and external stress)

Rationale for this Study

There are several gaps in the literature that this study addressed. The first area has to do with the inclusion criteria for participants (Balsam, Beauchaine, Rothblum, Solomon,

2008). Scholarship varies on the length of time required for couples to be together in order to participate in studies. For example, Caron & Ulin (1997) recruited lesbians who had been together for 2 to 25 years. Schreurs and Buuk (1996) recruited lesbians who had been together for a minimum of three years, whereas Gottman (2003) recruited same-sex couples who had been together for a minimum of two years. Other scholars recruited same-sex couples who had been together for one year (Porche, Purvin, & Waddell, 2005) while Elizar & Mintzer (2003) recruited gay men who were together for five years. Taken together the question remains whether the results were influenced by the criteria for couple inclusion in the study or the variables in question.

Second, family scholars have largely neglected comparisons between couples with different types of legal unions. Essentially, there is a great deal of knowledge linking marriage to outcomes of well-being, however, the relationship between legal union and well-being is less understood. Among same-sex couples, well-being may not only be related to individual and relational components but to the type of legal union. Specifically, for couples who are in a civil union this category of legal recognition differentiates them from couples who are legally married, and it may influence their sense of well-being.

Finally, when it comes to measurements of well-being, a variety of tools have been used. For example, in one of the first studies following the extension of civil unions to same-sex couples, Solomon, Rothblum, and Balsam (2004) explored perceived levels of support from family and friends. In a three-year follow up to this study Balsam, Beauchaine, Rothblum, and Solomon (2008) added the dyadic adjustment scale to explore relationship quality. Similarly, Todosijevic, Rothblum, and Solomon (2005)

studied couple dynamics and used the dyadic adjustment scale, but used it to measure relationship satisfaction. These subtle differences in language lead to a misunderstanding about overall well-being among same-sex couples with and without legal formalization.

The fact that couples continue to choose to enter legal unions suggests that it fulfills some purpose or function that makes it worthwhile for couples. The question remains whether well-being is the same among couples who are legally married, in civil unions or registered as domestic partners. Using a social constructionism framework, this study underscores the significance of dialogue and interactions in shaping of well-being and marriage in society. Without this study, other forms of legal unions might not receive the attention they deserve in examining their effects on the well-being of couples.

Summary

The importance of this study comes from the lack of understanding regarding different types of legal unions and inclusion criteria as well as a lack of knowledge regarding the subjective and objective nature of well-being among same-sex couples. Additionally, the importance of this study is realized in the contribution it seeks to make regarding the impact of public policy, as well as the insight into the individual and relational dynamics of couples with different types of legal unions. This exploratory study used quantitative methodology to explore individual, relational, social, and familial components of well-being between individuals in same-sex relationships that have been formalized through legal marriage, civil union or registered domestic partnership. This study was designed within the context of two overarching theories, postpositivism and social constructionism, addressed in the following chapter.

CHAPTER TWO

CONCEPTUAL FRAMEWORK

The guiding framework for this study is postpositivism and social constructionism. In this chapter the important characteristics of postpositivism and social constructionism are presented. This chapter concludes with a discussion on the construction of legal unions and well-being as well as the categorization of legal unions and well-being.

Postpositivism Framework

Postpositivism is a framework that privileges a critical, realistic view of the world. From this perspective there is a real and reliable reality. However, this reality cannot be perfectly understood, yet it can be empirical understood (Bengston et al., 2005). This framework honors quantitative methods in order to isolate variables and understand causality. For example, hierarchical regression allows postpositivist researchers to identify predictors in statistically modeling and provides indications of causality in variables.

The Theory of Social Constructionism

Social constructionism developed from many different theoretical orientations (Stam, 2002). The roots of social constructionism can be traced back to Giambattista Vico, an Italian political philosopher, rhetorician, historian, and jurist (Lock & Strong, 2010). According to Hosking & Morley (2004), Vico was one of the first philosophers to discuss the central tenants of social constructionism. For example, he said, “Worlds are

artificially constructed by people. As people change their constructions they transform their worlds, and in doing so change themselves” (Hosking & Morley, 2004; p.4). Another perspective in defining this reality, also referred to as the “common sense world,” comes from Alfred Schultz, an Austrian social scientist and creator of social phenomenology (Schultz, 1990). According to Schultz, knowledge of the world includes constructs that are both common sense and scientific. Schultz describes these as “abstractions, generalizations, formalizations, idealizations specific to the respective level of thought organizations about reality” (Schultz, 1990; p. 5). In “the world of daily life” (Schultz, 1990; p.213) human beings are said to make constructs that represent reality. These constructs create reality, known as the “common sense world” (Schultz, 1990, p. 208). This common sense world is filled with knowledge and meaning, however, a special characteristic of this knowledge is its “taken for granted” nature (Schultz, 1990; p. 208). Through social interactions individuals create reality, which becomes the evidence of fact in the world (Schultz, 1990). Social scientists look to explain these phenomenon, and Schultz points out that:

The thought objects constructed by the social scientist refer to and are founded upon the thought objects constructed by the common-sense thought of man living his everyday life among his fellow-men. Thus, the constructs used by social scientists are, so to speak, constructs of a second degree, namely constructs of the constructs made by the actors on the social science scene, whose behavior as scientists observes and tries to explain in accordance with the procedural rules of his science (Schultz, 1990; p. 6)

According to Schultz, there are two different kinds of construction of phenomena in the world; common sense and social scientist constructions. The first kind of construction comes from social actors. These actors interact and make constructions about obvious reality. On the other hand, social scientists make constructions that are

based on theory and are less obvious. In order for constructions to be valid according to social scientists they need to be analyzed through the rules of scientific inquiry.

Berger and Luckmann (1966) agreed with Schultz's line of thought regarding the social construction of reality. They point out that reality is socially constructed "as a quality appertaining to phenomena that we recognize as having a being independent of our own volition" (Berger & Luckmann, 1966; p.1). Eberle (1993) identifies the objective and subjective dimensions of this reality. Reality is objective because it is independent of the will of social actors. Reality is also subjective in the sense that it is constructed in social life around historical and cultural contexts. According to Conrad and Baker (2010) history and culture are essential components to understanding reality. Where other theoretical frameworks might view phenomenon as naturally occurring, to social constructionists the "emphasis is on how meanings of phenomenon do not necessarily inhere in the phenomenon themselves but develop through interactions in social contexts" (Conrad and Baker, 2010; p.7). Because history and culture are connected to the way reality is created, the way social actors perceive this reality, it is very important to consider phenomena in the context of history and culture.

According to Burr (2004) there are four overarching characteristics of the theory. The four characteristics are: 1) There are "taken-for-granted ways of understanding the world" 2) Categories of phenomena in the world are historically and culturally specific 3) Social processes sustain knowledge 4) "knowledge and social action go together" (Burr, 2004; p. 2). More specifically, knowledge is born through social processes, which in turn impacts how individuals and social institutions interact in the world. Recursively, knowledge and behavior influence each other.

The Construction of Legal Unions and Well-Being

The obvious question that arises from the previous discussion regarding the impact of legal unions on well-being is how legal unions and well-being are socially constructed. According to social constructionism meaning is “taken for granted” within society (Schultz, 1990; p. 208). Individuals are understood to be participants in a cultural and historical world, and these interactions produce reality, or the lived experiences of individuals. Marriage is an example of a socially constructed reality. It has been constructed throughout the centuries along various economic, political, and gender related dynamics (Coontz, 2010). The most important and common function of marriage across cultures has been the role it plays in establishing relationships between families and communities. Gradually, marriage has become a significant social and religious institution within society.

Well-being is another example of a socially constructed reality. It is constructed from historical and social components that imply movement to something better (Appadurai, 2004). It is understood that a connection exists between mind, body and spirit with an emphasis on strengths rather than weaknesses (Christopher, 1999). Well-being is generally seen as a personal ideal. Individuals learn about factors related to well-being from the beliefs, values, and norms of his or her culture (Vilches, 2012). Same-sex couples are part of social and cultural contexts that privileges marriage, yet the construction of legal unions for same sex couples is only a recent phenomenon. In some states separate categories of legal recognition have been created for same-sex couples. Individuals in same-sex relationships have access to legal marriage in some states and civil unions and domestic partnership in other states. These other categories of legal

formalization may be less understood and therefore less socially significant within society. Questions remain about the impact of differential categories of legal formalization among same-sex couples as well as the link between legal unions and well-being.

The Categorization of Legal Unions and Well-Being

According to postpositivism meaning comes from defined boundaries. It is a macro theory that assumes a critical, realistic view of the world. It is based on the idea that reality is real and reliable, however, this reality can only be imperfectly and probabilistically understood (Benston et al., 2005). Individuals and phenomena are understood according to categories. Well-being has been categorized to include: the presence of positive emotions and moods (e.g. contentment and happiness); lack of negative emotions (e.g. depression, anxiety); satisfaction with life, fulfillment, and positive functioning (Diener, 2000). In the area of public health, physical health is also a critical factor to one's overall sense of well-being. Results from studies using a variety of methodologies have revealed that well-being is directly related to the following factors: self-perceived health; longevity; healthy behaviors; mental and physical illness; social connectedness; productivity; factors in the physical and social environments (Diener & Seligman, 2004; Lyubomirsky, King, & Diener, 2005).

For decades scholars have been interested in the relationship between marriage and well-being. A good deal of research demonstrates that marriage provides psychological, physical and financial benefits for heterosexual couples compared to single and cohabitating couples (Doherty et al. 2002; Stack & Eshleman, 1998; Waite & Gallagher, 2000), and this is also true for minority and low-income populations as well

(Wilcox et al., 2005). One might assume that individual well-being is intimately connected to relational well-being. That said, marriage does not provide health, wealth, and happiness when marital well-being is absent. For example, couples who are not happy in their marriages experience negative mental and physical health consequences compared to unmarried couples (Burman & Margolin, 1992; Robles & Kieclt-Glaser, 2003; Wickrama, Lorenz, and Conger, 1997). Taken together these studies suggest that marriage alone does not confirm well-being among couples (Wienke & Hill, 2009) but when a couple exists in a committed relationship, which itself is healthy, each individual is more likely to experience a greater sense of well-being.

Summary

Given the national debate on legal marriage and same-sex couples, many scholars have focused on well-being among same-sex couples compared to heterosexual couples. Although a great deal of work has been done in the area of well-being among couples and legal unions (e.g., Solomon, Rothblum, & Balsam, 2004, 2005; Todosijevic, Rothblum, & Solomon, 2005), no previous research has focused on well-being among couples with different types of legal unions. The following chapter outlines the literature on well-being and legal unions among same-sex couples.

CHAPTER 3

REVIEW OF THE LITERATURE

Well-being is a complex concept. Numerous attempts have been made to understand the factors that contribute to one's overall sense of well-being (Diener, E., Suh, E. M., Lucas, R. E., and Smith, H. L. 1999). Over the last several decades scholars have explored the association between well-being and the committed relationships of same-sex couples (see Paplau & Fingerhut, 2007; Kurdek, 2004; Solomon et al. 2004, 2005). The majority of these studies have drawn attention to similarities between psychological well-being and happiness among different couple types (e.g. married couples, non-married couples, single individuals, couples who are cohabitating, and couples who are in civil unions and registered domestic partnerships). However, no known literature to date has addressed individual and relational well-being among couples with different types of legal unions. Specifically, components of well-being such as satisfaction with life, relational quality, investment, relationship satisfaction, physical and financial well-being as well as perceived levels of social support. In light of the current policy and cultural debate in society regarding legal unions for same-sex couples, it is assumed that exploring overall well-being among couples with different types of legal unions might be a way to further understand this policy debate.

As legal formalization has become a reality for same-sex couples, a significant body of literature has addressed the well-being of same-sex couples who are in a civil union, legal marriage, or registered domestic partnership compared to legally married and cohabitating heterosexual couples. The bulk of this literature focuses almost exclusively on the characteristics of couples (Solomon et al., 2004, 2005) and levels of psychological

and social well-being (Riggle, Rostosky, & Horne, 2010), even though heterosexual marriage and the type of legal formalization for same-sex couples is often not equivalent, legally and culturally speaking. However, this focus in the literature reflects the importance of well-being in understanding couples regardless of one's sexual orientation.

The social, individual and relational components of well-being are given attention in the literature. The social components of well-being focuses on perceived levels of social and family support, gay related stress, and levels of outness (Todosijevic, Rothblum, & Solomon, 2005; Rothblum, Balsam, & Solomon, 2008; Riggle, Rostosky, & Horne, 2010) while the individual components focus on personality traits and satisfaction with life (Fingerhut & Maisel, 2010). The relational components of well-being focus on relationship quality, relationship satisfaction, and the influence of social support on overall relationship well-being (Fingerhut & Maisel, 2010; Ducharme & Hollar, 2012). While one study addressed characteristics of couples in different types of legal unions (Solomon et al., 2010), no study to date has addressed differential outcomes of well-being for couples with different types of legal unions.

The majority of research has focused on demographic characteristics, or on particular aspects of well-being. It is important to explore the research from a historical and cultural framework in order to understand overall well-being. In this regard, the review of literature in this chapter is presented from a social constructionist perspective. This section begins with a brief discussion of well-being and legal formalization. From there, articles are grouped together that address individual and relational well-being among same-sex couples who have legally formalized their relationship. Finally, a brief

discussion will highlight the current study and how it addresses the gaps identified in the previous sections.

Well-being

Well-being is an indication of whether one's life is going well, and many facets of life interact to create one's overall sense of well-being. According to Frey and Stutzer (2002), a consensus definition of well-being does not exist (see also Andrews & Withey, 1976; Diener, 2000). However, scholars have agreed that a minimum level of well-being includes: the presence of positive emotions and moods (e.g. contentment and happiness), lack of negative emotions (e.g. depression, anxiety), satisfaction with life, fulfillment, and positive functioning (Diener, 2000). According to some scholars, well-being is the ability to judge life positively and feel good (Diener, Suh, & Oishi, 1997; Veenhoven, 2008). In the area of public health, physical health is also a critical factor to one's overall sense of well-being. Scholars from different disciplines have studied well-being in relationship to the following factors: Physical well-being, economic well-being, social well-being, development and activity, emotional well-being, psychological well-being, life satisfaction, engaging activities at work (Frey & Stutzer, 2002; Diener, 2000; Csikszentmihalyi, 1991).

Although many variations of the concept of well-being exist, which make it difficult to clearly operationalize, well-being is still an important concept to study as results from studies using cross-sectional, longitudinal, and experimental methodologies have revealed that well-being is directly associated to the following factors: self-perceived health, longevity, healthy behaviors, mental and physical illness, social connectedness, productivity, factors in the physical and social environments (Diener &

Seligman, 2004; Lyubomirsky, King, & Diener, 2005). Therefore, for the purpose of this study I define well-being as individual reports of global life satisfaction, quality of life, the presence of positive and negative emotions, resilience, and acknowledgement of one's potential (Diener & Seligman, 2004; Diener, 2009; Diener, Scollon, & Lucas, 2009; and Frey & Stutzer, 2002).

The previous discussion of well-being has been focused on individual well-being. Well-being can also be consider a systemic issues with characteristics at a couple or relational level. For decades scholars have been interested in the relationship between marriage and well-being. A good deal of research has demonstrated that marriage provides psychological, physical and financial benefits for heterosexual couples compared to single and cohabitating couples (Doherty et al. 2002; Stack & Eshleman, 1998; Waite & Gallagher, 2000), and this is also true for minority and low-income populations as well (Wilcox et al., 2005). More specifically, Doherty et al. (2002) found that married women were less likely to be victims of domestic violence, attempt suicide, abuse drugs or alcohol, or fall below the poverty line. On the other hand men were more likely to live longer, have higher wages, report higher levels of sexual satisfaction, and be less likely to commit violent crimes (Doherty et al., 2002). The National Longitudinal Mortality Study revealed that non-married populations have increased risks of mortality, specifically cardiovascular disease and cancer compared to married heterosexual populations (Johnson, Backland, Sorlie, & Loveless, 2000). Therefore one might assume that individual well-being is intimately connected to relational well-being.

The reasoning behind these results is based on the idea that marriage promotes well-being because it provides social, emotional, and financial support for individuals

(Kamp Dush, & Amato, 2005). An understanding that cohabitating relationships are not a substitute for marriage further supports this theory. In an investigation of cohabitating couples (compared to married couples and singles), Brown (2000) and Nock (1995) found that cohabitating couples fall somewhere between these couples on measurements of well-being and happiness. That said, marriage does not provide health, wealth, and happiness when marital well-being is absent. For example, couples who are not happy in their marriages experience negative mental and physical health consequences compared to unmarried couples (Burman & Margolin, 1992; Robles & Kieclt-Glaser, 2003; Wickrama, Lorenz, and Conger, 1997). Taken together, these studies have shown that marriage alone does not confirm well-being among couples (Wienke & Hill, 2009) but when a couple exists in a committed relationship, which itself is healthy, each individual is more likely to experience a greater sense of well-being. Additionally, these studies do not demonstrate how different social constructions of legal unions make an impact on well-being.

Legal Formalization

Although it is clear that healthy, committed relationships influence individual well-being, exactly what it means to be in a “committed relationship” is hard to define for same-sex couples. Legal unions for same-sex couples are a phenomenon of the last decade. Therefore, what was once an unimaginable possibility is now a legal reality. The individual and relational development of lesbian, gay, bisexual and transgender individuals in Western culture is now fully integrated into the social and cultural dialogue (Patterson, 2008). Up until 2004, legal marriage was not extended to same-sex couples. Only recently have same-sex couples had access to the legal benefits of marriage. Prior to

2004, same sex couples could not adopt children together, make medical decisions for each other, have access to social security payments if their partner passed away, and could be asked to vacate the home they shared with their partner if their partner passed away (Harris, Teitelbaum, & Carbone, 2005). Currently, 12 states, as well as the District of Columbia, extend legal marriage to same-sex couples. These states are: Massachusetts, Connecticut, Iowa, Vermont, New Hampshire, New York, Maine, Washington, Delaware, Rhode Island, Minnesota, and California. In addition, a handful of states allow civil unions (Colorado, Hawaii, Illinois, New Jersey), broad domestic partnership (Nevada, New Mexico, Oregon), and more limited domestic partnership (Wisconsin) to same-sex couples. These unions provide individuals with some of the same rights as legal marriage (e.g. hospital privileges and taxes). With these rapidly shifting policies same-sex couples have been a prominent fixture in national conversations regarding marriage. From a social constructionist perspective the “taken for granted” meaning of marriage in society is perpetuated through these conversations. Other forms of legal unions receive much less attention, and therefore, do not have the same social significance within society. Scholars have studied the relationship between marriage and well-being, yet the relationship between well-being and other forms of legal unions remains unclear.

Well-Being among Same-sex Couples with Legal Recognition

As discussed before, there is a strong link between individual well-being and healthy committed relationships. Prior to 2004, a committed relationship for same-sex couples could only be defined as two adults cohabiting (as legal unions were not an option). But, also as noted earlier, cohabiting relationships are not equal to legal marriage when it comes to promoting well-being (Brown, 2000; Nock, 1995). Therefore

much of the research on same-sex couple relationships and well-being is confounded by the issue of “commitment”. While many couples may have a great deal of commitment, they could not be legally married, or in any legal union for that matter. Therefore, research on levels of commitment and same-sex couple well-being has been seriously hampered until it recently became possible for many same-sex couples to demonstrate their commitment through legal unions. In this regard I briefly discuss the scant amount of literature on same-sex couples’ well-being, beginning with the individual level of well-being and then moving to discuss the role of healthy and committed relationship in the pursuit of well-being.

Individual Well-Being

The factors related to well-being at the individual level have to do with personal characteristics. At this level individual well-being reflects the larger social and cultural narratives about what it means to be a healthy person. Literature on individual well-being addresses demographics, satisfaction with life, and overall levels of happiness among same-sex couples who are in civil unions, registered as domestic partners, and legally married.

Demographics

Comparison studies were the first studies to capture demographic and relationship profile information between same-sex couples in a legal union versus those not in a legal union. The driver for these studies is often the question of whether certain subpopulations (men, women, different ethnicities ect.) are more likely to pursue legal unions. These

studies provided much of the foundational understanding of the demographics, relationship length, presence of children, division of household labor, commitment levels, connections with family, and perceived levels of support from family and friends, as well as levels of “outness” in same-sex couples.

Solomon, Rothblum, and Balsam (2004) were the first to conduct an empirical investigation with this focus. Specifically these researchers compared same-sex couples in civil unions, same-sex couples in committed relationships (but not legal formalization) and heterosexual married couples in which one member was a sibling to a member of a civil union. Additionally, this study was one of the first studies to utilize a population sample rather than convenience sample, which up until this time had been the way studies in this population were conducted, likely due to the stigma of lesbian and gay men in society. In this study the researchers found very few differences between any of the couples. In general these researchers concluded that the only notable difference was the greater level of a gendered influence of household tasks, with heterosexual couples having a higher reliance on a gendered division of household labor.

In a three-year follow up to the Solomon et al (2004) study, Balsam, Beauchaine, Rothblum, and Solomon (2008) compared 65 male and 138 female couples who had civil unions in Vermont to 23 male and 61 female same-sex couples in their friendship circles who did not have civil unions, as well as 55 heterosexual married couples (1 member of this group was a sibling to a member of a civil union couple). Again, this study found that civil union couples did not differ on any measurement from same-sex couples not in a civil union. In this study Balsam et al. hoped to identify whether same-sex couples looked more like heterosexual couples given the recent legal and social validity in Vermont (as

legal marriage had been enacted one year prior to the start of this study). In a related study Rothblum et al. (2008) measured 55 men and 78 women married same-sex couples from Massachusetts, 35 men and 86 women who had civil union in Vermont, and 101 men and 120 women who had domestic partnerships in California. Again, few interstate differences were found among a majority of demographic characteristics (such as, education, leisure activities, and political affiliation). However, they did find a number of gender differences. For example, men tended to be older before entering a committed relationship. Additionally, the men in committed relationships tended to be more exclusively gay and less likely to have children.

Therefore, in terms of demographic differences between civil unions, legal marriages and no legal unions, there is little difference. It does not seem to be the case that men or women are more likely to seek out legal unions; additionally, there is no known ethnic preference for legal unions. There may be a possible age factor involved for men, as it might be possible that men wait longer to enter into a legal union, in comparison to women.

Satisfaction with Life

When it comes to understanding psychological well-being among same-sex couples Riggle, Rostosky, and Horne (2010) looked at psychological distress among four groups of lesbian, gay and bisexual individuals (e.g. single, dating, in a committed relationship, and in a legally recognized relationship). Riggle et al. (2008) defined legally recognized relationship as all forms of legal unions (legally married, civil union, and registered domestic partnership couples). They found that couples in legally recognized

relationships had less psychological distress as measured by internalized homophobia, depressive symptoms, and stress. Further, these couples had increased levels of well-being, which these researchers measured by the individual's level of their meaning in life.

While the Riggle et al. (2008) study is helpful, in that it parallels much of the heterosexual relationship well-being outcomes, it leaves out the importance of social recognition, or social support for the couple. To that end, Fingerhut & Maisl (2010) surveyed 239 same-sex couples in California who were registered as domestic partners, had a public ceremony (social recognition), or who were not in any type of formalized relationship. They found that social recognition was linked to life satisfaction whereas the legal formalization of the relationship was not. This finding suggests the importance of the contextual meaning of relationship formalization. In other words, well-being is due to more than just the type of legal relationship, but rather effected by the social interaction with this formalization.

Relational Well-Being

As mentioned above, while legal formalization is an important proxy for commitment, other factors are important to consider as well. These factors are specific to issues of relationship quality, satisfaction, and perceived levels of social and family support.

Relationship Quality and Satisfaction

Solomon et al., (2004) reported that gay men not in civil unions were significantly more likely to report that they had seriously considered ending their relationship. This

phenomenon was confirmed in a three-year follow up study by Balsam, Beauchaine, Rothblum (2008). Furthermore, in this study, gay male and lesbian couples in civil unions and those not in civil unions reported higher levels of relationship quality, compatibility, intimacy, and lower levels of conflict compared to heterosexual married couples. They also found decreased conflict and greater levels of outness for both types of same-sex couples. Additionally, gay men had shorter relationships length for gay men, and women in same-sex relationships had less conflict and frequent sex for women in same-sex relationships. All of these factors were predictors of greater relationship quality.

To further understand the relationship dynamics within these couples Todosijevic, Rothblum, and Solomon (2005) studied same-sex couples who had civil unions in Vermont during the first year of the legislation. These researchers found that partner similarities of age, as well as positive and negative affectivity, were associated with relationship satisfaction. However, they did not find any association between similarities based on income, education, or outness.

More recently, research has been able to expand beyond the first few U.S states to offer legal unions. In this case, these studies were explored more directly the effect of legal union policies on relationship well-being. For example, MacIntosh, Reissing, and Andruff (2010) explored legal marriage and well-being among the first cohort of same-sex couples to wed in Canada. They assessed relationship satisfaction and attachment among 26 lesbian or gay couples. They also interviewed 15 of those couples to understand the impact of legal marriage on their relationship and to explore social support from their communities and society. The couples in this study reported that the

ability to marry impacted them in relational, political, and social ways. Empirically speaking, the 26 couples had higher levels of relationship satisfaction and attachment-related anxiety compared to normative samples of heterosexual couples (MacIntosh, Reissing, & Andruff, 2010). Overall the couples in this study reported that legal marriage had a positive effect on their life.

Similarly, Ducharme and Kollar (2012) explored the association between well-being and marital equality among legally married lesbian couples in Massachusetts. Two Hundred twenty-two lesbian couples participated in this study, and the results demonstrated a connection between a healthy marriage and specific well-being benefits. Specifically, dependent children living in the home was closely associated with marital quality as measured by the Dyadic Adjustment Scale. In this study marital satisfaction was associated with higher levels of physical, psychological, social, and financial well-being scores. This study expanded the study by Rothblum et al. (2008) by gathering a larger sample size and studying the entire population of lesbian married women in Massachusetts.

These six studies suggest that legal formalization has a positive impact on relational well-being. Specifically, couples who are in civil unions, legally married, and registered domestic partnerships. Yet, as mentioned above, the form of legal marriage alone is not a sole predictor of relationship well-being. Rather, it is likely that form of the relationship recognition, in relationship to other, social and familial factors, influence the relationship well-being. Rather, it is likely that the form of the relationship recognition, in relationship to other, social and familial factors, influence the relationship well-being because of the social significance of marriage within society.

The relationship individuals have with their family of origin is a source of support for individuals and couples regardless of their sexual orientation (Oswald, 2002). Affirmation from family of origin provides an additional layer of support for same-sex couples and increases relationship quality (Caron & Ulin, 1997). In addition to personality traits, effective conflict resolution, and dependence on the relationship, relational commitment among same-sex couples is positively linked to the support lesbian women and gay men receive from their friends and family (Kurdek, 2008b). That said, the relationship individuals have with their family of origin is sometimes challenging because initial reactions to the revelation of sexual orientation with a non-heterosexual identity is negative (Cohen, Savin-Williams, 1996; LaSala, 2000a). These negative reactions are more likely to occur if the parents are older, have less education, or if the relationship between parent and child is less than amicable (LaSala, 2000a). Scholars who study this issue have reported that parents often react with shock, disappointment, and shame (Patterson, 2000; LaSala, 2000a). Revelations about non-heterosexual orientation often lead to family crisis and sometimes estrangement between family members (LaSala, 2000a).

Regardless, gay men report that it is important to them to be out to not only their parents, but to their partner's parents (LaSala, 2000b). Parental disapproval often evolves overtime from disapproval to ambivalence, acceptance, and support (LaSala, 2001). Often lesbian and gay males must manage their disclosure and manage their relationships by bringing positive, affirming family members closer and distancing themselves from less affirming family members (Oswald, 2000). Managing these relationships and

disclosing non-heterosexual orientation is an ongoing, individualistic process across time (Oswald, 2002a,c). For example, the coming out process often occurs when individuals meet their partner's family and introduce their partner to his or her family of origin for the first time.

Perceived Levels of Social and Familial Support

In general, gay men tend to receive more support from their friends than they do from their family (in comparison to lesbian women who are in a civil union) (Solomon et al., 2004). However, the level of support received from one's family doesn't seem to vary by the type of relationships (Rothblum et al., 2008). Although these studies show little difference in the level of support received from family and friends for their relationship, which provides further indication that a social process contributes to the meaning of marriage in society, we must keep in mind that these are the same early studies that relied on limited samples of same-sex couples in legally recognized relationships. These results may indeed be skewed by the fact that many same-sex couple reported as "not in a legal union" not out of choice, but rather because a legal union was not an socially acceptable option for them.

Summary

The past research provides a rich understanding for the current study. The studies discussed in this chapter offer varying levels of insight into demographic differences, and individual and relational well-being among same-sex couples who are in legally recognized relationships. First, very few differences were found in demographic variables among couples in legally formalized relationships from those not in legally formalized

relationships. Furthermore, in studies where researchers explored same-sex couples in different types of legal unions, very few differences were found between couples in terms of demographic variables. Second, relationship well-being appears to be better for couples who are in a legally recognized relationships. However, the question remains whether the type of legal union contributes to relational well-being. Finally, the support individuals receive from their friends and family of origin may be a moderator to the effect legal formalization has on individual and relational well-being. However, the effects in differences in how legal unions are socially constructed have not been explored.

The proposed study explored individual and relational components of well-being individuals in legally recognized same-sex unions. Multiple factors relate to the construction of well-being in society. Individual components of well-being in the proposed study are satisfaction with life and quality of life. Relational components of well-being in the proposed study are relationship quality and satisfaction as well as perceived levels of social support.

CHAPTER FOUR

METHODS

The overarching purpose of this study was to understand well-being among couples with different types of legal status: legal marriage, civil unions, and registered domestic partnership. The format of this dissertation was a publishable paper. The focus of the paper will be on well-being among same-sex couples with different types of legal unions, specifically, measurements of individual and relational well-being.

Research Questions

The following research questions will be addressed: Are there differences in well-being between individuals with legal marriage, civil unions, and registered domestic partnership? Specific variables of interest are:

- Individual well-being
 - Quality of life (Physical, psychological, social relationships, environment or financial well-being).
 - Satisfaction with life
- Relational well-being
 - Relationship Quality (Marital stability, affection and sexual relationship, harmony in the relationship, and shared activities)
 - Relationship Satisfaction (Commitment and investment)
 - Perceived levels of social and familial support
- Stress
 - Measures of Gay-Related Stress (Internal and external stress)

Participants

A convenient sample was utilized in in this study. An electronic call for participants was sent out to states with legal marriage, civil union and registered domestic partnership options (Legal marriage: MA, CT, VT, IA, MN, ME, NM, WA, NY, CA, RI, DE, and the District of Columbia; Civil union: NJ, IL, HI, CO; Domestic Partnership: OR, NV, WI). This study also utilized national Lesbian, Gay, Bisexual, Transgender (LGBT) organizations in order to recruit participants. Participants also identified other potential participants for this study.

Upon consent, participants completed a series of questions using surveymonkey.com. Using G*Power, based on a *t*-test and an assumed medium effect ($d < .4$) a power of $< .80$ can be achieved with as many as 128 data points. Using G*Power, based on a Regression analysis and an assumed medium effect ($d < .4$) a power of $< .95$ can be achieved with as many as 55 data points. While this is a proper sample size, this research sampled $n = 173$ in order to allow for unforeseen auxiliary post hoc interaction tests.

Inclusion Criteria

Participants were included in this study if the following criteria were met: 1) Age 18-65 2) Together more than five years 3) Identify as lesbian, gay, bisexual, or transgender 4) Have either a legal marriage, civil union or domestic partnership certificate, and 5) Currently in a relationship with the partner with whom they entered the legal marriage, civil union, or domestic partnership.

Exclusion Criteria.

Participants were excluded from this study if any of the following criteria were met: 1) Together less than five years 2) Is legally married to another person of the opposite sex 5) Be legally married, in a civil union or domestic partnership with a person of the same-sex but legally separated or divorced.

Participant Compensation.

Participants were paid for their participation. However, after completing the survey participants were given a list of charities and asked which one they would like the research team to make a donation to on their behalf. A description of the charities were included in the survey. The participants indicated their preference, and the charity with the most votes was given an anonymous donation. A number of studies have indicated this is an effective way to recruit participants in this population (Fungerhut, Paplau, & Ghavami, 2005; Oswald et al., 2008). Participants will be debriefed within six months on the results of the survey.

Permissions Needed.

This research involves human subjects, therefore, Institutional Review Board permission was required. The study design and methods were approved by the Loma Linda University Internal Review Board (Cert #5130333). Additionally, each participant was asked to read an informed consent statement before starting the survey. The informed consent stated the purpose of the research and the rights of participants. By continuing on to the survey participants indicated that they

acknowledged that he or she understood his or her rights as a volunteer for the project. This signature signified that permission was given to the researcher to use the data collected for the stated purpose of this research project.

Measures

Several instruments were used in this study. The data for this study was collected using an internet-based survey. Internet-based surveys have been found to be an efficient and useful in gathering data. Specifically, the benefits of internet-based surveys include: lower item non-response, lower cost, more complete answers, and faster responses (Schaefer and Dillman, 1998). Some scholars have indicated caution about overall response rates for internet-based surveys (Anderson & Gansneder, 1995; Kittleson, 1995), however, other scholars have noted that collecting data electronically can be an effective method for collecting data with lesbian, gay and bisexual populations (Oswald, et al., 2008).

The online survey employed a combination of fill in the blank, closed and open-ended questions. The survey was divided into subsections. The sections of the survey are discussed below.

The survey began by asking participants to enter the date the survey was taken. The second section of the survey utilized a series of five scales to explore four measures most often studied in relationship recognition with same-sex couples (Solomon, et al., 2005; Fingerhut & Maisel, 2010; Riggle et al., 2010). Specifically, the dependent variables are 1) relational well-being as measured by relationship quality, relationship satisfaction, and perceived levels of social and family support; and 2) individual well-being as measured by satisfaction with life and quality of life.

Dependent Variables

Participants completed demographic items, which included the status and length of their relationship. Participants also completed survey measures of satisfaction with life, quality of life, relationship quality and investment, perceived levels of support from friends and family, measures of gay-related stress, and relationship formalization.

Individual Well-being

Two scales assessed individual well-being: *Satisfaction with Life Scale* (SWLS) and the *World Health Organization Quality of Life Brief* (WHOQOL-Brief). The SWLS (Pavot, Diener, Colvin, & Sandvik, 1991) measures individual satisfaction with life, based on 5 items that are rated on a 5 point Likert scale (1 = *strongly disagree*, 5 = *strongly agree*). The five items have seem to have high internal consistency with $\alpha = .88$ ($M = 28.04$, $SD = 4.99$). The WHOQOL-Brief (Bonomi & Patrick, 1997) measures quality of life across four domains: Physical, Psychological, Social and Environment. Answers are scored on a 5 point Likert scale (1 = *Very poor* to 5 *Very good*). Domain scores are computed as the sum of items (after reverse scoring some items). All scores are transformed to make the scores comparable with the scores on the WHOQOL-100 measure. Each domain offers a high degree of reliability: $\alpha = .86$ Physical, $\alpha = .80$ Psychological, $\alpha = .62$ Social, $\alpha = .81$ Environment.

Relational Well-being

Three scales assessed relational well-being: the *Dyadic Adjustment Scale* (DAS), the *Investment Model Scale* (IMS), and the *Perceived Levels of Support from Friends and*

Family Scale (PSS-Fr; PSS-Fam). The DAS (Spainer, 1976) measures marital stability across four domains: Cohesion, Consensus, Expression, and Satisfaction. Responses are scored on a 5 point Likert scale, with responses ranging from 0 = *always disagree* to 5 = *always agree*. Scores range from 0 to 151. Higher scores indicate higher marital stability. The DAS has demonstrated high reliability and a stable structure with heterosexual and same-sex couples (Todosijevic, Rothblum and Solomon, 2005). Scores on each domain also offer a high degree of reliability: $\alpha = .80$ Satisfaction, $\alpha = .74$ Expression, $\alpha = .86$ Cohesion, $\alpha = .86$ Consensus. The IMS (Rusbult, Martz, and Agnew, 1998) measures relationship satisfaction across four domains: Commitment, Satisfaction, Quality of Alternatives, and Investment. The subscales of Satisfaction and Investment were used in this study. These domains offer a high degree of reliability ($\alpha = .88$ Satisfaction, $\alpha = .78$ Investment). The PSS-Fr and PSS-Fa (Procidano & Heller, 1983) measures the extent to which individuals feel support from friends and family. The PSS is a 40-item scale with 20 questions about friends and 20 questions about family. Items are scored on a 3 point scale with 0 = *I don't know*, 1 = *yes*, and 2 = *no*. Score range from 0-20 within each domain. Higher scores reflect greater perceived social support. Scores on the items for each domain showed limited reliability: $\alpha = .52$ for the PSS-Fr subscale and $\alpha = .71$ for the PSS-Fa subscale.

Gay-related Stress

The Measure of Gay-Related Stress (MOGS; Lewis, Derlega, Bernd, Morris, & Rose, 2001) assesses experiences of sexual minority stress across a number of domains. All of the items on this measurement were not used because the scale is quite long and in

combination with the additional study measures would have added undue burden on the participants. Rather, as done in a previous study (Fingerhut & Maisel, 2010), 27 of the original 70 items were retained for this study based on their face value of external and internal gay-related stress (Meyer, 2003). Nine external stressors questions were taken from the Violence and Harassment Discrimination at Work, Misunderstanding, Family Reaction subscales (e.g. “Being called names due to my sexual orientation”). Two questions from the original Lewis et al. (2001) scale, which nicely capture external stress, were included (e.g. legal discrimination due to my sexual orientation). Five internal stressor questions were also taken from the Sexual Orientation Conflict and Visibility with Family and Friends subscales (e.g. “Shame and guilt because I am homosexual). Based on response to 1 (*Has not occurred*) 2 (*Occurred no stress*) 3 (*Occurred with little stress*) 4 (*Occurred with a lot of stress*) scales, composite scores were created for external and internal stress by totaling scores for each scale. Scores on the measure were highly reliable: $\alpha = .93$.

Independent Variables

The third section of this survey will measure relationship recognition. Three types of legal relationship recognition will be assessed as the independent variables: legal marriage, civil union and registered domestic partnership.

Demographic Information

The fourth section of this survey is designed to understand the biographical information of the sample through a series of fill in the blank and multiple-choice

questions. These questions will illicit information about age, ethnicity, religion, gender, education, length of relationship and number of children.

Relationship Formalization

Three types of relationship formalization were assessed: legal marriage, civil union, and registered domestic partnership. Participants were asked to self-report what type of legal union they had obtained. These categories were identified as the most common forms of legal recognition used across the U.S. In this case, legal marriage is the extension of legal obligations, responsibilities, protections, and benefits as afforded or recognized by the law. Civil union varies by state but is generally defined as “A party to a civil union is entitled to the same legal obligations, responsibilities, protections, and benefits as are afforded to or recognized by the law” (Illinois Religious Freedom and Civil Union Act, HB2234, Section 5, 2013). Domestic partnership also varies by state but is generally defined as having “the same rights, protections and benefits, and shall be subject to the same responsibilities, obligations, and duties under the law...” (California Family Code FAM DIVISION 2.5 Domestic Partnership Registration 297-299). In this study participants self-identified their legal union type.

In the final sample two groups were created. The first group consisted of individuals who are recognized as legally married. More specifically, individuals in this group were 1) Legally married and live in a state that extends legal marriage to same-sex couples or, 2) Legally married, yet live in a state that does not extend legal marriage to same-sex couples. For example, they were legally married in a state other than the one they live in. Legal marriages obtained from jurisdictions that extend legal marriage to

same-sex couples are still valid since the Supreme Court ruling on the DOMA in June 2013. This ruling redefined the definition of marriage, and consequently many states now recognize legal marriages obtained in other jurisdictions.

The second group consisted of individuals who reported that they were 1) In a civil union and live in a state that extends civil unions to same-sex couples 2) In a domestic partnership and live in a state that extends domestic partnership to same-sex couples

Data Analysis and Results

The goal of this study was to increase the understanding of differential legal union policies that will lead to a greater awareness of the experiences of lesbian, gay, and bisexual individuals as members of same-sex relationships. This quantitative study was designed to consider the differences between outcomes for lesbian, gay, and bisexual persons with legal marriage, civil unions, and registered domestic partnership. The overall goal of this study was to understand the differential outcomes from legal marriage, civil union, and registered domestic partnership categories. The overarching purpose of this study is to add to the field's understanding of well-being among lesbian, gay, and bisexual same-sex couples as members of differential legal unions.

Therefore, independent samples *t*-tests and hierarchical regression were used to assess these differences. Independent sample *t*-tests is a way to test whether there are mean differences between groups. For example, in the present study the researcher was interested in individual and relational differences between individuals with difference types of legal unions. Independent samples *t*-tests allowed the researcher to identify these differences between groups. Additionally, the researcher was interested in

predictors of individual and relational well-being among individuals. Hierarchical regression was used to predict individual and relational well-being.

The researcher sought to maximize the sample size for this study by examining and transforming the data based on the suggestion of Mertler & Vannatta (2010). Missing data were examined to see if it was missing completely at random, missing at random, or missing not at random. Several cases were excluded because the survey was rendered incomplete.

Finally, the data was examined to see if the assumptions of multiple regression were met. Specifically, the researcher identified whether the following assumptions of multiple regression were met: independent variables are fixed, the independent variables are measured without error, and the relationship between the independent variables and the dependent variable is linear. In order to satisfy the assumption the researcher examined 1) Whether there is a normal distribution among the dependent variables using histograms and other tests 2) Linear combinations of dependent variables are normally distributed using scatter plots. Another aspect of the assumption of multivariate normality is whether all subsets of variables have a multivariate normal distribution.

Several models were run for individual and relational well-being in order to capture the multiple dimensions of well-being at the individual and relational level. First, for quality of life three separate models were run for satisfaction with life, psychological and physical well-being. For each of these models the first step included age, gender, and income. Step two included legal marriage as well as internal and external stress, and step three included relational quality and the perceived levels of support from friends and family. Second, for relational well-being six models were run for relational quality

(Consensus, Cohesion, Satisfaction, and Expression) and the perceived support of friends and family. For each of these models the first step included age, gender, and income. Step two included legal marriage as well as internal and external stress, and step three included relational quality and the perceived levels of support from friends and family.

The regression models focused on the following research questions:

Research Question 1: Does legal marriage offer a better outcome in regards to individual well-being, after controlling for gender, age, income, relational quality, and perceived levels of support from friends and family?

Research Question 2: Does legal marriage offer a better outcome in regards to relational well-being after controlling for gender, age, income, relational quality and perceived levels of support from friends and family?

CHAPTER FIVE

PUBLISHABLE PAPER

The opportunity for same-sex couples to enter legal marriage has increased in the last decade with one state extending legal marriage to same-sex couples in 2004 and more than 35 states in 2014 (Freedom to Marry, 2015). While this increased opportunity for legal formalization for same-sex couples may provide access to state and federal legal benefits (US General Accounting Office, 2004) and a greater sense of commitment as well as social benefits (Cherlin, 2009), it is likely the social discourse regarding this legal recognition will continue to evolve overtime. Although legal recognition of same-sex relationships has made considerable progress over the last few years, little is known about the ways in which legal marriage influences couples.

While there has been significant growth in the empirical exploration of these family systems, few of the existing studies distinguish between different types of legal unions (legal marriage, civil unions, and domestic partnership) (See Rothblum, Balsam, & Solomon, 2008; Fingerhut & Maisel, 2010; Todosijevic, Rothblum, Solomon, 2005; Riggle, Rostosky, Horne, 2010). Although one study does exist which compares legal same-sex couple relationships (Rothblum, Balsam, & Solomon, 2008), this one study only compares demographic difference. Additionally, one study examines the legal and social components associated with the choice of the form of legal unions (Fingerhut & Maisel, 2010). But none have compared the individual or relational well-being outcomes associated with these different forms of legal relationships. As a result, little is known about how these different forms of relationships result in different individual or relational functioning and health.

In order to address this gap in the literature, we designed a study to explore well-being among individuals in legally recognized same-sex relationships. Specifically those couples that have gained legal marriage versus those that have gained domestic partnership and civil unions.

This is important issue to consider as even though several states have extended legal marriage to same-sex couples, a handful of states still separate legal categories of recognition for same-sex couples. Furthermore, in some states separate legal categories of recognition provide the same rights, responsibilities, protections, and benefits as legal marriage for heterosexual couples. However, in other states these separate legal categories are broader in definition. Oregon, Nevada, and Wisconsin are examples of this broader definition of legal recognition. On the other hand, Colorado, Hawaii, Illinois, and New Jersey extend civil unions to same-sex couples.

This study explores whether there are differences between individuals who are legally married and individuals who are in civil unions or registered as domestic partners. More specifically, this study examines how different legal formations relate to variations in satisfaction with life, relationship quality, relationship investment, and perceived levels of support from friends and family.

A Social Constructionist Lens of Unions and Well-Being

According to postpositivism, meaning comes from defined boundaries. It assumes a critical, realistic view of the world. It is based on the idea that reality is real and reliable, however, this reality can only be imperfectly and probabilistically understood (Benston et al., 2005). Specifically from a social constructionism stand point, individuals are understood to be participants in a cultural and historical world, and these interactions

produce reality, or the lived experiences of individuals (Schultz, 1990; p. 208). Marriage is an example of a socially constructed reality. It has been constructed throughout the centuries along various economic, political, and gender related dynamics (Coontz, 2010). The most important and common function of marriage across cultures has been the role it plays in establishing relationships between families and communities. Gradually, marriage has become a significant social and religious institution within society.

Well-being is another example of a socially constructed reality. It is constructed from historical and social components that imply movement to something better (Appadurai, 2004). It is also understood to be a connection between mind, body and spirit, with an emphasis on strengths rather than weaknesses (Christopher, 1999). Additionally, well-being is generally seen as a personal ideal. Individuals learn about factors related to well-being from the beliefs, values, and norms of his or her culture (Vilches, 2012). Furthermore, individuals and phenomena are understood according to categories. Well-being has been categorized to include: the presence of positive emotions and moods (e.g. contentment and happiness), lack of negative emotions (e.g. depression, anxiety), satisfaction with life, fulfillment, and positive functioning (Diener, 2000).

For decades scholars have been interested in the relationship between marriage and well-being. A good deal of research demonstrates that marriage provides psychological, physical and financial benefits for heterosexual couples compared to single and cohabitating couples (Doherty et al. 2002; Stack & Eshleman, 1998; Waite & Gallagher, 2000), and this is also true for minority and low-income populations (Wilcox et al., 2005). Although it is important to note that marriage alone does not result in individual well-being (Wienke & Hill, 2009), rather when a couple is in a committed

relationship, which itself is healthy, each individual is more likely to experience a greater sense of well-being.

Well-being and Same Sex Unions

In regards to same-sex couples, the construction of legal unions for same sex couples is only a recent phenomenon in the United States and many western countries. Additionally, in the U.S. some states have separate categories of legal recognition for same-sex couples. From a social constructionist standpoint these other categories of legal formalization may be less understood and therefore less socially significant within society. Because of this, questions still remain within the literature regarding the impact of differential categories of legal formalization among same-sex couples. For example, do different forms of legal recognition offer different experiences in regards to individual and relational levels of health and well-being?

Recently, U.S. policy has created four different categories of relationships for same-sex couples. These being couples 1) without any form of legal recognition, 2) couples with a registered domestic partnership, 3) couples with civil unions, and 4) couples with a legal marriage. From a social constructionist standpoint, one might assume that these different categories lead to different levels of social recognition, and if so then there may be effects on the couple due to their type of legal recognition.

This question has driven a fair amount of research in the past decade. For example, Solomon, Rothblum, & Balsam (2004, 2005) compared same-sex couples (without any form of legal recognition) to legally married heterosexual couples and same-sex couples in civil unions. In this work they found very few differences between these couples. However, heterosexual couples were found to have more traditional division of

household labor than in comparison to the same sex couples. Additionally, for lesbian couples, those in a civil unions tended to be more open about their sexual orientation than those not in civil unions. Additionally, gay males in civil unions were closer to their family of origin than gay men not in civil unions. While helpful in understanding the differences in these legal forms of marriage, there are many notable limitations. Not the least of which is a lack of a legally married same-sex comparison sample. Also, these studies did not focus directly on the perceived relational well-being of the couple or the individuals.

More recently, a few studies have attempted to address these limitations. First Rothblum, Balsam, and Solomon (2008), conducted one of the first studies on same-sex couples with different types of legal unions (legal marriage in Massachusetts, civil unions in Vermont, and domestic partnership in California). These researchers found very few differences between couples. In this case, legally married couples and couples with domestic partnership or civil union were not different on a verity of demographic variables, (e.g. levels of social support from friends and family, home ownership, housework, conflict, ending the relationship, contact and closeness to parents, levels of “outness”, discrimination, politics, and leisure activities and friends). This then leads to the question of whether there is any differential benefit to same sex couples from the different legal categories.

In regards to well-being, Riggle, Rostosky, & Horne (2010) found that same-sex couples with any form of legal recognition (registered domestic partnership, civil union or legal marriage) reported less psychological distress (internalized homophobia, depressive symptoms, and stress) and a greater sense of meaning in life in comparison to

gay males or lesbians who reported being single, or in a non-legally recognized relationship (e.g. dating but not committed through a legal union). Additionally, Fingerhut & Maisel (2010) studied individual and relational well-being among couples registered as domestic partners to couples not registered as domestic partners, and found that domestic partnership related to higher levels of relationship investment, whereas relationship satisfaction was linked to social recognition (e.g. public ceremony).

Overall these studies provide evidence that legal recognition is important to the health and well-being of same-sex couples (Riggle, Rostosky, & Horne, 2010; Ducharme & Kollar, 2012). While this knowledge is useful it does not help us understand the differential impact of the three different types of legal unions. Again as noted above, from a social constructionist standpoint social recognition of the relationship is beneficial to the overall health and functioning of the relationship. This is more than likely why the legally recognized forms of unions have better outcomes in regards to psychological distress, increased meaning in life, and more relationship investment compared to individuals not in legally recognized relationship (Riggle et al., 2010). What could also be hypothesized is that legal marriage is more socially recognized than a civil union or domestic partnership, and therefore same sex couples with a legal marriages are more likely to have better outcomes of well-being in comparison to the other forms of legal unions. This question has yet to be explored in the literature.

Stress

Given the focus on same-sex couples and relational well-being, we cannot overlook additional factors that affect these couples. Specifically, same sex couples are a minority group, and as such they face discrimination that lends to stress which can

ultimately impact the relationship. Individuals who identify as gay and lesbian often experience stressors related to their sexual orientation (Meyer, 2003). This stress can be external (e.g. being called names or physical assault) or internal (internalized homophobia or perceived stigmatization) (Meyer, 2003). Internal and external stressors are linked to negative outcomes for individuals (Fingerhut, Paplau & Gable, 2010; Meyer, 1995) and couples (Balsam & Szymanski 2005; Mohr & Daly, 2008; Otis, Rostosky, Riggle, & Hamrin, 2006). Little is known about the link between legal unions, stress, and individual and relational outcomes.

Using a social constructionist lens, this study identified marriage and well-being as socially significant constructs within society and assesses differences across a variety of legal union types. This study assessed 81 individuals in varying types of legally recognized relationships to determine; 1) are there differences across types of legal unions, and 2) is the type of legal recognition linked to outcomes of well-being.

Methodology

Sample

We utilized a cross sectional survey design, and recruited individuals in legally recognized same-sex relationships. This research involves human subjects, therefore, Institutional Review Board permission was required. The study design and methods were approved by the Loma Linda University Internal Review Board (Cert #5130333). Additionally, each participant was asked to read an informed consent statement before starting the survey. The informed consent stated the purpose of the research and the rights of participants. By continuing on to the survey participants indicated that they acknowledged that he or she understood his or her rights as a volunteer for the project.

This signature signified that permission was given to the researcher to use the data collected for the stated purpose of this research project. Participants were included in this study if the following criteria are met: 1) They were between the ages of 18-65, 2) They had been together more than five years, 3) They identified as lesbian, gay, bisexual, or transgender, 4) They had either a legal marriage, civil union or domestic partnership certificate, and 5) They were currently in a relationship with the partner with whom they entered the legal marriage, civil union, or domestic partnership. Participants were excluded from this study if any of the following criteria are met: if they were legally married to a person of the opposite gender or had been recently divorced or separated.

The sample included 77 individuals in legally formalized same-sex relationships (62 legally married, 15 were in civil unions or domestic partnerships). Participants were recruited through a variety of Lesbian, Gay, Bisexual, and Transgender organizations and through social media. Table 1 summarizes the demographic information of this sample.

The final sample consisted of individuals in legally recognized relationships. 58% reported that were currently in a legally recognized marriage. 18.5% reported being in either a civil union or domestic partnership. 18.5% reported that they are legally married, yet live in a state that does not recognize their legal marriage. 48% had children from their current relationship. The median relationship length was 12 years. Participant age ranged from 26 to 65 years ($M = 40.52$ $SD = 9.55$), and most were Caucasian (87.7% Caucasian, Latino/a 2.5%, 4.9% Other).

Table 1

Summary of Sample Demographics

	Freq	Percentage
Type of Legal Union		
Legal marriage	47	58%
Legal marriage*	15	18.5%
Civil union	7	8.6%
Domestic partnership	8	9.9%
Gender		
Male	17	21.0%
Female	58	71.6%
Transgender	3	3.7%
Sexual Orientation		
Gay	17	21.0%
Lesbian	40	49.4%
Bisexual	15	18.5%
Ethnicity		
Caucasian/Euro American	71	87.7%
Latino/a	2	2.5%
Other	4	4.9%
Years of Education		
High school diploma	1	1.2%
Some college	3	3.7%
Associates degree	4	4.9%
Bachelors degrees	14	17.3%
Some graduate school	9	11.1%
Graduate school	47	58.0%

* Legally married, yet live in a state that does not extend legal marriage to same-sex couples.

Measures

Participants completed demographic items, which included the status and length of their relationship. Participants also completed survey measures of satisfaction with life, quality of life, relationship quality and investment, perceived levels of support from friends and family, measures of gay-related stress, and relationship formalization.

Individual Well-Being

Two scales assessed individual well-being: *Satisfaction with Life Scale* (SWLS) and the *World Health Organization Quality of Life Brief* (WHOQOL-Brief). The SWLS (Pavot, Diener, Colvin, & Sandvik, 1991) measures individual satisfaction with life, based on 5 items that are rated on a 5 point Likert scale (1 = *strongly disagree*, 5 = *strongly agree*). The five items have been seen to have high internal consistency with $\alpha = .88$ ($M = 28.04$, $SD = 4.99$). The WHOQOL-Brief (Bonomi & Patrick, 1997) measures quality of life across four domains: Physical, Psychological, Social and Environment. Answers are scored on a 5 point Likert scale (1 = *Very poor* to 5 *Very good*). Domain scores are computed as the sum of items (after reverse scoring some items). All scores are transformed to make the scores comparable with the scores on the WHOQOL-100 measure. Each domain offers a high degree of reliability: $\alpha = .86$ Physical, $\alpha = .80$ Psychological, $\alpha = .62$ Social, $\alpha = .81$ Environment.

Relational Well-Being

Three scales assessed relational well-being: the *Dyadic Adjustment Scale* (DAS), the *Investment Model Scale* (IMS), and the *Perceived Levels of Support from Friends and Family Scale* (PSS-Fr; PSS-Fam). The DAS (Spainer, 1976) measures marital stability across four domains: Cohesion, Consensus, Expression, and Satisfaction. Response are scored on 5 point Likert scale with responses ranging from 0 = *always disagree* to 5 = *always agree*. Scores range from 0 to 151. Higher scores indicate higher marital stability. The DAS has demonstrated high reliability and a stable structure with heterosexual and same-sex couples (Todosijevic, Rothblum and Solomon, 2005). Scores

on each domain also offer a high degree of reliability: $\alpha = .80$ Satisfaction, $\alpha = .74$ Expression, $\alpha = .74$ Cohesion, $\alpha = .86$ Consensus. The IMS (Rusbult, Martz, and Agnew, 1998) measures relationship satisfaction across four domains: Commitment, Satisfaction, Quality of Alternatives, and Investment. The subscales of Satisfaction and Investment were used in this study. These domains offer a high degree of reliability ($\alpha = .88$ Satisfaction, $\alpha = .78$ Investment). The PSS-Fr and PSS-Fa (Procidano & Heller, 1983) measures the extent to which individuals feel support from friends and family. The PSS is a 40-item scale with 20 questions about friends and 20 questions about family. Items are scored on a 3 point scale with 0 = *I don't know*, 1 = *yes*, and 2 = *no*. Score range from 0-20 within each domain. Higher scores reflect greater perceived social support. Scores on the items for each domain showed limited reliability: $\alpha = .52$ for the PSS-Fr subscale and $\alpha = .71$ for the PSS-Fa subscale.

Gay-related Stress

The Measure of Gay-Related Stress (MOGS; Lewis, Derlega, Bernd, Morris, & Rose, 2001) assesses experiences of sexual minority stress across a number of domains. All of the items on this measurement were not used because the scale is quite long and in combination with the additional study measures would have added undue burden on the participants. Rather, as done in a previous study (Fingerhut & Maisel, 2010), 27 of the original 70 items were retained for this study based on their face value of external and internal gay-related stress (Meyer, 2003). Nine external stressors questions were taken from the Violence and Harassment Discrimination at Work, Misunderstanding, Family Reaction subscales (e.g. "Being called names due to my sexual orientation"). Two

questions from the original Lewis et al. (2001) scale, which nicely capture external stress, were included (e.g. legal discrimination due to my sexual orientation). Five internal stressor questions were also taken from the Sexual Orientation Conflict and Visibility with Family and Friends subscales (e.g. “Shame and guilt because I am homosexual). Based on response to 1 (*Has not occurred*) 2 (*Occurred no stress*) 3 (*Occurred with little stress*) 4 (*Occurred with a lot of stress*) scales, composite scores were created for external and internal stress by totaling scores for each scale. Scores on the measure were highly reliable: $\alpha = .93$.

Relationship Formalization

Three types of relationship formalization were assessed: legal marriage, civil union, and registered domestic partnership. Participants were asked to self-report what type of legal union they had obtained. These categories were identified as the most common forms of legal recognition used across the U.S. In this case legal marriage is the extension of legal obligations, responsibilities, protections, and benefits as are afforded or recognized by the law. Civil union varies by state but is generally defined as “A party to a civil union is entitled to the same legal obligations, responsibilities, protections, and benefits as are afforded to or recognized by the law” (Illinois Religious Freedom and Civil Union Act, HB2234, Section 5, 2013). Domestic partnership also varies by state but is generally defined as having “the same rights, protections and benefits, and shall be subject to the same responsibilities, obligations, and duties under the law...” (California Family Code FAM DIVISION 2.5 Domestic Partnership Registration 297-299). In this study participants self-identified their legal union type. In the final sample two groups

were created. The first group consisted of individuals who are recognized as legally married. More specifically, individuals in this group were 1) Legally married and live in a state that extends legal marriage to same-sex couples, or 2) Legally married, yet live in a state that does not extend legal marriage to same-sex couples. In other words, they were legally married in a state other than the one they live in.

The second group consisted of individuals who reported that they were 1) In a civil union and live in a state that extends civil unions to same-sex couples 2) In a domestic partnership and live in a state that extends domestic partnership to same-sex couples.

Procedures

The analysis utilized an independent samples *t* tests on the total scores for all of the study measures. To understand the effects of these different forms of relationships on individual and relational well-being in a more robust way, we also utilized hierarchical regression models to provide a more detailed explanation of variations in individual and relational well-being while controlling for additional individual and relational factors. In this case a series of models were run for individual well-being (outcomes included: Quality of life: Psychological, Quality of life: Physical, and life satisfaction) and second set of models tested the outcomes for relational wellbeing (outcome included: DAS subscales (consensus, cohesion, satisfaction and expression), Relational Satisfaction and Investment).

The model used hierarchical block modeling and relied on ecological level of influence to partition the variables (individual level variable first, followed by couple

level, followed by mesosystem family and friends). For the individual well-being models, the first block of variables included the participant's age, gender, and income. The second block included the form of legal unions and stress, and the third block included relational variables of interest (PSS-Fr, PSS-Fam). The model used for the relational well-being outcomes included the participant's age, gender, and income in the first block, the form of legal unions and stress in the second block, and relational support variables (PSS-Fr, PSS-Fam) in the third block.

Results

Overall Differences across the Legal Forms

Table 2 summarizes the comparison between legal marriage and civil union and registered domestic partnership unions. In this analysis, satisfaction with life was significantly higher for legally married individuals ($M = 28.73$, $SD = 4.42$) in comparison to individuals in civil unions or registered domestic partnership ($M = 25.53$, $SD = 6.48$), $t(75) = 2.28$, $p = .03$. Quality of Life (WHOQL-Brief Physical Domain) was significantly higher for legally married individuals ($M = 67.54$, $SD = 8.61$) than individuals in civil unions or registered domestic partnerships ($M = 62.89$, $SD = 6.97$), $t(75) = 1.94$, $p = .06$. Additionally, Quality of Life (WHOQL-Brief Psychological Domain) was significantly higher for legally married individuals ($M = 90.32$, $SD = 12.45$) than individuals in civil unions and registered domestic partnerships ($M = 79.73$, $SD = 16.87$), $t(75) = 2.75$, $p = .01$.

Table 2

Comparison of Individual in Legally Married Same-Sex Relationships and Individuals in All Other Forms of Legally Recognized Relationships

Measure	Legally Married M (SD)	Civil Union & RDP M (SD)	T-value^a	df
Individual well-being				
Satisfaction with Life Scale	28.73 (4.42)	25.53 (6.48)	2.28*	75
WHOQL-Brief Physical Domain	67.54 (8.61)	62.89 (6.97)	1.94*	75
WHOQL-Brief Psychological Domain	90.32 (12.45)	79.73 (16.87)	2.75*	75
WHOQL-Brief Social Domain	42.84 (8.79)	42.67 (7.04)	.07	75
WHOQL-Brief Environment Domain	129.94 (15.77)	126.67 (17.15)	.71	75
Relational well-being				
Dyadic Adjustment Scale – Satisfaction	37.26 (3.15)	36.27 (4.71)	.99	75
Dyadic Adjustment – Expression	7.55 (1.18)	7.40 (1.72)	.40	75
Dyadic Adjustment – Cohesion	18.42 (2.99)	17.13 (3.02)	1.49	75
Dyadic Adjustment – Consensus	50.92 (5.90)	51.07 (7.77)	-.08	75
Dyadic Adjustment Scale Total	114.15 (9.64)	111.87 (15.67)	.72	75
Investment Model Scale – (Investment)	30.05 (7.48)	29.93 (6.39)	.06	75
Investment Model Scale – (Satisfaction)	34.58 (5.17)	33.55 (6.36)	.66	75
Perceived Levels of Support from Friends	12.15 (2.52)	12.27 (2.34)	-.17	75
Perceived Levels of Support from Family	10.90 (3.79)	12.15 (2.52)	.28	75
Stress				
Internal	5.56 (3.01)	5.60 (3.25)	-.04	75
External	7.03 (3.04)	7.73 (3.41)	-.78	75

Note. WHOQL-Brief = World Health Organization Brief quality of life scale

^a Independent Samples *t* test

* $p < .05$

** $p < .08$

Hierarchical Regression Models

Individual Well-being.

The overall fit of the first models for individual well-being indicated well-fitting models for satisfaction with life and psychological quality of life. The regression results in table 3 below indicate that the overall models significantly predict satisfaction with life $R^2 = .47$, $F_{(9, 65)} = 6.50$ $p < .000$, and psychological quality of life $R^2 = .35$, $F_{(9, 65)} = 3.81$

$p < .001$. The model did not fit for predicting physical quality of life $R^2 = .17$, $F_{(9, 65)} = 1.47$ $p < .18$.

Across the individual well-being models, the model fit was significant for all three blocks for life satisfaction and after the inclusion of the second and third blocks for QOL Psychological. These models suggest that the issue of individual well-being in same sex couples is heavily dependent on considering this question in relationship to the couple's family and friend support systems and relationship quality. When these levels of support and relational quality are accounted for there were additional effects for legal marriage. In this case, two models showed some benefits for legal marriage over civil unions or domestic partnership. Specifically, legal marriage increased the life satisfaction ($\beta = 2.69$ (se = 1.11) $t = 2.41$, $p < .02$), and the QOL: Psychological ($\beta = 10.45$ (se = 3.60) $t = 2.90$, $p < .01$). In addition, income was a significant predictor of life satisfaction ($\beta = .65$ (se = .23) $t = 2.83$, $p < .00$), while the individual's level of satisfaction with their relationship (DAS) predicted both the satisfaction with life ($\beta = .20$ (se = .04) $t = 5.06$ $p < .000$) and QOL: Psychological ($\beta = .27$ (se = .13) $t = 2.15$, $p < .04$). Finally, the perceived level of support from family was significant in both models (Satisfaction with life; $\beta = .25$ (se = .12) $t = 2.03$, $p < .05$; QOL: Psychological $\beta = 1.25$ (se = .40) $t = 3.14$, $p < .00$). The level of support from friends was significant in one model (Satisfaction with life: $\beta = .35$ (se = .19) $t = 1.88$, $p < .07$). Interestingly, it was not a significant predictor of psychological quality of life.

Relational Quality.

The overall fit of the second set of modeling for relational well-being indicated

that the models did not fit. The regression results in table 4 below indicate that the overall models did not significantly predict DAS Consensus $R^2 = .05$, $F_{(8, 66)} = .43$ $p < .90$; DAS Satisfaction $R^2 = .09$, $F_{(8, 66)} = .86$ $p < .56$; DAS Expression $R^2 = .04$, $F_{(8, 66)} = .33$ $p < .95$; DAS Cohesion $R^2 = .13$, $F_{(8, 66)} = 1.20$ $p < .31$; IMS Satisfaction $R^2 = .06$, $F_{(8, 66)} = .52$ $p < .84$; IMS Investment $R^2 = .04$, $F_{(8, 66)} = .30$ $p < .96$. Therefore there was no effect for age, gender, income, legal marriage, internal and external stress, or the perceived support from family and friends.

Table 3

Summary of Hierarchical Regression Analysis for Variables Predicting Individual Well-Being (Satisfaction with Life) (N = 83)

Variable	SWLS		WHO PYSCH		WHO PHY	
	B(se)	β		β		B
Constant	-11.05(6.14)		34.20(19.84)		30.97(13.79)	
Age	-.01(.05)	-.02	-.02(.16)	-.02	.06(.11)	.07
Gender	.39(1.02)	.04	-3.87(3.30)	-.14	2.26(2.29)	.13
Income	.65(.23)**	.28	.25(.74)	.04	.23(.51)	.06
Legal Marriage	2.68(1.11)**	.23	10.45(3.60)**	.31	4.03(2.50)	.19
Internal Stress	.17(.23)	.11	1.20(.73)	.27	.46(.51)	.17
External Stress	.06(.21)	.04	-.64(.69)	-.15	-.05(.48)	-.02
DAS	.20(.04)***	.47	.27(.13)**	.22	.14(.09)	.18
Perceived Levels of Support: Family	.25(.12)*	.20	1.25(.40)**	.34	.46(.28)	.21
Perceived Levels of Support: Friends	.35(.19)*	.18	.45(.60)	.08	.09(.42)	.03
F _(df)	6.50(9, 65)		3.81(9, 65)		1.47(9, 65)	
R ²	.47		.35		.17	
p-value	.000		.001		.18	

SWLS = Satisfaction with Life Scale

WHO = World Health Organization Quality of Life Scale-Brief

* p < 0.05, ** p < 0.01, *** p < 0.001

In summary, these models indicate that individual well-being is effected by legal marriage status, but we should not consider this effect in isolation as the effects from the couple's level of satisfaction, as well as the support they receive from their family systems also impact satisfaction and psychological well-being. However, the effects from QOL: Physical does not appear to influence individual or relational well-being. Finally, relational well-being does not seem to be effected by legal marriage status or perceived support from friends and family.

Discussion

Theoretically speaking, the meaning of marriage in society is taken for granted. It evolves overtime through discourse. In other words it is not easily quantified. The extension of legal marriage to same-sex couples has rapidly evolved over the last decade. Over the past decade scholars have explored the demographics characteristics of same-sex couples in legally formalized relationships (Rothblum et al., 2008) and the legal and social components related to legal unions (Fingerhut & Maisel, 2010). However, there is limited evidence about different types of legal unions. Further, no empirical evidence exists regarding individual and relational well-being outcomes related to the different forms of legal relationships. Therefore, the current study addresses well-being among individuals in legally married same-sex relationships and those in legally formalized relationship through domestic partnership and civil union.

This study provided empirical evidence for socially constructed legal unions within the United States. First, this study demonsPlease apply the same to the following table by copying and pasting the pages and then pasting in the table.trated that differences do seem to exist between individuals in legally married relationships versus

those in civil unions or domestic partnership. In this case the t-test comparisons showed that legally married individuals have higher levels of satisfaction with life and psychological and physical well-being. Although this study supports much of the previous literature, this study found distinct differences between the two groups in terms of life satisfaction and psychological well-being. This is in contrast with previous studies where researchers have found very few differences between individuals who are legally married, in civil unions, or registered as domestic partners (see Rothblum et al. 2008). Further, very few differences have been found between individuals who are in civil unions, registered as domestic partners, or legally married compared to individuals who are not in any legal union (Riggle et al. 2010). Conversely there was no difference seen on outcomes of physical quality of life, relationship satisfaction, and the perceived support of family and friends as well as stress. This is in line with the previous studies where researchers have explored individual and relational outcomes among same-sex couples in legally formalized relationships. Although this study supports much of the previous literature, this study also found little difference between the forms of legal union and relationship well-being. For example, Fingerhut & Maisel (2010) found that registered domestic partnership provided couples with higher levels of relationship investment. But in this case their study compared domestic partnership couples to couples without domestic partnership. Therefore it may be that legal unions improve relationship quality and investment, but there may not be a significant difference between legal marriage and domestic partnership or civil unions in these outcomes. To the best of the researcher's knowledge this is the first study to demonstrate these differences and these

differences are important because they provide the first empirical evidence for individuals within different types of legal unions.

Secondly, this study demonstrated that when we consider individual well-being in relationship to other factors that may affect well-being (such as age, income, stress, and couple satisfaction etc.), legal marriage still provided a benefit to individual well-being, in comparison to the other forms of legal union. Specifically, legal marriage, as well as perceived support from family was associated with satisfaction with life and psychological quality of life. In addition, the quality of one's relationship was associated with satisfaction with life and psychological well-being. As suggested in other literature (Riggle et al., 2010; Durcharme & Kollar, 2012), legal marriage seems to provide couples with improved well-being. As legislatures and judicial rulings extend legal marriage to same-sex couples, the ability to capture the impact of different types of legal unions on well-being is reduce. A strength of this study was the ability to demonstrate differences between types of legal unions as well as predictors of well-being. These findings provide empirical evidence for the social construction of marriage within society.

Table 4

Summary of Hierarchical Regression Predicting Relational Well-Being (Relationship Satisfaction – Investment) (N = 77)

Variable	DAS Consensus		DAS Satisfaction		DAS Expression		DAS Cohesion		IMS Satisfaction		IMS Investment	
	B(se)	β	β	β	β	β	β	β	β	β		
Constant	53.90(7.78)		35.39(4.23)		6.53(1.57)		15.39(3.51)		36.24(6.65)		22.10(8.99)	
Age	-.01(.09)	-.01	-.06(.05)	-.15	.01(.02)	.11	.01(.04)	.04	-.05(.07)	-.09	.05(.10)	.06
Gender	.43(1.82)	.03	.80(.99)	.11	.15(.37)	.05	.35(.82)	.06	.66(1.56)	.06	1.39(2.11)	.09
Income	.29(.41)	.09	.07(.22)	.04	.04(.08)	.06	-.26(.19)	-	-.02(.35)	-.01	.48(.47)	.13
Legal Marriage	-.42(1.99)	.03	.82(1.08)	.09	.26(.40)	.08	1.38(.90)	.19	1.04(1.70)	.08	-.24(2.30)	-
Internal Stress	-.09(.40)	-.04	-.09(.22)	-.08	.01(.08)	.01	-.06(.18)	-	-.45(.35)	-.26	-.13(.47)	-
External Stress	-.27(.38)	-.14	.12(.21)	.11	.02(.08)	.04	.04(.17)	.04	.31(.33)	.18	.05(.44)	.02
Perceived Levels of Support: Family	-.21(.22)	-.13	-.14(.12)	-.15	-.04(.04)	-	-.04(.10)	-	-.06(.19)	-.04	-.19(.25)	-
Perceived Levels of Support: Friends	-.09(.33)	-.04	.20(.18)	.14	-.01(.07)	-	.28(.15)	.23	-.05(.28)	-.02	.11(.38)	.04
F _(df)	.43 _(8, 66)		.86 _(8, 66)		.33 _(8, 66)		1.20 _(8, 66)		.52 _(8, 66)		.30 _(8, 66)	
R ²	.05		.09		.04		.13		.06		.04	
p-value	.90		.56		.95		.31		.84		.96	

DAS = Dyadic Adjustment Scale
IMS = Investment Model Scale
* p < 0.05, ** p < 0.01, *** p < 0.001

Although this study showed a strong relationship between legal marriage and individual well-being, it did not provide evidence of improved relational well-being and legal marriage. A few studies suggest that legal unions have direct benefits for couples. For example, Lannutti (2007) found that lesbian and gay couples thought their relationship was more “real” both for themselves and within society (Fingerhut & Maisel, 2010). In another study Riggle et al. (2006) found that same-sex couples with executed legal documents (wills, trusts etc) had a greater sense of stability and a greater sense of commitment. Also, Solomon et al. (2004) found that gay men in civil unions were significantly more committed to their relationship and were less likely to think about dissolving their relationship than those not in civil unions. Therefore, previous research suggests that legal formalization provides couples with tangible rights and responsibilities related to relational investment which can be equated to a potential benefit from legal unions (Herek, 2006; Fingerhut & Maisel, 2010). Although it seems clear from the previous literature that legal unions are helpful for same sex couples, this study sought to determine whether legal marriage offered an even more significant benefit. In this study there does not appear to be a differential benefit to relationship well-being between legal marriage and other legal unions. This is not to say that legal marriage has no effect. Rather, it is clear that legal unions improve relationship well-being, what is not clear from the literature is whether legal marriage offers additional effects beyond the effects that noted for all legal unions. We should also consider that this issue in light of the individual benefits noted above. In this case, this study does show a positive benefit to individual well-being. It may be that overtime this individual well-being benefit indirectly effects the relationship well-being.

Finally, this study found evidence for the importance of family and relational support for overall well-being. This study provides further evidence for the importance of the relationship with family to support overall well-being regardless of gender. Previous studies indicated that gay male couples in legal unions are closer to their family of origin than committed gay male couples not in civil unions (Solomon et al., 2004, 2005). The current study adds to the existing literature by suggesting that legal marriage does influence satisfaction with life rather, and even more than, domestic partnerships and civil unions. In addition, this effect remains even after controlling for other factors such as one's relationship with family and friends. These findings capture the empirical nature of socially constructed institutions of legal unions and well-being.

Limitations

There are several limitations to this study. First, the data in this study is cross-sectional; therefore, claims cannot be made about causal associations. In this case it is equally likely that legal marriage leads to higher well-being as it is equally likely that those with higher levels of well-being are more likely to seek out legal marriage. Second, the data in this study address only one-half of the couple relationship. Although the results of this study demonstrated benefits of legal marriage, it is unclear whether both individuals in the relationship experience the same levels of individual and relational well-being. Because of these two limitations, future studies should explore a longitudinal effect of legal marriage and well-being within a dyadic couple level of analysis.

A third limitation is the nature of the sample. Consistent with previous research on LGBT populations and marginalized groups (Fingerhut & Maisel, 2010), this sample

is not completely representative of the LGBT population in the country. As a whole the sample was highly educated with high levels of income and mostly Caucasian. Previous research suggests that ethnicity and economic status may influence individual and relational well-being (Bramlett & Mosher, 2002). While this study paralleled the typically sampled same sex couples (high income, high education), it is important for future studies to assess the effects in this study with a lower income and less educated population to determine whether lower social economic status produces similar or dissimilar effects. Additionally, this sample had high levels of relationship quality (DAS), and although the results of this study do not suggest a link between relationship quality and legal unions, more research is needed to understand the factors that influence relational well-being among legally recognized couples.

A fourth limitation is the sample size for the other legal category group (civil unions, domestic partnership). Several challenges led to this limitation. The data collection for this study began in January 2014. At this time a handful of states (MA, CT, VT, IA, MN, ME, NM, WA, NY, CA, RI, DE, and the District of Columbia) extended legal marriage to same-sex couples while four states extended civil unions (NJ, IL, HI, CO) and three states extended domestic partnership (OR, NV, WI) to same-sex couples. However, as the data collection progressed all of these states began to extend legal marriage to same-sex couples making it less likely to recruit couples in civil unions and domestic partnerships. This resulted in the disproportionate sampling of legal marriage versus all other forms of marriage grouping. Originally this study proposed to evaluate all three forms separately. Unfortunately, there were barely enough participants to evaluate legal marriage from the other two forms. As time went on it become increasingly difficult

to find couples that had domestic partnerships or civil unions. This type of comparison between different types of legal unions will be very difficult in future studies given the recent policy changes in the United States.

Implications

This study has implications for policy makers, clinicians, and future research. First, this study provides policy makers with information about current policies regarding legal unions as well as information about the well-being of same-sex couples in these unions. Specifically, differences in well-being among types of legal unions and predictors of well-being among couples in legally recognized relationships. Further, given the recent policy changes in the United States, this study has implications for the expansion of legal marriage to the rest of the United States. Specifically, this study provides evidence about the well-being of individuals who have chosen to legally formalize their relationship through marriage compared to other types of unions. This evidence may support policy makers in making decisions about creating “other” categories for individuals and couples with minority status in the United States. Second, this study supports the work of family practitioners who “consider societal issues within the context of family” (National Council and Family Relations, 2013). Legal unions and the well-being of couples within these unions is a relevant societal issue for family life practitioners to consider. This study provides empirical evidence on the well-being of individuals in legally recognized same-sex unions and important factors that lead to overall quality of life. Finally, this research provides an exploratory explanation for individual and relational well-being and suggests directions for future studies. Specifically, more research is needed to understand

the moderating and mediating effects of legal unions on individual and relational well-being among same-sex couples, as well as more rigorous longitudinal studies with a dyadic level of analysis.

CHAPTER SIX

IMPLICATIONS

In the following section specific statistical procedures, the modeling process and the summary of findings are discussed along with changes from the proposed study, limitations of the study, and next steps.

Specific Statistical Procedures

In an effort to maximize the sample size, missing data from the various questions were replaced with the mean scores. This was deemed appropriate because only a handful of quantitative questions contained missing data, and none of these had more than one value missing. Seventy-seven cases were excluded from the analysis. Two of these were omitted because the participants did not meet inclusion criteria. The other cases were excluded because the survey was rendered incomplete.

Several items that needed to be reverse ordered were recoded. For instance, “To what extent do you feel that (physical) pain prevents you from doing what you need to do?” was answered on a Likert-like scale ranging from not at all to an extreme amount, with an extreme amount corresponding to the highest numerical value. This item was recoded so that higher answers would indicate that physical pain prevents participants from doing what they need to do. Items that contributed to domain scores were combined for each scale with separate domain scores. One example of this process was the combination of the combination of the physical domain scores for the WHOQL-Brief scale.

Lastly, continuous variables were analyzed and grouped into categories. This was done to more accurately compare legal unions and ascertain their differential affects on well-being. For example, the following categories were created to compare individuals who were legally married to individuals who were in all other forms of legal unions (civil union and registered domestic partnership) from the question, “Please tell us what kind of legal union you are in with your partner:” (1) Legally married, (2) Civil Union, (3) Domestic Partnership, (4) Legally married and civil union, (5) Legally married and domestic partnership, (6) Civil union and domestic partnership. Legally married participants were placed into category one and individuals with all other types of legal unions were placed in category zero. Although it could be argued that the legal categories overlap, the overall purpose was to consider differences between individuals who were legally married and individuals who were in other types of legal unions.

Modeling Process

Preliminary analyses were first conducted to determine the potential for predictive value among various background variables obtained from the survey. Although they were not primary variables of interest, several of these were entered into each hierarchical regression analysis after demonstrating correlation at the bivariate level with individual and relational well-being. These variables were entered in the first step of the hierarchical regression analyses and included the following: participant’s; age, gender, and income.

Step two included legal unions and stress. These were entered in a single step because the researcher believed that the type of legal unions and stress collectively influenced well-being. The relational variables, perceived support from friends and family (PSS-Fr, PSS-Fam), were entered in the third block. The hierarchical regression

enabled the researcher to confirm whether or not the individual and couple level influences the relational level.

After running the regression equations, overall variance accounted for by the models and the individual predictive value of each factor was examined. Each step was also analyzed for its contribution to the individual and relational well-being.

Table 5

Summary of Sample Demographics

	Freq	Percentage
Type of Legal Union		
Legal marriage	47	58%
Legal Marriage*	15	18.5%
Civil union	7	8.6%
Domestic partnership	8	9.9%
Gender		
Male	17	21.0%
Female	58	71.6%
Transgender	3	3.7%
Sexual Orientation		
Gay	17	21.0%
Lesbian	40	49.4%
Bisexual	15	18.5%
Ethnicity		
Caucasion/Euro American	71	87.7%
Latino/a	2	2.5%
Other	4	4.9%
Years of Education		
High school diploma	1	1.2%
Some college	3	3.7%
Associates degree	4	4.9%
Bachelors degrees	14	17.3%
Some graduate school	9	11.1%
Graduate school	47	58.0%

* Legally married, yet live in a state that does not extend legal marriage to same-sex couples.

Table 6

Correlations Between Individual Well-Being Variables, Age, Gender, Income, Legal Marriage, Stress, and Perceived Levels of Support

Measure	1	2	3	4	5	6	7	8	9	10	11	12
1. SWLS	—	.65**	.36**	-.12	.06	.28	.30**	.01	.05	.43	.30**	.25*
2. WHOQL-Brief PSY	.65**	—	.25*	-.08	-.07	.09	.21	-.03	.13	.19	.39	.16
3. WHOQL-Brief PHY	.36**	.25*	—	-.04	.17	.07	.31**	-.02	.07	.15	.24*	.10
4. Age	-.12	-.08	-.04	—	-.15	.16	-.13	.15	.21	-.06	-.15	-.20
5. Gender	.06	-.07	.17	-.15	—	-.30**	.22	-.20	-.26*	.09	.16	.27*
6. Income	.28*	.09	.07	.16	-.30**	—	-.00	.09	.16	-.02	-.03	-.06
7. Legal Marriage	.29**	.21	.31**	-.13	.22	-.00	—	.02	.14	.15	-.01	.09
8. External Stress	.01	-.03	-.02	.15	-.20	.09	.01	—	.77**	-.08	-.12	-.08
9. Internal Stress	.05	.13	.07	.21	-.26*	.16	.14	.77**	—	-.11	.01	-.06
10. DAS	.43**	.19	.15	-.06	.09	-.02	.15	-.08	-.11	—	-.10	.08
11. Perceived Support from Family	.29**	.39**	.24*	-.16	.16	-.03	-.01	-.12	.01	-.10	—	.30**
12. Perceived Support from Friends	.25*	.16	.10	-.20	.27*	-.06	.09	-.08	-.06	.08	.30**	—

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Table 7

Correlations between Relational Well-Being Variables, Age, Gender, Income, Legal Marriage, Stress, and Perceived Levels of Support.

Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. DAS Consensus	—	.58**	.29*	.41**	.51**	-.02	.01	-.01	.06	.04	-.14	-.14	-.12	-.06
2. DAS Satisfaction	.58**	—	.40**	.42**	.71**	-.06	-.23	.17	-.01	.16	-.03	-.10	-.04	.17
3. DAS Cohesion	.29*	.40**	—	.23*	.41**	.12	.00	.15	-.20	.18	-.02	-.01	-.06	.21
4. DAS Expression	.41**	.42**	.23*	—	.43**	.04	.10	-.01	.06	.06	.05	.04	-.07	-.03
5. IMS Satisfaction	.51**	.71**	.42**	.43**	—	.06	-.14	.10	-.06	.12	-.03	-.15	-.01	.02
6. IMS Investment	-.02	-.06	.12	.04	.06	—	.10	.03	.10	-.04	-.00	-.02	-.12	.00
7. Age	.01	-.23*	.00	.10	-.14	.10	—	-.15	.16	-.13	.15	.21	-.16	-.20
8. Gender	-.01	.17	.15	-.01	.10	.03	-.15	—	-.30**	.22	-.20	-.26*	.16	.27*
9. Income	.06	-.01	-.20	.06	-.06	.10	.16	-.30**	—	-.00	.09	.16	-.03	-.06
10. Legal Marriage	.04	.16	.18	.06	.12	-.04	-.13	.22	-.00	—	.02	.14	-.01	.09
11. External Stress	-.14	-.03	-.02	.05	-.03	-.00	.15	-.20	.09	.02	—	.77**	-.12	-.08
12. Internal Stress	-.14	-.10	-.02	.04	-.15	-.02	.21	-.26*	.16	.14	.77**	—	.01	-.06
13. Perceived Support from Family	-.12	-.04	-.06	-.07	-.01	-.12	-.16	.16	-.03	-.01	-.12	.01	—	.30**
14. Perceived Support from Friends	-.06	.17	.21	-.03	.02	.00	-.20	.27*	-.06	.09	-.08	-.06	.30**	—

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

Summary of Findings

The extension of legal marriage to same-sex couples has rapidly evolved over the last decade. Over the past decade scholars have explored the demographics characteristics of same-sex couples in legally formalized relationships (Rothblum et al., 2008) and the legal and social components related to legal unions (Fingerhut & Maisel, 2010). However, no empirical evidence exists regarding individual and relational well-being outcomes related to the different forms of legal relationships. Therefore, the current study addressed well-being among individuals in legally married same-sex relationships and those in legally formalized relationships through domestic partnership and civil union.

This study demonstrated several differences between legally married individuals and individuals in other forms of legal unions. Specifically, higher levels of satisfaction with life as well as psychological and physical well-being were present in the couples that had legal marriage. Conversely, individuals did not differ from one another in terms of social and financial well-being, relationship satisfaction, and the perceived support of family and friends as well as stress.

Additionally, this study demonstrated relevant predictors of well-being in relationships. In this study legal marriage provided a benefit to individual well-being. Legal marriage, as well as perceived support from family was associated with satisfaction with life and psychological quality of life. In addition, the quality of one's relationship was associated with satisfaction with life and psychological well-being. As suggested in other literature, legal recognition provides couples with important health benefits (Riggle et al., 2010; Durcharme & Kollar, 2012) related to life satisfaction and quality of life. This study supports these hypotheses. Finally, this study found evidence for the

importance of family support for overall well-being. This study provides further evidence for the importance of the relationship with family to support overall well-being regardless of gender.

Proposed Study vs. Final Study

There are several changes from what was proposed originally in this study and the final study. First, the researcher proposed that a series of open-ended questions would be used in this study. Although open-ended questions were included in the survey, these questions were not used in the final analysis because of limited responses from participants. The researcher will evaluate these questions for themes and use in future studies on legal unions. Second, the data collection in this study was a challenge because marriage laws in the United States changed rapidly after the researcher started collecting data. At the time when data collection started for this study several states extended civil unions (NJ, IL, HI, CO) and domestic partnership (OR, NV, WI) to same-sex couples. However, as the data collection progressed all of these states began to extend legal marriage to same-sex couples making it less likely to recruit couples in civil unions and domestic partnerships. This resulted in the disproportionate legal marriage versus all other forms of marriage grouping. Originally this study proposed to evaluate all three forms separately. Unfortunately, there were barely enough participants to evaluate legal marriage from the other two forms. As time went on it become increasingly difficult to find couples that had domestic partnerships or civil unions.

Limitations

There are several limitations to this study. First, the data in this study is cross-sectional; therefore, claims cannot be made about causal associations. In this case it is equally likely that legal marriage leads to higher well-being as it is that those with higher levels of well-being are more likely to seek out legal marriage. Second, the data in this study address only one-half of the couple relationship. Although the results of this study demonstrate benefits of legal marriage, it is unclear whether both individuals in the relationship experience the same levels of individual and relational well-being. Because of these two limitations, future studies should explore a longitudinal effect of legal marriage and well-being within a dyadic couple level of analysis.

A third limitation is the nature of the sample. Consistent with previous research on LGBT populations and marginalized groups (Fingerhut & Maisel, 2010), this sample is not completely representative of the LGBT population in the country. As a whole the sample was highly educated with high levels of income and mostly Caucasian. Previous research suggests that ethnicity and economic status may influence individual and relational well-being (Bramlett & Mosher, 2002). While this study paralleled the typically sampled same sex couples (high income, high education), it is important for future studies to assess the effects in this study with a lower income and less educated population to determine whether lower social economic status produces similar or dissimilar effects. Additionally, this sample had high levels of relationship quality (DAS), and although the results of this study do not suggest a link between relationship quality and legal unions, more research is needed to understand the factors that influence relational well-being among legally recognized couples.

Implications

This study has implications for policy makers, clinicians, and future research. First, this study provides policy makers with information about current policies regarding legal unions as well as information about the well-being of same-sex couples in these unions. Specifically, differences in well-being among types of legal unions and predictors of well-being among couples in legally recognized relationships. Second, this study supports the work of family practitioners who “consider societal issues within the context of family” (National Council and Family Relations, 2013). Legal unions and the well-being of couples within these unions is a relevant societal issue for family life practitioners to consider. This study provides empirical evidence on the well-being of individuals in legally recognized same-sex unions and important factors that lead to overall quality of life.

Further, given the recent policy changes in the United States, this study has implications for the expansion of legal marriage to the rest of the United States. Specifically, this study provides evidence about the well-being of individuals who have chosen to legally formalize their relationship through marriage compared to other types of unions. This evidence may support policy makers in making decisions about creating “other” categories for individuals and couples with minority status in the United States.

Finally, this research provides an exploratory explanation for individual and relational well-being and suggests directions for future studies. Specifically, more research is needed to understand the moderating and mediating effects of legal unions on individual and relational well-being among same-sex couples, as well as more rigorous longitudinal studies with a dyadic level of analysis.

Summary

In summary, this exploratory study contributes to the literature on individual and relational well-being among individuals in legally recognized legal unions. This original research provides an opportunity for me to contribute to the ongoing conversation about the health and well-being of individuals in same-sex relationships. After this study there are a couple of next steps for me. First, present this research at a national conference. Second, I would like to do a post-doc within an organization or university to build on this study. Specifically, I would like to design a study to explore the factors that relate to relational well-being among legally married same-sex couples. Finally, as my research publications increase, I would like to pursue a position in an organization or university as a researcher and writer on the well-being of same-sex couples and families.

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APPENDIX A

SURVEY

Individual and Relational Components of Well-being Among Same-sex Couples

Who are Legally Married or in a Civil Union

To help us understand you personally, please tell us the term that you personally prefer to describe yourself.

What term do you personally prefer to describe your sexual orientation? Please type in the space provided.

Questions 1 – 32 ask you about your relationship with your partner

Most people have disagreements in their relationship. Please indicate below the approximate extent of agreement or disagreement between you and your partner for each item on the list.

1. Handling of family finances
 - a. Always Agree
 - b. Almost Always Agree
 - c. Occasionally Disagree
 - d. Frequently Disagree
 - e. Almost Always Disagree
 - f. Always Disagree
2. Matters of recreation
 - a. Always Agree

- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

3. Religious matters

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

4. Demonstrations of affection

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

5. Friends

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree

- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

6. Sex relations

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

7. Conventionality (correct or proper behavior)

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

8. Philosophy of life

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree

f. Always Disagree

9. Ways of dealing with parents or in-laws

a. Always Agree

b. Almost Always Agree

c. Occasionally Disagree

d. Frequently Disagree

e. Almost Always Disagree

f. Always Disagree

10. Aims, goals, or things believed important

a. Always Agree

b. Almost Always Agree

c. Occasionally Disagree

d. Frequently Disagree

e. Almost Always Disagree

f. Always Disagree

11. Amount of time spent together

a. Always Agree

b. Almost Always Agree

c. Occasionally Disagree

d. Frequently Disagree

e. Almost Always Disagree

f. Always Disagree

12. Making major decisions

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

13. Household tasks

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

14. Leisure time interest and activities

- a. Always Agree
- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

15. Career decisions

- a. Always Agree

- b. Almost Always Agree
- c. Occasionally Disagree
- d. Frequently Disagree
- e. Almost Always Disagree
- f. Always Disagree

16. How often do you discuss or have you considered divorce, separation, or terminating your relationship?

- a. All the time
- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

17. How often do you or your mate leave the house after you fight?

- a. All the time
- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

18. In general, how often do you think that things between you and your partner are going well?

- a. All the time

- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

19. Do you confide in your mate?

- a. All the time
- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

20. Do you ever regret that you married (or lived together)?

- a. All the time
- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

21. How often do you and your partner quarrel?

- a. All the time
- b. Most of the time
- c. More often than not

- d. Occasionally
- e. Rarely
- f. Never

22. How often do you and your mate “get on each other’s nerves?”

- a. All the time
- b. Most of the time
- c. More often than not
- d. Occasionally
- e. Rarely
- f. Never

23. Do you kiss your mate?

- a. Every Day
- b. Almost Every Day
- c. Occasionally
- d. Rarely
- e. Never

24. Do you and your mate engage in outside interests together?

- a. All of them
- b. Most of them
- c. Some of them
- d. Very few of them
- e. None of them

How often would you say the following events occur between you and your mate?

25. Stimulating exchange of ideas

- a. Never
- b. Less than once a month
- c. Once or twice a month
- d. Once or twice a week
- e. Once a day
- f. More often

26. Laugh together

- a. Never
- b. Less than once a month
- c. Once or twice a month
- d. Once or twice a week
- e. Once a day
- f. More often

27. Calmly discuss something

- a. Never
- b. Less than once a month
- c. Once or twice a month
- d. Once or twice a week
- e. Once a day
- f. More often

28. Work together on a project

- a. Never

- b. Less than once a month
- c. Once or twice a month
- d. Once or twice a week
- e. Once a day
- f. More often

These are some things about which couples sometimes agree and sometimes disagree.

Indicate if either item below caused differences of opinions or were problems in your relationship during the past few weeks. (Check yes or no).

29. Being too tired for sex

- a. No
- b. Yes

30. Not showing love

- a. No
- b. Yes

31. Please indicate that which best describes the degree of happiness, all things considered, of your relationship.

- a. Extremely happy
- b. Fairly happy
- c. A little happy
- d. Happy
- e. Very happy
- f. Extremely happy
- g. Perfect

32. Which of the following statements best describes how you feel about the future of your relationships?

- a. I want desperately for my relationship to succeed, and *would go to almost any length to see that it does.*
- b. I want very much for my relationship to succeed, and *will do all I can to see that it does.*
- c. I want very much for my relationship to succeed, and *will do my fair share* to see that it does.
- d. It would be nice if my relationship succeeded, but *I can't do much more than I am doing now* to help it succeed.
- e. It would be nice if it succeeded, but I *refuse to do any more than I am doing now* to keep the relationship going.
- f. My relationship can never succeed, and *there is no more that I can do* to keep the relationship going.

Questions 33 – 59 ask about your level of commitment and satisfaction in your relationship

Please indicate the degree to which you agree with each of the following statements regarding your current relationship

33. My partner fulfills my need for intimacy (sharing personal thoughts and secrets).

- a. Agree completely
- b. Agree moderately

- c. Agree slightly
- d. Don't agree at all

34. My partner fulfills my needs for companionship (doing things together, fulfilling each other's company, etc.)

- a. Agree completely
- b. Agree moderately
- c. Agree slightly
- d. Don't agree at all

35. My partner fulfills my sexual needs (holding hands, kissing, etc.)

- a. Agree completely
- b. Agree moderately
- c. Agree slightly
- d. Don't agree at all

36. My partner fulfills my needs for security (feeling trusting, comfortable in a stable relationship, etc.)

- a. Agree completely
- b. Agree moderately
- c. Agree slightly
- d. Don't agree at all

37. My partner fulfills my needs for emotional involvement (feeling emotionally attached, feeling good when another feels good, etc.)

- a. Agree completely
- b. Agree moderately

c. Agree slightly

d. Don't agree at all

38. I feel satisfied with our relationship (please circle one)

0	1	2	3	4	5	6	7	8
Do Not Agree				Agree				Agree
At All				Somewhat				Completely

39. My relationship is much better than others' relationships

0	1	2	3	4	5	6	7	8
Do Not Agree				Agree				Agree
At All				Somewhat				Completely

40. My relationship is close to ideal.

0	1	2	3	4	5	6	7	8
Do Not Agree				Agree				Agree
At All				Somewhat				Completely

41. Our relationship makes me very happy.

0	1	2	3	4	5	6	7	8
Do Not Agree				Agree				Agree
At All				Somewhat				Completely

42. Our relationship does a good job of fulfilling my needs for intimacy, companionship, etc.

0	1	2	3	4	5	6	7	8
Do Not Agree				Agree				Agree

At All Somewhat Completely

43. The people other than my partner with whom I may become involved are very appealing.

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

44. My alternatives to our relationship are close to ideal (dating another, spending time with friends or on my own, etc.)

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

45. If I weren't dating my partner, I would do fine – I would find another appealing person to date.

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

46. My alternatives are attractive to me (dating another, spending time with friends or on my own etc.)

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

47. My needs for intimacy, companionship, etc., could easily be fulfilled in an alternative relationship.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

48. I have put a great deal into our relationship that I would lose if the relationship were to end.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

49. Many aspects of my life have become linked to my partner (recreational activities, etc.), and I would lose all of this if we were to break up).

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

50. I feel very involved in our relationship – like I have put a great deal into it.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

51. My relationships with friends and family members would be complicated if my partner and I were to break up (e.g., partner is friends with people I care about).

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

52. Compared to other people I know, I have invested a great deal in my relationship with my partner.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

53. I want our relationship to last for a very long time.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

54. I am committed to maintaining my relationship with my partner.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		
At All			Somewhat			Completely		

55. I would not feel very upset if our relationship were to end in the near future.

0	1	2	3	4	5	6	7	8
Do Not Agree			Agree			Agree		

At All Somewhat Completely

56. It is likely that I will date someone other than my partner within the next year.

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

57. I feel very attached to our relationship – very strongly linked to my partner.

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

58. I want our relationship to last forever.

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

59. I am oriented toward the long-term future of my relationship (for example, I imagine being with my partner several years from now).

0 1 2 3 4 5 6 7 8

Do Not Agree Agree Agree

At All Somewhat Completely

Questions 60 – 79 ask you about your relationship with your friends.

60. My friends give me the moral support I need.

- a. No
- b. Yes

c. Don't know

61. Most other people are closer to their friends than I am.

a. No

b. Yes

c. Don't know

62. My friends enjoy hearing about what I think.

a. No

b. Yes

c. Don't know

63. Certain friends come to me when they have problems or need advice.

a. No

b. Yes

c. Don't know

64. I rely on my friends for emotional support.

a. No

b. Yes

c. Don't know

65. If I felt one or more of my friends were upset with me, I'd just keep it to myself.

a. No

b. Yes

c. Don't know

66. I feel like I'm on the fringe in my circle of friends.

- a. No
- b. Yes
- c. Don't know

67. There is a friend I could go to if I was just feeling down, without feeling funny about it later.

- a. No
- b. Yes
- c. Don't know

68. My friends and I are very open about what we think about things.

- a. No
- b. Yes
- c. Don't know

69. My friends are sensitive to my personal needs.

- a. No
- b. Yes
- c. Don't know

70. My friends come to me for emotional support.

- a. No
- b. Yes
- c. Don't know

71. My friends are good at helping me solve problems.

- a. No

- b. Yes
- c. Don't know

72. I have a deep sharing relationship with a number of friends.

- a. No
- b. Yes
- c. Don't know

73. My friends get good ideas about how to do things or make things from me.

- a. No
- b. Yes
- c. Don't know

74. When I confide in friends it makes me feel uncomfortable.

- a. No
- b. Yes
- c. Don't know

75. My friends seek me out for companionship.

- a. No
- b. Yes
- c. Don't know

76. I think my friends feel that I'm good at helping them solve problems.

- a. No
- b. Yes
- c. Don't know

77. I don't have a relationship with a friend that is as intimate as other people's relationships with friends.

- a. No
- b. Yes
- c. Don't know

78. I've recently gotten a good idea about how to do something from a friend.

- a. No
- b. Yes
- c. Don't know

79. I wish my friends were much different.

- a. No
- b. Yes
- c. Don't know

Questions 80 - 99 ask you about your relationship with your family.

80. My family gives me the moral support I need.

- a. No
- b. Yes
- c. Don't know

81. I get good ideas about how to do things or make things from my family.

- a. No
- b. Yes
- c. Don't know

82. Most other people are closer to their family than I am.

- a. No
- b. Yes
- c. Don't know

83. When I confide in the members of my family who are closets to me, I get the idea that it makes them uncomfortable.

- a. No
- b. Yes
- c. Don't know

84. My family enjoys hearing about what I think.

- a. No
- b. Yes
- c. Don't know

85. Members of my family share many of my interests.

- a. No
- b. Yes
- c. Don't know

86. Certain members of my family come to me when they have problems or need advice.

- a. No
- b. Yes
- c. Don't know

87. I rely on my family for emotional support.

- a. No
- b. Yes
- c. Don't know

88. There is a number of my family I could go to if I was just feeling down, without feeling funny later.

- a. No
- b. Yes
- c. Don't know

89. My family and I are very open about what we think about things.

- a. No
- b. Yes
- c. Don't know

90. My family is sensitive to my personal needs.

- a. No
- b. Yes
- c. Don't know

91. Members of my family come to me for emotional support.

- a. No
- b. Yes
- c. Don't know

92. Members of my family are good at helping me solve problems.

- a. No

- b. Yes
- c. Don't know

93. I have a deep sharing relationship with a number of members of my family.

- a. No
- b. Yes
- c. Don't know

94. Members of my family get good ideas about how to do things or make things from me.

- a. No
- b. Yes
- c. Don't know

95. When I confide in members of my family, it makes me uncomfortable.

- a. No
- b. Yes
- c. Don't know

96. Members of my family seek me out for companionship.

- a. No
- b. Yes
- c. Don't know

97. I think my family thinks I'm good at helping them solve problems.

- a. No
- b. Yes
- c. Don't know

98. I don't have a relationship with a member of my family that is as close as other people's relationships with family members.

- a. No
- b. Yes
- c. Don't know

99. I wish my family were much different.

- a. No
- b. Yes
- c. Don't know

Questions 100 - 104 ask you about how satisfied you are with your life.

100. In most ways my life is close to my ideal.

- a. Strongly agree
- b. Agree
- c. Slightly agree
- d. Neither agree or disagree
- e. Slightly disagree
- f. Disagree
- g. Strongly disagree

101. The conditions of my life are excellent

- a. Strongly agree
- b. Agree
- c. Slightly agree
- d. Neither agree or disagree

- e. Slightly disagree
- f. Disagree
- g. Strongly disagree

102. I am satisfied with my life

- a. Strongly agree
- b. Agree
- c. Slightly agree
- d. Neither agree or disagree
- e. Slightly disagree
- f. Disagree
- g. Strongly disagree

103. So far I have gotten the important things I want in my life

- a. Strongly agree
- b. Agree
- c. Slightly agree
- d. Neither agree or disagree
- e. Slightly disagree
- f. Disagree
- g. Strongly disagree

104. If I could live my life over, I would change almost nothing.

- a. Strongly agree
- b. Agree
- c. Slightly agree

- d. Neither agree or disagree
- e. Slightly disagree
- f. Disagree
- g. Strongly disagree

Questions 105 - 130 ask about your quality of life

105. How would you rate your quality of life?
- a. Very poor
 - b. Poor
 - c. Neither poor nor good
 - d. Good
 - e. Very good
106. How satisfied are you with your health?
- a. Very dissatisfied
 - b. Dissatisfied
 - c. Neither satisfied nor dissatisfied
 - d. Satisfied
 - e. Very satisfied
107. To what extent do you feel that physical pain keeps you from doing what you need to do?
- a. Not at all
 - b. A little
 - c. A moderate amount

- d. Very much
- e. An extreme amount

108. How much do you need any medical treatment to function in your daily life?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. An extreme amount

109. How much do you enjoy life?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. An extreme amount

110. To what extent do you feel your life to be meaningful?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. An extreme amount

111. How well are you able to concentrate?

- a. Not at all

- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

112. How safe do you feel in your daily life?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

113. How healthy is your physical environment?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

114. Do you have enough energy for everyday life?

- a. Not at all
- b. A little
- c. Moderately
- d. Mostly
- e. Completely

115. Are you able to accept your bodily appearance?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
116. Have you enough money to meet your needs?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
117. How available to you is the information that you need in your every-day-life?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
118. To what extent do you have the opportunity for leisure activities?
- a. Not at all
 - b. A little
 - c. A moderate amount

d. Very much

e. Extremely

119. How well are you able to get around?

a. Very poor

b. Poor

c. Neither poor nor good

d. Good

e. Very good

120. How satisfied are you with your sleep?

a. Very dissatisfied

b. Dissatisfied

c. Neither satisfied or dissatisfied

d. Satisfied

e. Very satisfied

121. How satisfied are you with your ability to perform your daily living activities?

a. Not at all

b. A little

c. A moderate amount

d. Very much

e. Extremely

122. How satisfied are you with your capacity to work?

a. Not at all

- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

123. How satisfied are you with yourself?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

124. How satisfied are you with your personal relationships?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

125. How satisfied are you with your sex life?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

126. How satisfied are you with the support you get from your friends?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
127. How satisfied are you with the conditions of your living space?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
128. How satisfied are you with the conditions of your access to health services?
- a. Not at all
 - b. A little
 - c. A moderate amount
 - d. Very much
 - e. Extremely
129. How satisfied are you with your transport?
- a. Not at all
 - b. A little
 - c. A moderate amount

- d. Very much
- e. Extremely

130. How often do you have blue mood, despair, anxiety, or depression?

- a. Not at all
- b. A little
- c. A moderate amount
- d. Very much
- e. Extremely

Questions 131 – 134 ask you about the type of legal union you have with your partner.

131. Have you and your partner obtained a civil union in the state in which you reside? (if “No” please skip to question 133.)

- a. No
- b. Yes

132. About how long ago (in years and months) did you and your partner obtain a civil union in the state in which you reside?

Years: _____

Months: _____

133. Have you and your partner obtained a legal marriage certificate in the state in which you reside?

- a. No
- b. Yes

134. About how long ago (in years and months) did you and your partner obtain a legal marriage in the state in which you reside?

Years: _____

Months: _____

Questions 135 – 138 ask you questions about ceremonies

135. Have you and your partner had a wedding/commitment ceremony/other religious or secular ceremony? (If “No” please skip to question 137).

a. No

b. Yes

c. We are in the process of planning one

136. About how long ago (in years and months) did you and your partner have a ceremony (e.g. commitment ceremony, wedding)

Years: _____

Months: _____

137. Please describe your reasons behind your decisions not to have a ceremony or wedding:



138. Which best describes your situation?
- a. I want to have a ceremony but my partner does not
 - b. My partner wants to have a ceremony but I do not
 - c. Neither my partner nor I want to have a ceremony
 - d. Both my partner and I want to have a ceremony

Questions 139 –169 asks you questions about you!

139. Gender
- a. Male
 - b. Female
 - c. Transgender
140. If you answered TRANSGENDER, are you
- a. M to F?
 - b. F to M?
141. Age _____
142. Ethnicity
- a. African American/Black
 - b. Asian/Asian American
 - c. Caucasian/Euro American

- d. Latino/a
- e. Native American
- f. Other (Please specify)

143. What is your highest level of education?

- a. Less than high school
- b. High school diploma
- c. Some college
- d. Associates degree
- e. Bachelors degree
- f. Some graduate school
- g. Graduate degree

144. What is your annual household income?

- a. \$0-\$10,000
- b. \$10,001 - \$20,000
- c. \$20,001 - \$30,000
- d. \$30,001 - \$40,000
- e. \$40,001 - \$50,000
- f. \$50,001 - \$60,000
- g. \$60,001 - \$70,000
- h. \$70,001 - \$80,000
- i. \$80,001 - \$90,000
- j. \$90,001 - \$100,000
- k. over \$100,000

145. In which city and state do you currently live?

City:	State:
-------	--------

146. What is your zip code?

--

147. Are you a student?

- a. No
- b. Yes, part time
- c. Yes, full time

148. Are you employed?

- a. No
- b. Yes, part time
- c. Yes, full time

149. Have you served in the military?

- a. No
- b. Yes

150. Do you own your home?

- a. No
- b. Yes

151. Is your home in both your name and your partner's name:

- a. No

- b. Yes
152. Do you have health insurance?
- a. No
 - b. Yes
153. If you answerd “yes,” where does your health insurance come from?
- a. Private insurance agency
 - b. Employer
 - c. Partner employer
 - d. State health insurance
 - e. Other
154. Do you smoke?
- a. No
 - b. Yes
155. Does your partner smoke?
- a. No
 - b. Yes
156. Have you or your partner had major healthcare expenses in the last year as a result of any of the following:
- a. Major injury
 - b. Emergency surgery
 - c. Childbirth
 - d. Other, please describe _____

157. How long have you known your current partner? Please indicate the number of years and/or months (for example, Years: 3, Months: 6)

Years: _____

Months: _____

158. How long have you been romantically involved with your current partner? Please indicate the number of years and/or months (for example, Years: 3,

Months: 6)

Years: _____

Months: _____

159. Are you living with your current partner?

a. No

b. Yes

160. If you answered YES, how long have you been living with your current partner? Please indicate the number of years and/or months (for example,

Years: 3, Months: 6)

Years: _____

Months: _____

161. Do you have children?

a. No

b. Yes

162. If yes, how many? _____

163. Do you have children from your current relationship?

a. No

b. Yes

164. If yes, how many? _____

165. How did you choose to bring children into your partnership

a. Adoption

b. Surrogacy

c. Semination child birth

d. Natural child birth

e. Other: Please describe

166. Do you have children from a previous relationship?

a. Yes

b. No

167. How many children live with you? _____

168. How much time do children live with you during the year:

a. Full time

b. 2-4 months

c. Less than 2 months

d. On weekends only

e. Visit occasionally

f. Never visit

g. Other: Please describe

169. What is your religious affiliation? _____

Please take some time to answer final questions

170. How do you define living well?
171. How do you define a good relationship with your partner?
172. How do you define a good relationship with your friends and family?
173. How does having a legal marriage influence your personal well-being?
174. How does having a legal marriage influence your relational well-being?
175. How does having a civil union influence your personal well-being?
176. How does having a civil union influence your relational well-being?
177. How does having a good relationship with your partner influence your personal well-being?
178. How does having a good relationship with your friends and family influence your well-being?

APPENDIX B
INFORMED CONSENT

Title: Individual and relational components of well-being among same-sex couples who are legally married or in a civil union

SPONSOR: Loma Linda University, Loma Linda, California

PRINCIPAL

INVESTIGATOR: Naomi J. Schwenke, MA, LAMFT & Brian Distelberg, PhD

1. WHY IS THIS STUDY BEING DONE?

The purpose of this study is to learn more about same-sex couples and different types of legal unions for the purpose of improving public policies regarding same-sex marriages. The rationale for this study is two fold. First, it is important to understand what influences well-being within couple relationships. Previous studies have provided a limited understanding of well-being saying it is simply related to social support or mental health. Second, as legal formalization has expanded rapidly within the last decade, we know surprisingly little about the impact of different types of legal formation on couple relationships. This study will help inform policy makers as well as provide insight into the lived realities of same-sex couples. This study provides an opportunity for same-sex couples to add their voice to the debate regarding legal unions.

You are invited to participate in this research because you are an individual who identifies as lesbian, gay male, or bisexual in a legally recognized same-sex relationship.

2. HOW MANY PEOPLE WILL TAKE PART IN THIS STUDY?

Approximately 400 subjects will participate in this study from sixteen states and the District of Columbia.

3. HOW LONG WILL THE STUDY GO ON?

Participants will be asked to complete a short online survey which should take about 30-45 minutes to complete. Once you finish the survey, your participation will be complete.

4. HOW WILL I BE INVOLVED?

You must meet the following requirements to be in this study: 1) Age 18-65 2) Together more than five years 3) Identify as lesbian, gay, bisexual, or transgender 4) Have either a legal marriage, civil union or domestic partnership certificate, and 5) Currently in a relationship with the partner with whom they entered the legal marriage, civil union, or domestic partnership.

You cannot participate in this study if you are) Together less than five years 2) Is legally married to another person of the opposite sex 5) Be legally married, in a civil union or domestic partnership with a person of the same-sex but legally separated or divorced.

If you meet the inclusion requirements and you choose to take part in the study, then the following procedures will take place: You will complete an anonymous survey online.

This survey will ask you questions about yourself and your relationship.

5. WHAT ARE THE REASONABLY FORSEEABLE RISKS OR DISCOMFORTS I MIGHT HAVE?

There is no anticipated risk for participating in this study. Participation in this study consists of reflecting on individual and relational well-being and is not believed to be associated with any identified emotional risks. However, the researchers cannot guarantee anonymity. Anonymity may be at risk if someone not participating in the study is present with the participant (e.g. someone walks behind you while you are taking the survey and reads your survey answers). Additionally, the survey is conducted utilizing an online questionnaire software from SurveyMonkey.com. This company is an established business with appropriate security precautions in place which protect unauthorized access to your survey responses. Surveymonkey.com is a licensee of TRUSTe Privacy Program – an independent nonprofit organization that helps to ensure privacy and fair information practices. Risks for participating in this survey are therefore considered to be minimal.

6. WILL THERE BE ANY BENEFIT TO ME OR OTHERS?

Although you will not benefit from this study, the scientific information we learn from the study may benefit individuals and couples in the future by advancing public policy regarding marriage equality.

In addition, the information learned from this study will benefit others in the future.

Society stands to benefit from the results of this study because the results have the potential to alter public policies to extend equal protection to all couples.

7. WHAT ARE MY RIGHTS AS A SUBJECT?

Your consent to participate in this study is completely voluntary, and you may withdraw without penalty at any time. Please be advised that once you begin the survey you will not be able to resume where you left off, should you end your survey early. You may decide to terminate your participation in the survey at any time without consequence.

Please be advised that once you submit a completed survey, your response can not be retrieved by the research for any reason as they are de-identified. Therefore, once your survey results are submitted, the researchers cannot delete your response or in any other way remove them as they will not be able to identify which survey results are yours.

8. WILL I BE PAID TO PARTICIPATE IN THIS STUDY?

You will not be paid to participate in this research study. However, at the end of the survey you will be asked to choose one non-profit organization to which you would like the researchers to make a donation to on your behalf. The non-profit organization with the most nominations will receive a \$500 donation. The donation will be made at the conclusion of the research project.

9. WHO DO I CONTACT IF I HAVE QUESTIONS?

If you have questions regarding the study, or how to participate please contact Naomi Schwenke by emailing nschwenke@llu.edu. If you wish to contact an impartial third party not associated with this study regarding any questions about your rights or to report a complaint you may have about the study, you may contact the Office of Patient Relations, Loma Linda University Medical Center, Loma Linda, CA 92354, phone (909)-558-4647, e-mail patientrelations@llu.edu for information and assistance.

10. SUBJECTS STATEMENT OF CONSENT

- I have read the contents of the consent form.
- My questions concerning this study have been answered to my satisfaction.
- Signing this consent document does not waive my rights nor does it release the investigators, institution or sponsors from their responsibilities.

- I may call Naomi J. Schwenke at 651-398-6877 if I have additional questions or concerns.
- I understand that by continuing on in this survey I hereby give my voluntary consent to participate in this study.

By clicking on the next button below you are agreeing to participate in this study.

NEXT

APPENDIX C
IRB APPLICATION

Institutional Review Board

Application Form – Social and Behavioral Sciences

RESEARCH PROTECTION PROGRAMS

LOMA LINDA UNIVERSITY | Office of the Vice President of Research Affairs

24887 Taylor Street, Suite 202 Loma Linda, CA 92350

(909) 558-4531 (voice) / (909) 558-0131 (fax)

Instructions: Your application includes a completed printout of this form and the checklist, together with your proposed consent form, protocol, questionnaires, and any appendices that might be helpful to the IRB’s consideration. **Failure to properly complete this application will delay final review of your protocol.** Refer to [LLU Guidelines for Protection of Human Subjects in Research](#) for directions in completing this form and submitting your application to the IRB. Note that links to guidance available are in color and are underlined in blue. Links to LLU guidance can only be accessed on-campus.

Ia. Principal Investigator (name, degrees)	Obtaining consent?	Dept./Section	Ext.	E-Mail	<u>HSE</u> Expiration	Status
Brian Distelberg, PhD	Yes	Department of Counseling and Family Science LLU	47019	bdistelberg@llu.edu		Full Time Faculty
Ib. All persons conducting <u>Human Subjects Research</u> (names, degrees)						
Naomi J. Schwenke	Yes	Department of Counseling and Family Science LLU	651-398- 6877	nschwenke@llu.edu		Full Time Student

Ic. Other personnel involved in the design, conduct, or reporting of the research study						
N/A						
Id. Preferred contact person: Brian Distelberg, PhD Naomi J. Schwenke, MA, LAMFT	Building - Room #	Ext.	FAX	bdistelberg@llu.edu nschwenke@llu.edu		
ii. TITLE OF PROTOCOL Individual and Relational Components of Well-being Among Same-Sex Couples Who are Legally Married or Partnered in a Civil Union or Demostic Partnership.						

III. PROJECT PERIOD: From December 2013 to December 2014

IV. FUNDING SOURCE(S) (response required):

A. **If intramural, what department or fund?**

B. **If extramural, what is the name of the sponsor?** Family Process Institute Dissertation Research Grant

C. **LLeRA # Not available**

FOR SUPPORTING SIGNATURES SEE SECTION X (ON THE LAST PAGE)

V. REQUIRED INFORMATION:

A. Is this study initiated by:

- Faculty Investigator
- Student Investigator
- Community Based Partnership
- External sponsor/manufacturer
- Other, specify:

B. Is this application associated with another IRB-approved study? No

Yes: IRB# _____

C. Will resources (including personnel such as statisticians, students, technicians, clinicians, etc.) from outside the department sponsoring the study be involved in the conduct of this study?

- No
- Yes: Letter(s) of agreement must be attached from the appropriate LLU, LLUMC, BMC, or LLUHC department head.

D. Is the study being submitted to Public Health Service for sponsorship?

- No
- Yes: PHS policy requires assurance that the composition of the proposed study population benefits all persons at risk of the condition under study. The gender and racial/ethnic composition, together with a rationale for inclusion/exclusion,

should be described in the funding proposal and in Section VI-C and D which follows.

VI. DESCRIPTION OF POPULATION:

A.

Subjects	Number at LLU	Number Study-wide*	Age Range
Healthy (normal) subjects		600	18-70
Patients			
Total Number		600	

* Subjects participating at other sites, not part of this application.

B. Classification of subjects (<i>check all that apply</i>)		
Vulnerable populations	Special populations	Other populations

<input type="checkbox"/> Developmentally disabled <input type="checkbox"/> Diminished decision-making capacity <input type="checkbox"/> Economically disadvantaged <input type="checkbox"/> Educationally disadvantaged <input type="checkbox"/> Foster system <input type="checkbox"/> Minors/Children (under 18 years of age) – Also see 45 CFR 46 Subpart D <input type="checkbox"/> Pregnant women <input type="checkbox"/> Prisoners <input type="checkbox"/> School-based population	<input type="checkbox"/> Court-ordered treatment <input type="checkbox"/> Elderly/aged <input type="checkbox"/> Illiterate <input type="checkbox"/> Institutionalized <input type="checkbox"/> Patients: <input type="checkbox"/> Inpatients <input type="checkbox"/> Outpatients <input type="checkbox"/> Psychotherapy: <input type="checkbox"/> BMC or Faculty practice <input type="checkbox"/> Private <input type="checkbox"/> Private psychotherapist <input type="checkbox"/> Self-referral <input type="checkbox"/> Substance abuse treatment <input type="checkbox"/> Terminally ill patients <input type="checkbox"/> Traumatized	<input type="checkbox"/> Employees <input type="checkbox"/> Female (excludes males) <input type="checkbox"/> Foreign (non U.S. resident) <input type="checkbox"/> Foreign (U.S. resident) <input type="checkbox"/> Healthy (non-patient) <input type="checkbox"/> Male (excludes females) <input type="checkbox"/> Minorities <input type="checkbox"/> Non-English speaking populations <input type="checkbox"/> Physically handicapped
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	<p><input type="checkbox"/> Victims of abuse</p> <p><input type="checkbox"/> Other, specify:</p>	<p><input type="checkbox"/> Public officials</p> <p><input type="checkbox"/> Seventh-day Adventist cohort</p> <p><input type="checkbox"/> Students</p> <p><input checked="" type="checkbox"/> Other, specify: Individuals who identify as lesbian, gay male, or bisexual.</p>
--	--	---

C. Criteria for inclusion of subjects:

Individuals will be asked to participate if they meet the following criteria: 1) Age 18-65 2) Together more than five years 3) Identify as lesbian, gay, bisexual, or transgender 4) Have either a legal marriage, civil union or domestic partnership certificate, and 5) Currently in a relationship with the partner with whom they entered the legal marriage, civil union, or domestic partnership.

D. Criteria for exclusion of subjects (other than those opposite the inclusion criteria):

Individuals may still be excluded if the following is true: 1) Together less than five years 2) Is legally married to another person of the opposite sex 5) Be legally married, in a civil union or domestic partnership with a person of the same-sex but legally separated or divorced.

E. Recruitment plan *Note: In addition to providing details in the protocol, complete the questions below:*

1. Source of subjects:

- a. **PI/collaborators will recruit his/her/their own patients/clients/students/employees.**
- b. **PI/collaborators will recruit individuals unknown to them (for example, snowball sampling, social network – personal or electronic, direct approach in public situations, random digit dialing).**

- c. Recruitment database (individuals have previously given permission to be contacted for research).
- d. PI will send an IRB-approved letter to colleagues asking for referrals. *If patients, clinical personnel will make initial contact. If the patient is interested, the patient will contact the PI or (with permission of the patient) the treating physician will invite the PI to talk with the patient about enrollment.*
- e. PI will send an IRB-approved letter to colleagues asking him/her to send out IRB approved general “Dear Friend” letters describing the research study. *The PI may draft the letter with the treating physician’s signature but may not have access to the patient names or addresses for mailing. If the PI wants the letters to be personalized (Dear Mr. Doe), the personal information would have to be entered by the treating physician.*
- f. Other, specify:

2. Will recruitment require use of flyers, posters, hand-outs, or other forms of advertising?

No Yes: Attach copy for IRB review/approval.

3. Will recruitment require verbal (including telephone) recruitment?

No Yes: Attach script; See [*Phone Script Elements*](#)

4. Will recruitment involve electronic (web or e-mail) recruiting?

No Yes, describe:

LLU e-mail account

Organizational list

Membership list

Other, specify:

1. **Describe your plan for obtaining consent:** The researcher will obtain a list serve from organizations that work on behalf of same-sex couples and families in social, political, and religious contexts. An email describing the research project and requesting participants will be sent to the list serve. Participants will be given instructions on how to access the online survey for the project. When participants access the online survey they will first be required to read the informed consent. The informed consent states the purpose of the research and the rights of participants. By continuing on to the survey participants will indicate that they acknowledge that he or she understands his or her rights as a volunteer for the project. This signature

signifies that permission is given to the researcher to use the data collected for the stated purpose of this research project.

2. **Who will conduct consent?** PI/Student Investigator

3. **What location will be used for the subject to sign the consent?**

Internet

4. **Relative to the performance of research interventions, is consent obtained in conjunction with or at a separate appointment from the performance of research interventions?**

5. **How much time will individuals be given to consider study participation?** As much time as they need. It is estimated that it will take participants 5-10 minutes to read and make a decision.

6. **Which consent documents are required? *Check all that apply:***

Informed Consent Document(s)

Consent/Permission of Parent/Guardian

Assent of Minor (13 – 17 yrs old; provide signature with parent on Consent Permission Form)

Assent of Minor (7 – 12 yrs old; simplified text)

Authorization for Use of Protected Health Information or

Authorization for Use of Protected Health Information (for

*Complete
question
3 OR 4

children) when using patient information for research, including all patients receiving drug and alcohol treatment

7. If a consent waiver is requested, select one of the following and respond to guidance:

- Waiver of consent ([Waiver request form, Part A](#))
- Waiver of written consent (*Provide text of verbal consent*)
- Waiver of signed consent (*Provide text for Information sheet*)
- Waiver of HIPAA authorization ([Waiver request form, Part B](#))

G. Will payments/gifts be offered to the subjects?

No Yes: Cash

Check

Other (for example, gift cards) After participants complete the survey they will select one of three organizations to which they want the researchers to make a donation to on their behalf. The researcher will make a \$500 donation to the organization that receives the most nominations. The donation will be made at the completion of the study.

Describe the schedule and amount of payment, including plan for pro-rated payment, if

appropriate, and total: The donation will be made at the completion of the study.

VII. SUBJECT-RELATED METHODS AND RISKS:

A. What venue (location) will subject-related procedures take place?

Internet

B. Check applicable study-related procedures (*only items that exceed the standard of care*):

Usually Minimal Risk

Potentially Greater than Minimal Risk*

- | | |
|--|--|
| <input type="checkbox"/> Archived data | <input type="checkbox"/> Device - approved |
| <input type="checkbox"/> Archival data from psychotherapist's notes | <input type="checkbox"/> Device - approved, but non-approved use |
| <input type="checkbox"/> Blood drawing | <input type="checkbox"/> Placebo(s) |
| <input type="checkbox"/> Data bank (existing data, not prospective) | <input type="checkbox"/> Questions relating to disclosure of legal |
| Date range: From to | vulnerability (illegal activities such as illicit drug |
| <input type="checkbox"/> Data collection by non-invasive means (prospective) | use), sexual activity and preference, and domestic |
| <input type="checkbox"/> Diet alteration | violence and/or questions resulting in risks of |
| <input type="checkbox"/> ECG | psychological, physical, legal, social, and |
| <input type="checkbox"/> Electrical stimulation | economic harm |
| <input type="checkbox"/> Focus groups | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Interviews | <input type="checkbox"/> Radiation |
| <input type="checkbox"/> Materials (data, documents, records, or specimens) to | <input type="checkbox"/> Randomization |
| be collected solely for nonresearch purposes | <input type="checkbox"/> Substance abuse |
| <input type="checkbox"/> Medical records (existing data): | <input type="checkbox"/> Treatment (investigational/experimental) |
| Date range: From to | <input type="checkbox"/> Outpatient psychotherapy |

- Observation
 - Physical exercise or activity
 - Physical manipulation
 - Psychological intervention
 - Randomization
 - Specimens - anonymous
 - Specimens – discard
 - Specimens – prospective collection by non-invasive means
 - Survey/questionnaire
 - Test, pen/pencil/computerized
 - Tissue bank (existing, not prospective)
 - Underwater weighing
 - Urine or fecal sample
- Other (*describe*):

Voice, video, digital, or image recordings

Other (*describe*):

**Each study greater than minimal risk MUST have a detailed description of the data safety monitoring plan in the protocol.*

C. Does the protocol involved deception (see Guidance on Research Involving Deception)?

No **Yes, Describe:**

Justify:

Describe plans for debriefing:

VIII. RISKS

A. List the risks that might result from study-related procedures. Do NOT say “None.” State any psychological, physical, social, or legal risks and assess their likelihood and seriousness. Examples:

- **Is there potential for emotional stress, boredom, or fatigue?**
- **If there is a potential for subjects to become upset, and thus require psychological or medical attention as a result of the research procedures, then a means of supplying this attention must be addressed.**
- **Is there potential for a loss of confidentiality about the information given by the subjects and how serious would loss of confidentiality be for the subject? Consider breach of confidentiality or privacy as a risk for all study participants.**
- **Does the research create potential social stigmatization, physical harm to subjects such as potential abuse, legal action by authorities if subject information, responses to survey questions, etc., become known outside of research?**

- **Are there potential risks to the subject related to the political, social, or economic context in which they live?**

When the study participants hold dual status (i.e., in addition to being research subjects, they are patients, employees, students, etc.), clearly identify the risks that would be in addition to those experienced in their pre-existing role:

There is no anticipated risk for participating in this study. Participation in this study consists of reflecting on individual and relational well-being and is not believed to be associated with any identified emotional risks. However, the researchers cannot guarantee anonymity. Anonymity may be at risk if someone walks behind participants while they are taking the survey. Additionally, the survey is conducted utilizing an online questionnaire, the chance for unauthorized access does not exist, because SurveyMonkey.com is an established website which contains appropriate security precautions to render such instances unlikely. Surveymonkey.com is a licensee of TRUSTe Privacy Program – an independent nonprofit organization that helps to ensure privacy and fair information practices. Risks for participating in this survey are therefore considered to be minimal.

B. 1. For studies involving only adults, estimate the magnitude of risks the subject assumes by entering this study:

- Minimal risk**
- Minimal additional risk***
- Moderate risk***

High risk*

**Each study greater than minimal risk MUST have a detailed description of the data safety monitoring plan in the protocol.*

2. For studies involving children or both children and adults, estimate the magnitude of risks the subject assumes by entering this study:

Minimal risk

Greater than minimal risk, but holds prospect of direct benefit to subjects*

Greater than minimal risk, no prospect of direct benefit to subjects, but likely to yield generalizable knowledge about the subjects' disorder or condition*

Moderate risk*

High risk*

**Each study greater than minimal risk MUST have a detailed description of the data safety monitoring plan in the protocol.*

C. State plan for preventing or minimizing these risks (e.g., screening to assure appropriate selection of participants, identify standard of care procedures, sound research design, safety monitoring and reporting). Include provision for psychological or medical attestation, if required as a result of research procedures or means for referral for such services.

This study is designed to minimize risks to participants in the way that data is collected. The study utilizes an online questionnaire, which eliminates the chance

for unauthorized access to personal information. Additionally, the researchers do not ask for identification. Participation in this study is completely anonymous.

D. Certificate of confidentiality

Some research involving human subjects could reasonably place the subject at risk of criminal or civil liability or be damaging to the subject's financial standing or employability; or the research deals with sensitive aspects of the subject's own behavior, such as illegal conduct, drug use, sexual behavior, or use of alcohol. In such cases, the IRB suggests that the investigator apply for a "Certificate of Confidentiality" from the Department of Health and Human Services (DHHS). The certificate protects researchers against being *compelled* to disclose the identity of their subjects in any legal proceeding. Where appropriate, discuss provisions for ensuring medical or professional intervention in the event of adverse effects to the subject. Also, where appropriate, discuss the provisions for monitoring the data collected to ensure the safety of subjects: N/A

IX. BENEFIT:

- A. State the expected benefits to the subjects. (*It is acceptable for subjects not to benefit individually in some studies.*)**

Participants may experience a sense of satisfaction because of personal contribution to the advancement of public policy regarding marriage equality.

- B. State the expected benefits to humanity.**

Society stands to benefit from the results of this study because the results have the potential to alter public policies to extend equal protection to all couples.

X. CONFIDENTIALITY AND DATA SECURITY:

Research data is considered proprietary and confidential. LLU/LLUMC requires that appropriate safeguards be in place for the protection of data.

A. Electronic data -- collection & storage. Will you collect and store research data (either with identifiers or without) electronically?

No, Research data will not be collected or stored electronically (i.e., via desktop computer, laptop, PDA, USB flash drive, or other computing device).

OR

Yes. Research data will be collected and stored electronically. All the following required protections must be in place. Confirm each:

Password protection.

Data saved only to a secure storage location i.e., a LLU/LLUMC secured server or network. *Note: Saving to the c: or local drive is not secure.*

If a portable device is used (e.g., laptop, PDA), data will be saved only if (1) the device is encrypted, (2) the storage is temporary, and (3) the portable device is in a physically secure location. *Note: Leaving a portable device in any unattended vehicle is not secure.*

Devices and removable media no longer needed used at one point to collect/capture, or store PHI will be forwarded to IS for proper destruction.

If unable to secure the data as indicated above, briefly summarize the reason:

For guidance on creating a strong password and assistance with secure storage locations and proper encryption methods, contact the IS Help Desk. LLU (x48611), LLUMC (x48889).

B. Electronic data -- transmittal & transport. Will you transmit or transport electronic research data?

No. Electronic research data will not be transmitted via Internet, email, or fax system applications, and will not be transported (i.e., the carrying of a USB flashdrive, disk, CD, or removable hard drive that contains research data).

OR

Yes; Electronic research data will be transmitted and/or transported.

Check proposed method and add the corresponding security measure to your IRB protocol:

Email. *LLU/LLUMC email system will be used only (for on/off site use).***

Web interface. *Only as required/provided by the research sponsor or a contracted entity, and the research sponsor or contracted entity assumes full responsibility for the security of the data collected and maintained in its systems. Note: A secure web page will have https in the address line.*

Fax (through system application). *The system application must be an IS approved application.*

Portable device and/or Removable media e.g., laptop, disk, CD, back up device. *Data must be encrypted using IS approved methodology. Device or medium must not be unattended during transport and must be maintained in a physically secure area (e.g., locked file, cabinet.)*

Other, specify:

**** Transmittal of unencrypted patient data via email sent outside of LLU/LLUMC's Outlook System is prohibited. Instant Messaging is prohibited under any condition.**

C. Hardcopy data -- storage. Will you store research data (either with identifiers or without) in hard copy format?

No. Research data will not be stored in hard copy format.

OR

Yes; Research data will be stored in hard copy format. Check all security measures that will be taken and describe the details in your IRB protocol:

Locked suite

Locked office

Locked file cabinet

Note: Record retention requirements: Research records shall be retained at least 3 years after study completion or longer if required by the sponsor.

Data coded by PI or research team with a master list secured and kept separately

Data de-identified by PI or research team

Other, specify:

D. Hardcopy data -- transmittal & transport. Will any hard copy research data be transmitted (e.g., via fax) or transported?

No. Hard copy research data will not be transmitted or transported.

OR

Yes; Hard copy research data will be transmitted and/or transported.

Check proposed method and describe in your IRB protocol.

Fax. *Cover sheet with confidentiality statement*

Courier. *Data in sealed envelope marked confidential*

Hand-delivery. *Data in sealed envelope marked confidential*

U.S. Mail.

Express Mail service (e.g., FedEx, DHL).

Vehicle. *Data must not be left in vehicle unattended*

Hardcopy data no longer needed will be shredded or placed in a confidential bin for shredding.

Other, specify:

E. Are you collecting health information?

No. Skip this section.

OR

Yes. Complete this section.

1. Will Protected Health Information (PHI – see [19 HIPAA identifiers](#)) be shared with individuals outside LLUAHSC [the OHCA (Organized Health Care Arrangement)] during the course of the research study?

No, no PHI will be shared outside LLUAHSC (OHCA) during the course of the research study

OR

Yes (requires Authorization or waiver); PHI will be shared with
(*check all that apply*):

Statistician Consultant(s) or Contractor(s)*

Other Research Laboratory(ies) Data, Tissue, Specimen

Registry(s)

Publication(s) Coordinating Center

Data Monitoring Committee(s) Subjects

Sponsor(s) Other

*To determine if a Business Associate Agreement is required, consult section “X” of the [Researcher's Guide to HIPAA](#).

Disclosures will be tracked according to section “XV” of the Researcher's Guide to HIPAA when Waiver of Authorization has been obtained and/or information has been shared with an individual/entity outside LLUAHSC/OHCA.
--

2. If PHI will be shared (see #1 above):

Recipient will be given PHI. *Must be described in consent and PHI*

Authorization.

Recipient will be given data with a linked code. *Requires a [Code Access Agreement-Outgoing](#).*

Recipient will be given a [Limited Data Set](#). *Requires a [Data Use Agreement](#).*

No PHI will be shared.

XI. SUPPORTING SIGNATURES:

A. DECLARATION BY PRINCIPAL INVESTIGATOR:

I understand that as Principal Investigator, **I have ultimate responsibility** for the conduct of the study in accord with the Ethical Principles & Guidelines for Research Involving Human Subjects (the "Belmont Report") including the following:

- The ethical performance of the project.
- The protection of the rights and welfare of human subjects.
- Strict adherence to any stipulations imposed by the IRB.

I agree to comply with all Loma Linda University policies and procedures, as well as with all applicable Federal, State, and local laws regarding the protection of human subjects in research, including, but not limited to, the following:

- A. Performing the project according to the IRB-approved protocol.
- B. Assuring that all personnel working on the project are qualified personnel who have received training in human subject protections.
- C. Obtaining legally effective informed consent from human subjects (or their legally responsible representative, if IRB approved), and using only the current IRB-approved, stamped consent form (unless the IRB has specifically waived this requirement).
- D. Implementing no changes in the approved human subject study without prior IRB review and approval (except where necessary to eliminate apparent immediate hazards to the subjects).
- E. Reporting progress of approved research to the IRB, as often as and in the manner prescribed by the IRB on the basis of risks to subjects, but no less than once per year.
- F. Complying with the Privacy Rule (Health Insurance Portability and Accountability Act) as it applies to the privacy of health information in research.
- G. If study involves use of Mental Health Records subject to the Lanterman-Petris-Short Act, I have attached the confidentiality attestation signed by myself and other investigators responsible for handling confidential information.

If I am the faculty sponsor of a student or guest investigator, I further certify that:

- A. The student or guest investigator is knowledgeable about the regulations and policies governing research with human subjects and has sufficient training and experience to conduct this particular study in accord with the approved protocol.
- B. This project has been reviewed and approved by the thesis/dissertation committee.
- C. I agree to meet with the student or guest investigator on a regular basis to monitor study progress. Should problems arise during the course of the study, I agree to be available, personally, to supervise the investigator in solving them.
- D. If I will be unavailable, as when on sabbatical leave or vacation, I will arrange for an alternate faculty sponsor to assume responsibility during my absence, and I will advise the IRB by letter of such arrangements.

I certify that the information provided in this application is complete and accurate.

Signed: _____
Principal Investigator Date

B. DECLARATION BY STUDENT INVESTIGATOR(S):

I accept my responsibilities in complying with Loma Linda University policies and procedures for protection of human subjects in research and supporting the responsibility of my faculty sponsor, described above.

Signed: _____

XI.

List all items included with IRB submission on attached sheet provided.