Deconstructing motherhood and fatherhood: An exploration of same-sex parents’ experiences and construction of their parenting roles

Jenine M. Giles

Edith Cowan University

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Deconstructing Motherhood and Fatherhood: An Exploration of Same-Sex Parents’ Experiences and Construction of Their Parenting Roles

Jenine M. Giles

A Thesis Submitted in Partial Fulfilment of the Requirements for the Award of Doctor of Philosophy

School of Arts and Humanities, Edith Cowan University

Submitted November, 2022
Abstract

Dominant discourses regarding motherhood and fatherhood are entrenched in Australian culture and are often implied during public discussions of families with same-sex parents. Using a post-structuralist approach, this project aimed to identify how parents in same-sex relationships experience and construct their parenting roles through combinations of dominant and alternative discourses of families, motherhood, and fatherhood. Following ethics approval, participants were recruited primarily through communication with Australian LGBTQIA+ community organisations and publications. Twenty-nine respondents each participated in one one-on-one semi-structured interview, which was audio- and video-recorded with their consent. The participants were eighteen years of age or older, in a monogamous, same-sex relationship, and identified as a parent of the child or children in their care. I used a combination of thematic analysis and Feminist Post-structuralist Discourse Analysis to inform the transcription process, identify themes and discourses present in the data, and how the discourses interacted with one another. I identified five themes; these related to participants’ parenting journeys, how they came to their parenting roles, participant-identified differences to different-sex parented families, sources of support, and challenges that participants’ families faced. Within these themes and throughout the transcripts, dominant, feminist, and queer theory discourses of motherhood, fatherhood, and families variously aligned with participants’ experiences, or were actively rejected. Whilst acknowledging the diversity of participants’ experiences and considering the ways in which they engaged with dominant and alternative discourses of motherhood, fatherhood, and parenting, I proposed an emergent discourse of parenting in which a family may have up to two parents of any combination of genders, who may or may not have similar roles but who ultimately work as a team with an equitable division of labour, and who may create their family in many equally accepted ways. It is anticipated that this research will advance current understandings of families and parenting, and that the findings will be used to inform policy, practice, and improve same-sex families’ access to services.
Copyright and Access Declaration

I certify that this thesis does not, to the best of my knowledge and belief:

i. incorporate without acknowledgment any material previously submitted for a degree or diploma in any institution of higher education;

ii. contain any material previously published or written by another person except where due reference is made in the text of this thesis; or

iii. contain any defamatory material

Jenine M. Giles

29/04/2023
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Thank you also to my family and friends who have supported me throughout project; your kind words and gestures throughout this journey have helped keep me going. Lastly, special thanks to my husband, not just for the innumerable cups of tea throughout this process, but for your constant belief in me and pushing me to complete this work. For this I am truly grateful.
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<th>Term</th>
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<tbody>
<tr>
<td>ART</td>
<td>Abbreviation for Assisted Reproductive Technology.</td>
</tr>
<tr>
<td>Assisted Reproductive Technology</td>
<td>Treatments or procedures used to address infertility.</td>
</tr>
<tr>
<td>Birth Mother</td>
<td>A person who gives birth to a child. They may or may not raise the child.</td>
</tr>
<tr>
<td>Blended Family</td>
<td>A family in which one or more of the parents, who are in a relationship with each other, is also a parent to a child or children from a previous relationship. This term is preferred to ‘stepfamily’ as the latter term focuses on the stepparent-stepchild relationship and fails to acknowledge the complex additional relationships in such a family.</td>
</tr>
<tr>
<td>Different-Sex Family</td>
<td>A family in which there are two parents, who are different genders from each other.</td>
</tr>
<tr>
<td>Discourse</td>
<td>In a group of utterances or texts which appear to have some common coherence and understandings, a discourse comprises of these common understandings, and has real-world effects.</td>
</tr>
<tr>
<td>Dominant Discourse</td>
<td>A discourse which is used by the dominant group within a culture which attempts to control people and appears to be the point of reference for all other lines of thought.</td>
</tr>
<tr>
<td>Donor</td>
<td>One who donates their sperm or ova to another person or couple, with the understanding that the recipient will attempt to use the donated material to conceive a child. Any resulting offspring are considered the recipient’s children.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
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</tr>
<tr>
<td>Feminist Post-Structuralist Discourse Analysis</td>
<td>A form of discourse analysis which aims to identify the multiple discourses present in interaction, and how these discourses combine and contradict one another.</td>
</tr>
<tr>
<td>Foster Child</td>
<td>A child who is living with adults other than their biological, social or adoptive parents.</td>
</tr>
<tr>
<td>Foster parent</td>
<td>An adult who is caring for a child who is not their biological, social or adoptive child.</td>
</tr>
<tr>
<td>FPDA</td>
<td>Abbreviation for Feminist Post-Structuralist Discourse Analysis</td>
</tr>
<tr>
<td>Gamete donation</td>
<td>The donation of one’s sperm or ova to another person or couple, with the understanding that the recipient will attempt to use the donated material to conceive a child. Any resulting offspring are considered the recipient’s children.</td>
</tr>
<tr>
<td>Heteronormativity</td>
<td>The assumption that heterosexuality is the norm. Heteronormativity is a social organising principle and a system of privileging heterosexuality over other sexualities. In this regard, it can be thought of as a dominant discourse of sexuality, in which heterosexuality is considered normative.</td>
</tr>
<tr>
<td>IUI</td>
<td>Abbreviation for intrauterine insemination. In this fertility procedure, sperm that have been washed and concentrated are inserted into a person’s uterus at the time of ovulation.</td>
</tr>
<tr>
<td>IVF</td>
<td>Abbreviation for in vitro fertilisation. In this fertility procedure, an egg is fertilised outside of the body and the resulting embryo is then implanted into a person’s uterus.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Heterosexism</td>
<td>A prejudiced attitude or discriminatory practices towards non-heterosexual people, perpetuated by heterosexual people.</td>
</tr>
<tr>
<td>Known donor</td>
<td>A donor whose identity is known to the recipient(s).</td>
</tr>
<tr>
<td>Monogamous</td>
<td>Of a romantic relationship which includes two people, who do not have other partners.</td>
</tr>
<tr>
<td>Polyamorous</td>
<td>Of a relationship which includes two or more people, who may or may not have other partners.</td>
</tr>
<tr>
<td>Reciprocal IVF</td>
<td>An ART technique in which a female same-sex couple uses one partner’s ovum to conceive a child through IVF, with the resulting embryo implanted into the other parent.</td>
</tr>
<tr>
<td>Social mother</td>
<td>In a female same-sex couple, a social mother is the parent who did not become pregnant and give birth, but still parents her child.</td>
</tr>
<tr>
<td>Stepparent</td>
<td>The partner of a person who had a child or children before commencing the relationship. This term is used to describe the relationship between such a child and their parent’s partner.</td>
</tr>
<tr>
<td>Surrogacy arrangement</td>
<td>An arrangement for a woman to become pregnant and give birth to a child and for people other than the birth mother to raise the child.</td>
</tr>
<tr>
<td>Thematic analysis</td>
<td>A method of analysing qualitative data, with the aim to identify common themes and subthemes.</td>
</tr>
<tr>
<td>Unknown donor</td>
<td>A donor whose identity is not known to the recipient(s).</td>
</tr>
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Chapter 1: Introduction

I have come to this research topic through my own observations and experiences of families, and the roles that parents and other adults in these families assume. As a child growing up in suburban Australia in the ‘90s, dominant discourses of what families ‘should’ look like (and what roles mothers and fathers do in these families) were everywhere; I only ever knew a family to have both a mother and father. Of course, there were many depictions of single parents and children being raised by other family members in the fiction books I read, but in my mind, they were separate from the world I lived in. In my early 20s, I became a stepmother. For the first time in my life, I did not have a clear concept of what my role ‘should’ entail – the ambiguity of the role and my curiosity regarding this topic led me to my Honours project with other stepmothers.

As a bisexual person, I have often wondered what co-parenting would look like if I was in a relationship with someone of the same gender of myself, and how roles and duties would be decided in the absence of the mother-father family template. Considering ways in which mothers and fathers are expected to contribute to their families based on gender, led to more questions about parenting in same-sex relationships; I began to wonder what roles same-sex parents engage in, and how parents determine their roles.

Terminology

Before considering these questions, it is necessary to explain some of my terminology choices. Whilst the terms ‘lesbian mothers’ ‘gay fathers’ and ‘heterosexual parents’ are widely used in publications regarding this topic (e.g. Gartrell et al., 1996; Goldberg, 2006; Goldberg et al., 2018; Koenig Kellas & Suter, 2012; Ripper, 2009), I realise that parents in any family configuration may identify with any sexual orientation. For this reason, I decline to use the terms 'lesbian mothers' or 'gay relationship' or similar terms, as parents in same-sex relationships may identify with sexualities other than lesbian or gay. Therefore, I will refer to these families as same-sex families, and parents in these families as same-sex parents, and those with different-sex parents as different-sex families.
The terms 'mothers' and 'fathers' are consistently used in the literature to refer to female and male parents respectively. Gibson (2014) notes that there may be self-identified queer women who parent, but who do not identify with the word ‘mother’. Whilst parents in same-sex relationships may identify with parental roles other than, or in addition to traditionally understood roles of 'mother' and 'father', many authors and researchers in this area appear to be trapped by these terms; it is difficult to find terms for parents who identify outside of the 'mother/father' binary.

I acknowledge the variety of parenting titles present in the LGBTQIA+ community, however, it is not the focus of this piece of work. The terms ‘mother’ and ‘father’ are consistently used in previous publications to refer to female parents and male parents respectively; I will therefore continue to use these terms within this paper to remain consistent with existing literature.

**The Significance of the Study**

This study will contribute to existing knowledge of what roles parents in same-sex families participate in, factors contributing to decisions regarding these, and explore the ways in which parents in same-sex relationships think about their parenting roles from a discursive perspective. This is significant as previous research regarding families with same-sex parents has mostly focused on children's outcomes (as discussed in Chapter 2). In contrast, the present research aims to focus on the experiences of parents in same-sex relationships and to determine how dominant and alternative discourses of motherhood, fatherhood and parenting shape these experiences and their parenting roles. In addition, the postmodernist framework of the project will allow many discourses and viewpoints to be presented, including their tensions and contradictions. This will lead to a more accurate narrative of how participants conceptualise and construct their parenting roles. Lastly, the study may also inform policy and practice concerning parenting in general as well as in same-sex families and contribute to the development of more inclusive family services and programmes for parents.
Chapter 2: Literature Review

Same-sex parenting and families may be studied using many theories and perspectives within the disciplines of psychology and social science. I am interested in the way that language, particularly discourses, shape reality, and how these influence a culture’s understanding of social phenomena. For this reason, I have chosen to focus the present chapter on the various discourses surrounding motherhood, fatherhood and families, and how these can combine and contradict one another to shape the roles that parents undertake in same-sex parented families. I will also describe how role theory is connected to these concepts and supports the dominant discourse to prescribe parents’ roles. This chapter will begin by examining literature concerning same-sex families, before outlining the ways in which dominant discourses, feminist discourses, queer theory discourses and the intersections of these conceptualise families, motherhood, and fatherhood.

What Constitutes a Family?

Families can be incredibly diverse, and may take many forms (Aguilar, 2013; Brunsma, 2005; Santorius, 2004). The Australian Bureau of Statistics (ABS) defines a family as, “Two or more related people who live in the same household. This includes all families such as couples with and without children, including same-sex couples, couples with dependants, single mothers or fathers with children, and siblings living together. At least one person in the family has to be 15 years or over.” (ABS, 2021). However, this broad definition differs from the Australian cultural ideal, often expressed by prominent Australian lawmakers and politicians, who repeatedly state that marriage is between a man and a woman (McEvoy, 2017), and that biological ties alone make a family (Katz & Hunt, 2014).

This ideal seems to be that a nuclear family consists of a mother and a father and does not allow for families headed by two men or two women. This is reflected in an amendment to the Marriage Act (Marriage Amendment Act 2004, 2004), which was worded specifically to exclude same-sex couples in Australia from becoming legally married. Although an additional amendment to the Marriage Act has made same-sex marriage legal in Australia ("Marriage amendment (Definition
and religious freedoms) Act 2017," 2017), there are residual negative views of same-sex couples entering this institution and parenting children together (Giesler, 2012), and it is notable that the Australian Prime Minister at the time of writing, Scott Morrison, chose to abstain from voting to permit same-sex couples to marry in 2017 (Kinsella, 2017).

This narrow understanding of a family is clearly reflected in common images of this social structure. A Google image search for ‘family’ suggests that a family is typically conceptualised as two different-sex parents and two children (Figure 1). Whilst grandparents and other relations are categorised as family, the primacy of the child’s two parents is widely accepted (Bruno, 2014; Fan et al., 2012; Sayres, 1992)

Figure 1. Google Image search for ‘Family’, March 2022. Most images depict a family as consisting of two different-sex parents and two children.

Common understandings of families also prescribe how family members are to interact with one another depending on their position within the family and other factors. A common sentiment is that family members help one another (Burg, 1999), and that the nuclear family is the basic social unit of society (Bennett, 2012; Walsh, 2016).
The ‘ideal’ nuclear family does not reflect the diversity of Australian family forms and ignores their cultural and sexual variations. Specifically, families with two same-sex parents, their specific challenges, thoughts, feelings, and how they come to their parenting roles are overlooked within common cultural understandings of what a family is. In the present research with same-sex families, I will use these prevailing images and notions of what a family is to inform my research by providing a social context for the parents who I talk to.

I will be using postmodernism as my theoretical framework, as described in detail in Chapter 3. Context is a major component of postmodernist thought, as understanding the wider social environment of individuals and events is crucial to understanding the reality of the phenomenon in question (Grbich, 2004). In this sense, understanding the present social climate is critical to understanding the experiences of the parents in same-sex relationships whom I interviewed.

**Same-Sex Families**

In Australia, families headed by same-sex parents are increasing in number and visibility (ABS, 2021; ABS, 2013; Dempsey, 2013); a comparison of Australian Census data from 2021 and 2011 demonstrates that the number of same-sex couple families has trebled within a decade (ABS, 2013; ABS, 2021). Legal recognition of and support for these families vary nationally and internationally (Roseneil et al., 2013; Saez, 2011), with some policies and campaigns based on the premise that same-sex parented families are sub-standard for children (Power, 2017; Millbank, 2003). This often results in parents in same-sex relationships fulfilling their parental roles within a heteronormative, homophobic atmosphere (Giesler, 2012), and facing challenges such as discrimination when attempting to access rental housing for their families (Lauster & Easterbrook, 2011).

Many same-sex couples without children face obstacles to becoming parents. Besides the obvious biological obstacles, many Australian same-sex couples face challenges when attempting to adopt children (Ripper, 2009; Saez, 2011). Australian same-sex couples have only been permitted to adopt children in all Australian jurisdictions as recently as 2018 (Gawthorne, 2018). However,
Australian local adoptions are extremely rare; only 42 such adoptions took place in 2018-2019 (Australian Institute of Health and Welfare [AIHW], 2019b). In addition, only two countries outside of Australia accept applications for Australian same-sex couples to adopt internationally (Intercountry Adoption Australia, 2020; Thinking About Adoption?, 2018).

Known adoptions, where the child is known to the adoptive parents prior to adoption, are far more common than local adoptions (AIHW, 2019a). Known adoptions usually involve the adoption of a family member or the adoptive parents’ foster child (AIHW, 2019a). In the latter cases, the parents will have had to negotiate the foster care system, which can be a complex and lengthy process (Department of Communities, 2020), prior to embarking on their adoption journey. Whilst foster care can sometimes lead to permanent placements or adoption, foster care agencies may oppose same-sex relationships and therefore decline applications from same-sex couples (Australian Psychological Society, 2020). Foster care is also most commonly a temporary arrangement (Panozzo et al., 2007; Tsang et al., 2005) with the eventual goal of the child’s reunification with their birth family (Boyle, 2015; Taplin, 2005).

Same-sex couples in Australia and abroad may also face barriers to accessing surrogacy (Adams & Persinger, 2013; Australian Psychological Society, 2018; Ripper, 2009) or sperm donation (Engström et al., 2018; Epstein, 2014; Assisted Reproductive Technologies Review Committee, 2006) as paths to parenthood, although sperm donation is one of the most common ways in which women in same-sex relationships become parents (Bos & Hakvoort, 2007). In addition to these difficulties with regards to becoming a parent for the first time while in a same-sex relationship, many parents in same-sex relationships who first had children in the context of a previous, different-sex relationship often experience difficulties retaining contact with their children following a relationship breakdown (Chesler, 2011; Fraser et al., 1995; McCauley, 2014; Smith, 2010), and may experience backlash from their families of origin concerning their ‘coming out’ to their children (Power et al., 2012).
Much of this prejudice facing same-sex parents concerns these parents’ perceived ability or inability to provide a suitable environment in which to raise children. For example, although attitudes towards same-sex parent families have been improving in recent years (Perales & Campbell, 2018; Webb et al., 2018), a persistent belief among some Western cultures is that children need both a mother and a father for optimal development (Crouch, 2015; Johnston, 2018; Redding, 2008; Webb et al., 2018). Within this belief system, same-sex couples create an environment which is not conducive to this development. These cultural beliefs regarding families have led to same-sex families facing a social stigma (Webb & Chonody, 2012; Weber, 2011), that puts their children at risk of being bullied at school and in other social settings (Ryan, 2012; Trub et al., 2017). However, same-sex families tend to be resilient despite these challenges (Prendergast & MacPhee, 2018), although parents may also experience stress due to their minority sexuality and family composition (Mosovsky et al., 2016), which can to some parents feeling the need to justify their parenting decisions (Koenig et al., 2012).

Much literature regarding same-sex families has attempted to address this controversy by focusing on outcomes for children from different-sex and same-sex families (Bos et al., 2016; Millbank, 2003; Wainright & Patterson, 2008). These studies have found that children with same-sex parents fare similarly to their peers with different-sex parents in academic settings (Potter, 2012), social development (Wainright & Patterson, 2008), parent-child relationships (Bos et al., 2018), and wellbeing (Bos et al., 2018; Few-Demo et al., 2016; Manning et al., 2014), with disparities in child wellbeing and child externalising problems due more to familial changes and instability, rather than a same-sex family structure (Bos et al., 2016; Potter & Potter, 2017).

Additionally, children adopted by same-sex parents and different-sex parents fare similarly in terms of psychological adjustment (Goldberg & Smith, 2013) and in levels of emotional and behavioural problems (Averett et al., 2009). Children in a kinship-family configuration with many same-sex attracted parents also fare similarly on scores of wellbeing and father-child relationship as their peers with two different-sex parents (Bos, 2010). Children with same-sex parents may also
have more accepting attitudes towards diversity and difference than children with different-sex parents (Epstein, 2005; Hays & Samuels, 1989; Perlesz & McNair, 2004), which many same-sex parents consider to be a strength of their family (Perlesz & McNair, 2004). Another strength noted by same-sex parents with regards to their families is that the parents commonly share an egalitarian division of labour (Perlesz et al., 2010), which has also been reflected in Australian census data of same-sex families (ABS, 2013).

Despite these positive outcomes for children of same-sex parents, many adult children from such families feel pressure to defend their upbringing, to prove that they turned out “all right” (Epstein-Fine & Zook, 2018). Titlestad and Pooley (2014) noted that the participants in their study, adult children of same-sex parents, tended to choose which of their parents’ parenting behaviours to disclose to peers to portray them in a more positive light.

Same-sex families have also been studied in terms of family formation (Dempsey, 2013; Power et al., 2010). In the ‘Work, Love, and Play Study’, as it has come to be known (Power et al., 2010), the authors note six major family formations within queer families, which vary in terms of the number of parents and parental involvement. These include a two-parent model; known donor involvement in a non-parental role; co-parenting with an ex-different-sex partner; co-parenting with an ex-same-sex partner; sole parent; and multiple parenting, in which more than two parents are actively involved from birth (Power et al., 2010, p. 73). Each of these family types have their own challenges and strengths, such as parents in stepfamilies experiencing lacking clear guidelines for how they fit within their families (Boss, 2006; Jenkins, 2013). The multiple parenting, or kinship model (Bos, 2010) has been investigated in terms of gay sperm donors’ notions of relatedness to the children they helped create, with researchers finding a sense of connection to these children without a sense of parental entitlement (Dempsey, 2012).

As the present study explored the experiences and roles of parents in same-sex relationships, the above literature will inform whether the findings of the present study support those of previous research. As previous studies in this field have noted the challenges and
experiences of parents in same-sex relationships, I will compare these findings with those of the present study.

**Female Same-Sex parents and Their Families**

As Gibson (2014) notes, far more scholarly attention has been paid to same-sex mothers and mothering than to same-sex fathers and fathering. This may be partially due to the much higher proportion of female same-sex couples who have children than male same-sex couples. In the most recent Australian census data available, eighty-nine percent of children living in same-sex couple families were in female same-sex couple families (ABS, 2013), despite many of these couples facing obstacles to becoming parents (Brown et al., 2009; Patterson & Riskind, 2010).

The literature regarding female same-sex parents often compares biological mothers and social mothers (e.g., McKelvey, 2014; Paldron, 2014; Zamperini et al., 2016), hinting at dominant discourses of motherhood being biologically based (Sosnowska-Buxton, 2014). The role of the non-birth mother is sometimes compared to the role of a father in different-sex couples, with Tasker (1999) finding that non-birth mothers play a more active role in ongoing caregiving than most of the fathers in different-sex families. McKelvey (2014) noted six themes in relation to nonbirth mothers in same-sex relationships, one of which was that the non-birth mothers in their study defended themselves as mothers - having to “fight for every piece of motherhood”. The participants also commented on their unique role being different to that of a birth mother and that breastfeeding was the only major difference between their and the birth mother’s roles (McKelvey, 2014).

The theme of having to fight for motherhood is common in countries and territories in which the non-birth mother is not automatically granted parenting rights and must apply for second parent adoption. These laws can vary from country to country (Malmquist, 2015), and even within Australia, where different states and territories have different laws relating to the nonbiological mother’s recognition as a legal parent of her child (Human Rights and Equal Opportunity Commission, 2007). For example, under federal law, only the birth mother of children born via assisted reproductive technology is considered the children’s legal parent, but in the state laws of
Western Australia, the ACT, and the Northern Territory, both the birth mother and her female partner are presumed to be the child’s legal parents (Human Rights and Equal Opportunity Commission, 2007). Female same-sex parents commonly deem the process of adopting their child to be crucial for their families (Malmquist, 2015), and for their continuing relationship with their children should their relationship with their partner break down (Butterfield & Padavic, 2014). The difficulty of this process varies depending on the local laws; a recent court case in Northern Ireland refused to declare a social mother as the child’s parent, citing a legislative prohibition based on the couple’s civil partnership status (Erwin, 2022).

The above literature will inform my research as the current study explored the roles of parents in same-sex relationships, and participants in my research may have had similar experiences.

**Male Same-Sex Parents and Their Families**

As noted above, only eleven percent of Australian same-sex families are headed by a male couple (ABS, 2013a). One of the reasons for this is that at the time of writing this paper, Australia has different, complex laws regarding surrogacy in each state and territory. In Western Australia, for example, surrogacy is only legal when it is altruistic (without monetary gain for the surrogate) and used for different-sex couples or single women who are unable to conceive or carry a child to term (Surrogacy Act 2008, 2008). In this regard, all surrogacy arrangements in Western Australia that same-sex couples enter are illegal. For many male same-sex couples wishing to have children, one of their few options to have biological children involves the costly process of using a surrogate overseas. This option remains inaccessible to many couples due to its financial cost.

In part due to these challenges related to family formation and there being far fewer male same-sex parents than female same-sex parents, little research has been devoted to male parents in same-sex relationships when compared to the amount of literature regarding female parents in same-sex relationships (Miller et al., 2017). Existing literature in this field generally shows positive outcomes for children and parents in these families. For example, male same-sex parents tend to divide household labour and childrearing tasks equitably (ABS, 2013; Feugé et al., 2019; Tornello,
Kruczkowski, & Patterson, 2015; Tornello, Sonnenberg, & Patterson, 2015). Furthermore, male parents in same-sex relationships also show more warmth as parents, interact more with their children, and are more responsive to their children than their counterparts in different-sex relationships (Golombok et al., 2014), with a meta-analysis by Miller et al. (2017) suggesting that children adopted by male same-sex parents may experience better psychological adjustment than their peers in different-sex families.

Because there is a stigma attached to having a child as a male same-sex couple (Crawford et al., 1999; Gato & Fontaine, 2013), such couples may be better prepared for parenthood than their different-sex counterparts (Miller et al., 2017). In addition, because of the difficulty in initially becoming a family, male same-sex parents may experience a stronger parental role, and in turn, more meaning in their lives (Shenkman & Shmotkin, 2016) and increased closeness with their families of origin (Power et al., 2012).

I will use this literature to justify the selection of participants in the current study, as there are far fewer male parents in same-sex relationships than female parents in same-sex relationships in the Australian population.

**Ideology, the Dominant Discourse and Role Theory**

Ideology in its present form began with Marxism (Howarth, 2000), at which time it was thought to be interfering with the 'true order of things' as it emphasised the perspectives of individuals as opposed to a grand meaning outside of their experiences (Jones, 2006). An ideology, according to Foucault, embodies several concepts, and is culture-specific (Danaher et al., 2000). A group within a culture may uphold such a collection of ideas and meanings, which are relevant to the group in question (Danaher et al., 2000). Hawkes (2003) identifies ideology as “a systematically false consciousness”, referring to the each of the many ideologies in existence as presenting only one version of reality. Stemming from this concept of ideology is the notion of a dominant ideology, that is, a group of ideas which are held in the highest esteem by members of a culture (Hawkes, 2003). In turn, other ideologies are nestled within the respective discourses in which they arise, as the ideas
and meanings shared by a group necessarily inform how that group shares information (Hawkes, 2003).

There are nearly as many discussions and definitions of discourse as there are discourses themselves (Jaworski & Coupland, 1999). Foucault (1972) proposed three definitions of the term ‘discourse’; 1) as the general domain of all statements; 2) as an individualisable group of statements; and 3) as a regulated practice which accounts for a number of statements. These have been understood by Mills (1997) as meaning 1) all utterances or texts which have real-world effects can be understood to be discourses; 2) discourses may be identified by grouping utterances or texts which appear to have some common coherence and understandings; and 3) discourse is to do with the rules which govern the utterances or texts, respectively. Other authors (Renkema, 2004) have adapted Foucault’s first definition to term any utterance a ‘discourse’, with emphasis on how the meaning is interpreted and the various symbol systems used in the speech.

The dominant discourse can be identified not only through its use by the dominant group, but also through its attempts to control, and its appearance within a culture as being the point of reference for all other lines of thought (Raiter, 1999). It can be thought of as an axis, with the dominant discourse at the centre and all other forms of discourse given a rating of validity based on how far they stray from this axis (Raiter, 1999). Thus, far from excluding all other discourses, the dominant discourse includes them and gives them value based on this classification system (Raiter, 1999).

Role theory is intricately tied to the notion of dominant discourses. According to these theories, roles are patterns of behaviour which are organised according to social expectations of the individual and of significant other people in a person’s life (Mangus, 1957). Although Mangus (1957) presents a rigid understanding of sex and gender when compared to 21st century standards, they note that some roles – such as that of a mother or father – are clearly defined. These ‘clear definitions’ seem to be similar, if not identical to dominant discourses of these roles, demonstrating their pervasiveness and status as their position as the ‘correct’ way of observing a phenomenon.
Using the above definitions of discourses, the following sections will describe dominant discourses of motherhood, fatherhood, and families, before exploring alternative discourses of these notions. I will use these discourses when analysing my data by identifying which discourses are present in participants’ utterances. Awareness of what each of these discourses entails is critical to their identification during data analysis.

Dominant Discourses of Motherhood

Dominant discourses of motherhood start with childbirth (Malacrida & Boulton, 2012; Marshall, 1991). These discourses are often contradictory, with the "ideal birth" regarded as simultaneously medicalised, natural, and woman centred (Malacrida & Boulton, 2012). Dominant discourses also prescribe the ideal circumstances in which women are to become mothers, how mothers are to experience motherhood, and how mothers are to relate to their children and partners (Marshall, 1991). For example, Grant (1993) points to mothering theorists who assert that motherhood is the pinnacle of female experience, that it strengthens femininity and is necessary and transformative. According to the dominant discourses present in childrearing manuals from the late 1980s, a woman is to become a mother between the ages of twenty and forty, by her husband, within a monogamous, heterosexual relationship (Marshall, 1991). Dominant discourses also dictate which behaviours are expected of mothers, and which behaviours mothers are expected to refrain from. Caring behaviours, such as emotional availability, and meeting a child's hygiene, toileting, and feeding needs are often considered mothering behaviours (Doucet, 2006). Conversely, some dominant discourses deem women incapable of work (Oliver, 2005), which the discourse presents as paid employment alone (Managhan, 2005).

According to dominant discourses of families, children need mothers in their upbringing, but can only have one ‘real’ mother; Park (2013) refers to this as ‘monomaternality’. This is evidently impossible in two-mother families, and not always possible in male same-sex families. In their edited book entitled “Bad Mothers”, Hughes Miller et al. (2017) describe the myriad of categories that, within the dominant discourse, women are thought of as ‘bad mothers’; these include those...
who are non-heterosexual. According to these discourses, women who are in same-sex relationships are not ideal mothers as they forgo many of the ideal circumstances of becoming mothers; they are not in a different-sex relationship, may not be married depending on their location and other factors, and the child may or may not be biologically related to their parents.

One of the aims of the current research is to identify how various discourses shape the roles and experiences of parents in same-sex relationships. I will use these dominant discourses in this study by identifying whether they are present in participants’ reports of their parenting experiences and roles, and how they have an impact on participants’ notions of motherhood, fatherhood, and parenting.

**Dominant Discourses of Fatherhood**

Fatherhood is primarily thought of as a provider and disciplinarian role (Freeman, 2004; Paschal et al., 2011; Schindler & Coley, 2007; Shreffler et al., 2011), and any primary caregiving must necessarily be accompanied by dominant forms of masculinity (Petroski & Edley, 2006). There does seem to be a dominant discourse that 'being there' for children is important (Edin & Nelson, 2013), which usually refers to fathers who were originally in a different-sex relationship staying in that relationship with their children's other parent (Collison, 1999; Flood, 2008), as his parenthood is thought to be dependent on this adult relationship (Cowan et al., 2010). As such, fatherhood is generally discussed within the context of the child’s other parent (Baum, 2004), and has been described as a 'package deal' (Townsend, 2002) with a father’s role in their children's lives largely determined by the attitude of the children's mother in different-sex families (Furstenberg & Cherlin, 1991; Tach et al., 2010).

Following this notion of fatherhood being discussed within the context of co-parenting, many discussions of fatherhood revolve around how to "reintegrate" the father into the family (Collison, 1999), as much of the fatherhood literature focuses on divorced, unmarried, or single fathers (DeGarmo & Forgatch, 2012). There is thus a dominant discourse that families need to 'stick together', that children somehow grow up 'better' with both of their (different-sex) parents in the
same household (Flood, 2008). This notion that a father's involvement with his children is largely mediated by the children's mother is also implied by Cowan et al. (2010), who propose supporting the father's relationship with his children's mother to support his relationship with his children. In this sense, fathering within a different-sex parented, nuclear family is tacitly supported as the only 'right' way to father according to these dominant discourses.

Some authors have asked fathers directly what fatherhood means to them, usually in the context of discussions of masculinity (Schindler & Coley, 2007). These studies offered several perspectives, the most common of which was the notion that a father must provide financially for his family (Paschal et al., 2011; Schindler & Coley, 2007; Shreffler et al., 2011) and be able to provide for his family's material needs (Shirani, 2013). However, paid employment can often lead to difficulties with men's fathering role, with some fathers not being as involved in their parenting role as they would like (Shreffler et al., 2011). Some fathers offered alternative views on fatherhood, including the notions that being emotionally involved and available with their children and their physical presence as being important to the role (Paschal et al., 2011).

Recent literature has posed questions regarding the validity of conceptualising fathering behaviours separately from mothering behaviours (Fagan et al., 2014). Palkovitz et al. (2014) proposed that this is partially due to the presence of a maternal template against which paternal behaviours are measured, with no similar template of fatherhood. Therefore, according to dominant discourses of fatherhood, the role of the father is primarily to provide for their children financially (Palkovitz et al., 2014; Paschal et al., 2011).

According to these dominant discourses regarding fatherhood, families with male same-sex parents can occasionally fit within these discourses. For example, the dominant discourse of the father fulfilling a provider role can be met in many male same-sex families, where both parents work outside the home. In addition, fathers in same-sex relationships may engage in caregiver roles, but according to dominant discourses on fathering, they must not allow this to become their primary parental role.
I aim to explore these notions of fatherhood further with my current research. The identification of dominant discourses of fatherhood are important to my analysis as they may be present in the ways that participants describe their own and their partner’s parenting roles.

**Feminist Discourses of Motherhood and Fatherhood**

It is important to note that there is no unified feminist theory of motherhood or fatherhood, but rather multiple perspectives which may be regarded as feminist. These perspectives unite in offering a response to the dominant discourses of motherhood and fatherhood.

Feminist theories of motherhood tend to discuss the concepts of motherhood and fatherhood as separate entities, with 'parenthood' being synonymous with 'motherhood' to some feminist authors (Phoenix et al., 1991). These authors seem to consider mothers' contribution to the family alone (Arnott & Brown, 2013), and equate childrearing with motherhood (Chodorow, 1978). Other feminist authors have decried the institution of marriage and family life altogether for women, with motherhood thought of as oppressive, equivalent to a lure or trap (Ford, 2009; Rich, 1992).

One feminist author who synthesises these conflicting perspectives is Simons (1984), who stresses that reproductive rights refers to the right to have children, as well as the right to decide not to, and the woman making the choice should not have to defend her decision. Simons (1984) uses a postmodernist framework by examining various dominant discourses surrounding this choice throughout history through the socio-historical lens of that time, before asserting that each woman has a unique experience which makes her reproductive choices applicable to herself alone.

In contrast to some dominant discourses of motherhood and mothering which suggest that women are incapable of work (meaning paid employment alone) (Managhan, 2005; Oliver, 2005), some feminist discourses of this institution do consider motherhood and childrearing to be a form of work (e.g., Maher, 2004). Maher (2004) describes motherhood as a trade – a set of skills learnt 'on the job' through living as a mother. In this way, Maher (2004) repositions motherhood as work, equal to paid employment in its importance and contribution to the family.
Diduck (1993) wrote a key postmodern perspective of motherhood, in which she examined multiple factors related to ideologies of motherhood and explained how many discourses and the interactions of these discourses go to shape these ideologies. Many perspectives on motherhood, including feminist perspectives, science, psychology, sexuality and ethnicity were described as interwoven along with other discursive 'strands' to form a complex tapestry of motherhood, which is only appropriate for the era from which it arises (Diduck, 1993).

These feminist perspectives of mothering and motherhood appear to be much more flexible than dominant discourses when considering same-sex families. Within feminist theories of mothering, mothers are free to choose the parenting roles they feel are necessary, rather than those which they are pushed to fulfil according to their gender.

Feminist theories regarding fathering and fatherhood generally acknowledge that fathers' roles have been changing over time to consider the nurturing role that fathers can fulfil in their children's lives (Everingham & Bowers, 2006). Feminist theories also comment on what to term this nurturing role if it is performed by a male parent and suggest that parents are the best judge of the terms to apply to their parenting (Doucet, 2006). These theories are useful when considering parents in same-sex relationships, as these parents may identify outside of the mother/father binary in their parenting roles. For example, in their discussion of queer parenting, Dozzi (2014) uses the term 'mothering' to describe the daily process of caring for and nurturing children (p. 137), in addition to identifying as a transgender, masculine female.

Feminist perspectives sometimes appear in fatherhood literature, for example, Flood (2008) notes that feminism can help support men and fathers. Wolfe et al. (1999) elaborate this notion by explaining that the equality of women and men and egalitarian partnerships of parents are considered a cornerstone of feminism, and that fathers have many roles in their families alongside that to contribute financially. The authors also propose reconstructing 'fatherhood' and 'motherhood' to make these constructs role-specific rather than gender-specific, which is a topic I aim to explore with my research.
The above feminist discourses of motherhood and fatherhood will help inform my analysis. I will note the discourses present in the way the participants describe their parenting roles and experiences, using the above literature regarding feminist discourses to aid my identification of these discourses.

**Queer Theories of Families, Motherhood and Fatherhood**

Jagose (1996) is oft quoted in queer theory literature for noting that;

> Once the term ‘queer’ was, at best, slang for homosexual, at worst, a term of homophobic abuse. In recent years ‘queer’ has come to be used differently, sometimes as an umbrella term for a coalition of culturally marginal sexual self-identifications and at other times to describe a nascent theoretical model which has developed out of more traditional lesbian and gay studies.

This ‘theoretical model’ which Jagose (1996) describes and would later be termed queer theory, is so broad that some authors have declined to define it and are more concerned with what these theories do (e.g., Sullivan, 2003). Indeed, in a series of questions regarding the nature of the word ‘queer,’ Morland and Willox (2005) contemplate whether ‘queer’ is something that one does or is something that one is. ‘Queerness’ is also a reclaimed term used to denote one’s strangeness positively (Sullivan, 2003).

Despite the ambiguities in the term ‘queer’ as described above, other authors have attempted to define queer theory and outline its aims. One of these aims is to reread literature and film (Namaste, 1996), and social conventions and institutions from a queer perspective (Stein & Plummer, 1996). An additional aim is to consider how same-gender relationships are represented in these (Edwards, 1998; Sedgwick, 1985). In these senses, a queer reading of the institutions of family, parenthood, motherhood and fatherhood would consider non-heterosexual people as parents, what these families look like, how they operate, and how they speak to and against
dominant discourses of family and parenthood. A queer reading may also consider how these institutions would appear to non-heterosexual people; one queer theory discourse regarding families is that queer couples can and do form families (Sardadvar & Miko, 2014). However, it is important to note that some queer theory authors find the term ‘queer parenting’ to be oxymoronic (Gibson, 2014; McClellan, 2001; Park, 2013), as these terms are sometimes considered antonyms (Gibson, 2014). These models aim to determine what is ‘queer’ in queer families Central to queer theories is the notion of heteronormativity, a term coined by Ingraham (1996) (Pringle & Giddings, 2011).

Heteronormativity is a social organising principle (Green, 2002) and a system of privileging heterosexuality over other sexualities (Oswald et al., 2011). In this regard, it can be thought of as a dominant discourse of sexuality, in which heterosexuality is considered normative. Oswald et al. (2011) proposed that there are three binaries which operate to maintain heteronormativity. These include the gender binary, in which “real” males and females are contrasted with people who do not conform to gender stereotypes; the sexuality binary, which regards heterosexuality as “normal” or “standard” and other sexualities as “unnatural”; and the family binary, in which biological, two different-sex parented families are “genuine” families and other forms of families are “pseudo” families. This is evident in Clarke and Kitzinger’s (2004) study of same-sex parents in talk shows, where the parents in question are presented as ‘other’ and are demanded to prove their family’s normality, or similarity to the dominant discourse of how a family should be configured, and the participants in another study were reminded of their place in the heteronormative hierarchy by microaggressions from other people regarding their parenting and their children’s development (Vinjamuri, 2015). By refusing to privilege Oswald and colleagues’ (2011) heterosexual and family binaries over their own sexualities and families, parents in same-sex relationships therefore reject heteronormativity (Yep et al., 2014).

Oswald et al. (2011) also discussed the concept of ‘queering processes’, which refer to acts and ideas which resist heteronormativity by challenging the gender, sexuality, or family binaries (p.
In this regard, Few-Demo et al. (2016) proposed a queering of families by suggesting that, rather than simply acknowledging that sexuality and gender diverse families exist, a discussion of these families should be included in family studies courses and in other conversations concerning such families. Some queer family theorists (e.g., Dozier, 2014) assert that by simply going about mundane parenting tasks as queer parents, these parents are ‘queering’ the family binary.

Queer kinship models are a common method of conceptualising this queering process in academic discussions of queer families (Dahl & Gabb, 2019). However, the literature involving these models is largely concerned with the mechanics of family creation rather than the broader issues of how parents in such families negotiate public discourses of families, how parenting is negotiated in heteronormative contexts, and how parents view their own and their partners’ roles (Dahl & Gabb, 2019). In this way, the broader framework of queer theory in its goal to identify how ‘queerness’ is negotiated in various social institutions and contexts, is far more applicable to this project than a narrow queer kinship approach (Edwards, 1998; Sedgwick, 1985).

The literature also refers to parents in same-sex relationships pursuing either ‘a queer difference or an acceptable sameness’ (Gamson, 1998, p. 13) to heteronormative assumptions about motherhood, fatherhood, and family (Folgerø, 2008, p. 124). Folgerø (2008) explains how parents in same-sex relationships both reinforce and work against heteronormativity, as they interpret their families through the lens of the accessible discourses i.e., the dominant discourse of heteronormativity. For example, in the study Clarke and Kitzinger (2004) described above, the same-sex parent guests on the show often framed their families in the context of different-sex families, and Koenig et al. (2012) found that participants discussed the ‘growing normalcy of female co-parenting’ (p. 488). Dozier (2014) offers an account of their own queer mothering, in which they describe mundane parenting tasks as being made queer by the fact of their own queer identity. This notion of parents in same-sex relationships identifying similarities between their own and different-sex parented families the predominant family model is reminiscent of the concept of mimicry as a form of resistance (Bhabha, 1994). Bhabha (1994) noted that mimicry is a form of gaining power.
through the approximation of dominant ways of being and moving through the world. In this sense, the efforts of some same-sex couples to align their families with those of different-sex couples point to the power inherent in the latter family structures.

As a key component of queer theory is to ‘read’ social conventions with a queer lens (Stein & Plummer, 1996), a queer reading of motherhood and fatherhood would examine the positions of parents from a queer perspective. In his study of ‘gay and lesbian’ parenting, Folgerø (2008) noted that whilst many parents commented on the issue of having ‘role models’ for their children, this commonly referred to father figures, or male role models specifically. Folgerø (2008) notes; “The informants clearly looked upon fathers as “role models,” while mothers simply were mothers.” (p. 136). Parallels are evident between this discussion of role models and my previous discussion of motherhood and fatherhood, where ‘parenting’ is often considered synonymous with ‘mothering’, and ‘parenthood’ with ‘motherhood’.

As the participants in the present study are in same-sex relationships, some of these queer theory notions and discourses may be present in how participants describe their parenting experiences and roles. In this sense, it is useful to have a concept of what queer theories are and what they entail when completing my data analysis, so that I can identify these theories as they arise.

**Intersections of Feminism and Queer Theory as they Relate to Families, Motherhood and Fatherhood**

Queer theories originated from feminism (Oswald et al., 2011; Warner, 1993), both of which intend to be liberating for the demographics they empower (Beresford, 2014). Feminism, since its inception, has aimed to positively transform the lives of women (hooks, 2000). It aims to dismantle the patriarchy, a system of privileging masculinity over femininity and therefore men over women and more feminine forms of gender expression (hooks, 2000), and to increase public understanding and inclusivity of diversity (Beasley, 1999), including family diversity.
Central to the discussion of the intersection of queer theory and feminism is the notion of lesbian feminist theory. Akin to how queer theories originated from feminism (Warner, 1993), lesbian feminist theory was born from the gay liberation movement of the 1960s (Jeffreys, 2003). Lesbian feminist theory began with second wave feminism, during which time many lesbians felt like the feminist movement had no place for them (Jeffreys, 2003; Levy, 2007). The feminist movement at the time was concerned with dismantling the patriarchy, and whilst this system also affects lesbians, lesbians are also affected by heteronormativity and heterosexism (Calhoun, 1994; Dunne, 2000) and eliminating the patriarchy will not necessarily eliminate heterosexism (Levy, 2007; Saulnier, 1996). Therefore, lesbian feminist theory was born of this need to acknowledge both systems of oppression and how they have an impact on lesbian women (Levy, 2007). Jeffreys (2003) notes that the basis of lesbian feminism was woman-loving; lesbian feminists understood this to be fundamental to feminism.

Other branches of feminism can also be linked to queer theories. Liberal feminists assert that society “restricts women as a group, rather than treating them as individuals” (Saulnier, 2000, p. 8). Although critiqued for having a narrow focus on women’s rights rather than considering the inequality of other marginalised groups (Saulnier, 2000), liberal feminism highlights the differential treatment parents and prospective parents in same-sex relationships experience, when compared to their different-sex peers.

These systems of patriarchy, heterosexism and heteronormativity work together to create additional challenges for non-heterosexual parents. As described above, same-sex couples may face discriminatory practices and prejudiced attitudes to becoming parents and during their parenting (Giesler, 2012; Lauster & Easterbrook, 2011), and these can be directly linked to the concepts of heterosexism and heteronormativity. In addition, the prescriptive nature of the patriarchy says that males and females, and therefore fathers and mothers, have different capabilities and therefore different parenting roles (Singh, 2016).
These systems work against parents in same-sex relationships, by assuming that two fathers, or two mothers would not be able to provide an optimal environment to raise children in. As previously noted, there is considerable evidence to the contrary, with children raised by same-sex parents consistently performing at least as well as their different-sex parented peers in several measures (Bos et al., 2018; Potter, 2012; Wainright & Patterson, 2008).

**Aims and Objectives of the Study**

Much of the previous literature concerning families with same-sex parents focuses on children’s outcomes, and comparatively little scholarly attention has been paid to parents in such families. As such, the present study will explore same-sex parents' notions and experiences of parenting, describe the ways in which same-sex parents conceptualise their parenting roles, and identify factors which contribute to how their parenting roles are formed.

Having detailed dominant, feminist and queer theory discourses of these institutions, I will be able to identify each of these during data analysis.

In this chapter, I have detailed dominant, feminist and queer theory discourses of families and parenting. However, these discourses are largely absent from recent literature regarding families and parenting. Therefore, I also aim to identify how discourses of motherhood, fatherhood, and families are present, absent, and interact in the ways that parents in same-sex relationships discuss their parenting experiences and how they come to their parenting roles.

**Research Question**

How do parents in same-sex relationships experience and construct their notions of parenting?
Chapter 3: Methodology

Theoretical Framework: Postmodernism

Postmodernism as a theoretical framework is based on the understanding that there are many ways of existing and experiencing, and that there are many voices and points of view on any given issue or circumstance (Angrosino, 2007). Researchers who use a postmodern framework therefore cannot perfectly obtain an objective truth (Gray, 2014); The aim is rather to de-centre power inherent in the dominant world view by acknowledging the plurality of cultures, voices, and a plethora of other factors (Grbich, 2004). In this way, postmodernist subject matter must necessarily be presented in its raw form, complete with its inconsistencies of plural voices (Diduck, 1993; Lyotard, 1984).

Context is a major component of postmodernist thought, as an understanding of the context of individuals and events is crucial to understanding the reality of the phenomenon in question (Danaher et al., 2000; Grbich, 2004). In this sense, the reality of a time and place is understood as being solely relevant to that time and place, and that to understand the reality of other phenomena, the context of that phenomena must be investigated (Grbich, 2004). Within this framework, participants’ experiences are understood as being unique to their situation, and their background must be considered when interpreting meaning. With regards to the present study, there are a variety of same-sex family forms (Power et al., 2010), and to present any one of these forms as an exemplar would silence the others.

Using a postmodern framework will allow for the plurality of discourses and meanings to emerge from the data, preserving the voices of the participants (Liamputtong, 2009). In addition, postmodern research aims to deconstruct texts and utterances in order to uncover the inherent discourses and meanings (Williams & May, 1996). For these reasons, it would be highly appropriate to use this approach for the present study, which aims to explore the discourses which shape how the participants in the current research construct and experience their parenting roles.
Post-structuralism is often used synonymously with postmodernism, and although these are linked, they are separate concepts (Kincheloe & McLaren, 2000). While postmodernism posits that there are many discourses on a particular topic and they all may be valid (Angrosino, 2007), Poststructuralism argues that adopting any one version of the truth is repressing all other versions of the truth (Scheurich, 2013). These concepts are not mutually exclusive and may be used complimentarily; I will use post-structuralism to inform my analysis of the data.

Participants

As shown in Table 1, 29 parents in same-sex relationships participated in the study. These included two cisgender men, 26 cisgender women and one transwoman. All participants resided in Australia at the time of their interviews; 24 participants resided in Western Australia, four resided in Victoria, and one participant resided in New South Wales.

Table 2

*Paths to Parenthood by Participants’ Gender*

<table>
<thead>
<tr>
<th>Path to parenthood</th>
<th>Cisgender female</th>
<th>Cisgender male</th>
<th>Transgender female</th>
<th>Full sample</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em>n</em></td>
<td>%</td>
<td><em>n</em></td>
<td>%</td>
</tr>
<tr>
<td>Surrogacy</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td>Reciprocal IVF</td>
<td>4</td>
<td>15.4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Known donor</td>
<td>7</td>
<td>26.9</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unknown donor</td>
<td>8</td>
<td>30.8</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Previous different-sex relationship</td>
<td>3</td>
<td>11.5</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Foster carer</td>
<td>2</td>
<td>7.7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Became a stepparent</td>
<td>1</td>
<td>3.8</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Biological parenthood with current partner</td>
<td>1</td>
<td>3.8</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Full sample</td>
<td>26</td>
<td>89.7</td>
<td>2</td>
<td>6.9</td>
</tr>
</tbody>
</table>
With regards to paths to parenthood, 21 participants became parents through gamete donation; this encompassed surrogacy, reciprocal IVF, and known and unknown donor arrangements (See Table 1). Other participants became parents through previous different-sex relationships, biological parenthood with their current partner, through foster care, and becoming a stepparent.

**Participant Recruitment**

**Recruitment Process**

Participants were contacted through purposive sampling, which refers to strategic choices about where and how to find participants who meet specific selection criteria (Palys, 2008). I achieved this primarily through strategies identified by Crouch et al. (2014, p. 88) to optimise recruitment of same-sex parent families;

1. **Targeted online recruitment supported by appropriate community leaders.**

   I contacted the administrators of online LGBTQIA+ community spaces for permission to post details of my study with the purpose of participant recruitment (see Appendix A). After obtaining permission from these administrators, I posted information about the study and researcher contact details in Perth-based Facebook groups for Gay Dads WA and Rainbow Playgroups Perth.

2. **Engagement with mainstream and specific community media outlets, harnessing interest through relevant current affairs issues.**

   I contacted OUTinPerth to advertise the study through their online platform, and the publishers posted an article regarding the study (OUTinPerth, 2017). OUTinPerth is a news website focusing on diversity in sexuality and gender; whilst this media outlet is based in Perth, Western Australia, its readership encompasses individuals from all of Australia.

3. **Relationship building at focused community events to invigorate snowball recruitment and forge long-term stakeholder ties.**

   I attended the Pride Fair Day in Perth, in February 2016. This event is an annual family-orientated fair catering to the gender and sexuality diverse community with stalls and speakers discussing issues relevant to the community. Through this event I was able to contact community...
leaders of the local Rainbow Playgroups regarding my project, and to create lasting ties with this
group.

In addition to the methods outlined above, I contacted participants through flyers posted in
child health centres, public libraries, and universities. I also used personal contacts and snowballing
techniques, by asking participants for contact details of other potential participants (Morgan, 2008).

I had considered several factors when determining the number of participants required for
the study. Firstly, the focus was on telling each participant’s story in their own context and noting
the discourses present, rather than attempting to create a unified theory from the participants’
experiences (Liamputtong, 2009). However, previous research with parents’ roles have utilised
between eight and 12 participants (Doodson & Morley, 2006; Giesler, 2012; Weaver & Coleman,
2005). Having considered the diversity of same-sex parent families and their experiences, my
intention was to obtain a sample of 30 individuals, or when data saturation occurred, and no new
discursive information arose from the data (Saumure & Given, 2008).

**Participant Selection**

Queer families are incredibly diverse. Not only may members identify with any gender or
sexual or romantic orientation, but the number of children and parents may vary in addition to the
relationships between family members and the way the family was formed. Although I acknowledge
the vast array of family forms and individual identities within the gender and sexuality diverse
community, it was beyond the scope of the present project to recruit and include individuals from
every possible family configuration in the sample.

The selection criteria for the project were adults in a monogamous same-sex relationship
who identify as a parent of a child who lives with them. Initially I had chosen to only include
cisgender participants as participants who identify as trans or gender nonconforming may have
additional experiences of living as the gender they were assigned at birth, and therefore may
experience and construct their notions of parenting – particularly gendered notions of parenting – in
a significantly different way to participants who are cisgender. However, I have come to realise that
such a view may not be in the spirit of postmodernism, as most if not all participants have additional experiences which would influence their notions of parenting, and to exclude trans parents due to their gender would fail to consider the unique contexts of all participants. In addition, the view that having lived as one’s assigned gender may influence gendered notions of parenting is transphobic, as it assumes the trans person has changed gender; I have since realised that these parents are the same gender before and after their transition, regardless of how they present.

Interviews were conducted between January and September 2017. Sites of data collection varied; I had emphasised to participants that I was able to meet them at a time and place which was convenient for them. In most instances, interviews were conducted in person at participants’ homes, and two were conducted in person at their places of work. Six interviews were conducted via video call, due to participants residing far from where the research was based.

**Data Production**

**Data Production Procedures**

Upon reading an information letter regarding the study (Appendix B) and signing an Informed Consent Document (Appendix C), each participant took part in one semi-structured one-on-one interview (see Appendix F for the Interview Schedule), which was video recorded with participants’ consent. Prior to each interview, participants were informed that they could pause or cancel the interview at any time, and that information regarding counselling services would be available at the end of the interview, if required (See Appendix D).

As the interviewer, I also took handwritten notes during interviews to confirm details with participants and to ask prompts and follow-up questions later. During each interview, the interviewer and the participant were the only adults present. On several occasions participants had their young children with them, but the children’s presence did not affect participant engagement. Each participant participated in one interview; interviews lasted for between 10 to 60 minutes, with an average interview time of 30 minutes.
The interview schedule had evolved over the course of the data collection period to facilitate participant storytelling. I had started the first four interviews by asking participants what they did as a parent, as this interview question was aligned with my research question and seemed best suited to gathering relevant data. However, I found that participants often needed clarification regarding such a broad question, especially as it was the first question asked. Appendix E contains the complete interview schedule used for these initial interviews.

For the following interviews, I rearranged the order of the interview questions and prompts to allow the interview to become more narrative-like. After asking participants to describe their parenting journey so far, the interviewer asked about the participant’s parenting journey in greater detail in chronological order, beginning with their decision to become a parent. Participants were prompted to comment on why they had made parenting decisions, such as which parent would become pregnant and give birth. Participants were also invited to reflect on how their own and their partner’s parenting roles had evolved over time, and how the participant predicted these roles would continue to evolve in the future. I later added “Please tell me about your family,” at the start; I found that this best positioned the participant to think about their family and allowed me to ask questions and prompts specific to their story instead of having a rigid back and forth interview structure (See Appendix F for the revised interview schedule).

I managed reflexivity at all stages of the data collection process by keeping a journal of interview notes and reflections, and possible links to relevant concepts. I also managed my own perspectives and biases in relation to the content by reflecting in this journal.

*Recording and Data Transformation*

Interviews were recorded using an electronic tablet mounted on a tripod. During each interview, I took handwritten notes regarding specific prompts to use and possible links to existing research. Data transcription comprised the denotative part of Feminist Poststructuralist Discourse Analysis, as described below. To facilitate this process, I transcribed the data myself, making note of participants’ mannerisms, gestures and vocalisations in addition to the words they spoke. Within
the transcripts, I allocated pseudonyms to participants and family members whom they named to maintain confidentiality. Similarly, named cities and suburbs were omitted from the transcripts for the same purpose. The recordings of the interviews were deleted upon transcription, as they contained identifying material.

Analysis

Data Analytic Strategies

I used a combination of Feminist Poststructuralist Discourse Analysis (FPDA) and thematic analysis to analyse the data. Data analysis progressed in three stages, which are expanded upon below. The first, denotative analysis, was completed as part of FPDA. This consisted of an accurate transcription of the recorded interviews, including gestures and other nonverbal communication. In the second stage, thematic analysis was used to identify themes and subthemes present in the transcripts. The third part of the data analysis process, connotative analysis, was also part of FPDA and was concerned with identifying discourses present in the transcripts and the interactions between these.

Feminist Poststructuralist Discourse Analysis. One of the aims of the project was to determine the discourses present in same-sex parents’ discussion of how they construct and experience their parenting roles. Considering this goal, I used a form of discourse analysis (DA) alongside thematic analysis as part of the data analytic strategies.

Feminist Poststructuralist Discourse Analysis (FPDA) adds complexity and depth to thematic analysis and DA, by analysing the presence and interplay of discourses in utterances and texts (Baxter, 2003, 2008). Originally conceived as a method of interpreting data in which multiple speakers jockey for positions of power (Baxter, 2008), FPDA aims to challenge dominant discourses and give space to marginalised voices (Baxter, 2003; 2008), such as the sexual minority participants in the present study. FPDA is therefore an ideal method of analysis for the present project, especially as part of a postmodernist approach.
FPDA is conducted in two parts; a denotative part and a connotative part (Baxter, 2003). In the denotative part, the source material is transcribed verbatim, complete with nonverbal communication such as hand gestures and pauses (Baxter, 2003). In the present study, interviews were recorded using video to facilitate this process and I also engaged in the transcription process myself; such an immersion in the data is an integral part of FPDA (Baxter, 2003) and thematic analysis (Braun & Clarke, 2006). In the connotative part of FPDA, I sought to identify social discourses and how they interacted, both constructively and competitively (Baxter, 2003). In this study, discourses were identified through repeated keywords, phrases, linguistic features, the way in which participants describe their speech, behaviour, and relationships, and through nonverbal communication such as gestures. To identify social discourses in this way, I compared communication events with previously identified dominant, feminist, and queer theory discourses of motherhood, fatherhood and families.

Whilst I acknowledge that a queer kinship approach may have been appropriate for some of the data analysis process, this approach tends to focus on the mechanics of family formation rather than how parents construct their roles in a discursive context (Dahl & Gabb, 2019). As one of the aims of this project was to examine how participants conceptualise and construct their parenting roles, focusing on their voices, a queer kinship approach would therefore have been inappropriate.

I commenced the connotative analysis with an awareness that discourses other than those which I had already identified and described may be at work in the transcripts. However, during this process I found the three discourses of motherhood, fatherhood, and parenting that I had already identified. For this analysis, the data I used consisted of a combination of the thematic analysis and the transcripts to determine the discourses present. This is applicable for an FPDA approach, as FPDA is intended to be used in conjunction with other methods of analysis (Baxter, 2003).

**Thematic Analysis.** Thematic analysis was used to identify themes and subthemes present in the transcribed interviews. I referred to Braun and Clarke’s (2006) six-phase process for this level of analysis;
1. Familiarising yourself with the data

The first phase, familiarising myself with the data, was completed in conjunction with the
denotative analysis of FPDA. This consisted of transcribing the interviews myself, complete with
participants’ nonverbal communication, and later re-reading the transcripts to become familiar with
the content. During this phase, I also made notes of potential themes and recurring throughout the
interviews.

2. Generating initial codes

The second phase, generating initial codes, involved identifying linguistic and nonverbal
features of the data, or a combination of these, that were related to my research question. As the
transcripts contained information such as body language and gestures, I was able to incorporate this
nonverbal communication into my identification of codes and interpret latent meanings from these.

3. Searching for themes

Searching for themes involved combining similar codes to group them into themes and
subthemes. The codes used for this process were not necessarily the most prevalent codes, but also
those which participants emphasised and spoke passionately about. Themes included recurring
ideas or perspectives which identified something important in relation to the research question.
During this phase, I generated 12 themes and 46 subthemes.

4. Reviewing themes

In this process, I checked all the codes and extracts nested within each theme against the
parent theme to ensure that the themes accurately reflected the coded extracts. I also ensured that
there was enough data to support each theme, and that the data within each theme was similar
enough to justify the inclusion of that theme. I also re-read all transcripts to ensure the themes
accurately reflected the raw data. During this process, I progressively condensed the themes from
12 to 8, then to the five key themes presented in Chapter 4.

5. Defining and naming themes
Phase 5 involved determining the core meaning of each theme and giving each an appropriate title within the larger narrative the data told.

6. Producing the report

For the final phase, I chose the most relevant extracts within each theme to explain the findings.

Methodological Integrity

The data was successful in answering the research question for the group of participants who took part in the study, but the findings may not be applicable to all such families. It is important to note that, as stated previously in this chapter, there is a huge diversity of queer families. It is beyond the scope of the present project to identify every queer family structure, configuration and dynamic, let alone to survey enough of each of these families for an adequate analysis.

My perspective as a researcher cannot be separated from my interpretation of the data and the interviews, but I minimised the impact of this during data analysis by referring to the discourses and previous literature, and through writing in my research journal. As a bisexual person in a different-sex relationship, I sometimes felt uneasy during interviews when participants expressed negativity about different-sex relationships, appeared to brush bisexuality as a concept aside and minimised their own previous relationships with different-sex partners. Whilst I was negatively affected by these experiences, I realised that these sentiments were not directed at me and my family, but rather a way that participants made sense of their experiences and of themselves and I chose not to self-disclose unless directly asked by participants. I also processed my thoughts and emotions regarding these experiences through writing in my research journal.
Chapter 4: Findings

Following the data analytic strategies detailed in Chapter 3, I generated five themes and 11 subthemes which pertained to participants’ experiences and construction of parenting. I have presented these concisely in Table 3 and will expand upon each theme and subtheme in this chapter.

Table 3
List of Themes and Subthemes

<table>
<thead>
<tr>
<th>Theme</th>
<th>Associated Subthemes</th>
</tr>
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<tbody>
<tr>
<td>The evolution of the family we made</td>
<td>• Becoming a family</td>
</tr>
<tr>
<td></td>
<td>• Into the future</td>
</tr>
<tr>
<td>How and why we parent the way we do</td>
<td>• How we divide parenting tasks and make parenting decisions together</td>
</tr>
<tr>
<td></td>
<td>• Most of the time we have different roles, but we share parenting and are a team</td>
</tr>
<tr>
<td></td>
<td>• Influences on our parenting</td>
</tr>
<tr>
<td>We may be different to different-sex couples, but that can be a good thing</td>
<td>• We have more freedom to do what we are good at as parents outside of gender roles</td>
</tr>
<tr>
<td></td>
<td>• We offer more nurturing and empathy for our children and our partners</td>
</tr>
<tr>
<td></td>
<td>• Our children have a better understanding of and acceptance of diversity, and community</td>
</tr>
<tr>
<td>We get support from many places</td>
<td>• Support from our families</td>
</tr>
<tr>
<td></td>
<td>• From day-care, work, online and parenting groups</td>
</tr>
<tr>
<td>Other challenges our families face</td>
<td></td>
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</tbody>
</table>
The Evolution of the Family we Made

Becoming a Family

The participants discussed their parenting journeys, from their decision and process of becoming parents, to their family as it was at the time of the interview, and their hopes and fears for the future. The parenting journeys of the parents who I interviewed varied depending on the context of who their partner was at the time when their children were conceived. Of those who had their children within the context of their current relationship, eleven commented that they had always wanted to be a parent or a mother;

I always wanted to, since a child, that’s all- I still remember, all my family used to ask when you grow up, and it was always the same thing, I wanted to be a mum. (Amanda)

I had always wanted to, um... [child sneezes] bless you... be a parent. (Stacy)

So pretty much I always wanted to have kids. (Jana)

There were many ways in which the parents in my study became a family, and all participants had a unique experience of this process. Eighteen participants were female same-sex parents who had their children though a donor in the context of their current same-sex relationship. Twelve of these participants discussed their decision to use either a known or anonymous donor when having a child with their partner. For Deborah, Jennifer, and Carol, the choice to use an anonymous donor was clear;

So, we used an anonymous donor, through IVF, through [fertility clinic], and I carried Grace, and Karen carried Jack. So they’re biologically related through the [moves hands in sync] donor. (Deborah)
We then came to the decision that we would go through an anonymous donor, because it just, you know, rules out the majority of the, um, confusion and everything like that as well, um, and we just wanted a child just for both of us [chuckle] we didn't want to share with anyone else [smiles]. (Jennifer)

So, we sort of thought everything’s fine with our friendship now for a known donor, but what if in ten years you have a falling out with that friend, and they then suddenly start trying to make claim over the child that you’ve made, so we just thought, so we’re not putting that stress on any of our friendships, so we’d go anonymous donor. (Carol)

It was important to these participants that they were the only parents of their children, and they also seemed to feel that using an unknown donor eliminated much of the confusion and unclear relationships that would have resulted from using a known donor. They did not want to put any strain on their relationships with potential known donors or submit their children to ambiguous relationships with them. However, Ash, Gina and Rachel discussed how they came to their decisions to go through a known donor;

It just felt like, um, a known donor at home, you know, we had- none of our reasons were any different to anyone else’s, for either side, you know, but it just felt so right to us, we didn’t- we didn’t want all that medical intervention, if we didn’t need it, um, we liked the idea of, um, this guy in particular and having him around and having [our children] know him. (Ash)

My biggest thing was I watched this, um, you know, Insight on SBS, and there was like a story about donor kids in various forms, like IVF babies and for single mothers, or whatever, gay mums and all that, and yeah, they just all- all the kids sort of unanimously said that they
wanted to know who their father was, ‘father’, [chuckle] at some point in their lives, that had been a big question, and then also that time the legislation was changing so these kids could find out when they were sixteen anyway, so it’s actually sixteen, and I just thought, well, if she wants to find out, and has the right to find out anyway, then why don’t we get someone that we know, and we would be happy for her to have a relationship with when she wants to.

(Gina)

We definitely wanted someone that, um, we could then tell Emma that this is where she came from, it was important to us also, not just the emotional impact, but the physical as well, to know the biology behind it and also the medical history, and all of that. (Rachel)

For these participants, it was important for their children to have a knowledge of their history and of where their genetic material came from. Using sperm from a known donor also eliminated some of the challenges related to fertility clinics as I will further discuss below. For five participants, their choice of a known or unknown donor was more complicated. Sara discussed how she and her partner initially chose a known donor, a friend of Sara’s, but that began to complicate their relationship;

So [our potential donor] was supportive, but, um, his partner was not supportive […] in the end, we decided, like, a) we sort of didn’t feel- like I didn’t want to feel like I was pressuring my friend to choose between a friendship and a relationship, even if the end of either it would be a difficult position, and b) we didn’t want to…I guess, bring a child into the world, um, in with any- like, knowing there was an early indication of someone in their life who would be awkward or uncomfortable about their existence, like that’s just an unfair thing to do. (Sara)
Sara went on to talk about how she and her partner considered asking other people they knew if they would be willing to donate sperm, but ultimately decided to go through an anonymous donor at a fertility clinic;

We did make a big list of kind of all of our male friends that we knew, or people that we knew to see if there was anyone else who we want to ask, but no-one kind of felt, like, up to the same- you know, in the sense of like, we’d been friends since we were in year seven, we were twelve [years of age], um, you know, I knew him very well, very, like, caring and trustworthy, someone who would- I’ve never known him to, like, lie to anyone, or cheat on anyone, or like, you know, high level of integrity, and not- yeah, I mean, I’m not saying that my other friends are unreliable, but there was- they didn’t seem like quite a perfect match, like, anyone else that we chose would be not as good, it didn’t necessarily outweigh the risks, the same way that we felt that person did, so we went down the track of using an unknown donor, so we went to a clinic. (Sara)

Megan and Erin were also going to utilise a known donor, a friend of Megan’s, but Erin was confronted by this, as Megan was also going to be carrying the child;

Originally, we were going to go with a known donor, who was Megan’s best friend that she had had some history with, um, I felt very confronted by that, having two people in Chloe’s [our child’s] life that have a DNA connection to her, having Chloe- at that time, Megan wanted Chloe to have her last name, so I felt really alienated if that makes sense. (Erin)

Lisa and Amanda discussed their journey to become parents, which initially involved a known donor;
Amanda had a friend of a friend, or a friend somehow, whatever, that had just done, like, at home insemination herself, so we actually met up with her one time when we were down from up north, and um, just talked to her about how she did it [holds out both arms, palms up] we had no idea what, or how we’re gonna have this kid, like do we have to go through fertility, blah blah, we’re gonna- anyway, so to begin with, that’s sort of the way we went and she knew someone that was willing to be a donor and everything so it kind of just all fell into our lap, and happened really quickly. (Lisa)

However, with the loss of a pregnancy, they decided to try using sperm from an anonymous donor at a clinic. This was the beginning of a long path to parenthood by their accounts;

And then, so then eventually we ended up going through a fertility clinic with an unknown donor [nodding]. And Amanda was the one that got pregnant. [smiling] (Lisa)

Eighteen tries to get Mason [smile] and one try to get Layla [chuckle] yes, um, so I had tried... um, several times, and then Lisa had a try and she had six tries, then I- I sort of went back and went... you know, I guess we’ll have one more try while you’re going to go and there was Mason, and then I think the stress of having, you know, what we desired so much.. the pressure was taken off so when Lisa tried, um, first go, yeah. (Amanda)

There were several factors which went into the decision as to who carried the child. Six participants talked about how the older partner would carry the first child;

My wife’s six years older than I am, so we went, “You go first, then I’ll have a turn once we’ve- once you’ve finished having kids then I’ll have a turn having kids as well.” So it was purely based on age. (Carol)
I’m five years older than Lisa, so we- we made the decision, I’ll try first, being I’m a bit older.

(Amanda)

Eight participants noted that the decision was easy, as one partner wanted to become pregnant and give birth and the other one did not wish to do so;

I’m a bit of a chicken, so I was kind of like, [apprehensively] “Oh God, don’t know if I can give birth kind of thing, it sounds a bit horrible,” and so Sue always said, “Oh, I want to have the first one, if we have kids,” I was like, [shaking head] “That’s fine, feel free [pushes hand out in front of body] you can do that,” (Jana)

I really want to be a mum, but I don’t feel the need to carry a child, I don’t- I never really had that feeling to want to do it, it may come later on, but I don’t have it now- and Imogen really wanted to carry a child, so we were really really lucky. (Georgia)

I think Amanda just always had that desire, like, to want to have a baby, even though I wanted to have a baby, I was scared of the whole process, like, you know, just how we’re gonna do it, and giving birth, and like, all that just petrified me, so I was kind of happy that we had that someone else [smile] that was willing to do it [chuckle] (Lisa)

I wanted to be pregnant even though that was something that was sort of... appealing to me, um, I think Yasmin... came ‘round to it, more so- well, well, her being pregnant.. would.. I think she would say it would feel as natural as chopping her arm off [laughter] you know, just wasn’t something she wanted to do, which I personally can’t understand at all, because it was something that was really important to me. (Stacy)
Jana, Lisa and Amanda commented that their decisions regarding who carries the children and whether to have a known or anonymous donor was also linked to the parents wanting a biological link between their children.

And then with Millie we kind of—because we knew it would be a different donor, we wanted a biological link between the children, and Sue was the link [nodding]. (Jana)

Megan and Erin talked about how Megan wanted to be the one to get pregnant so that she would have a biological link to the child;

I guess for me, I wanted—I wanted, I guess another piece of me, to have someone there with me, like, um, I don’t quite really know how to explain it very well, but it was- yeah [smiles] um, yeah, it was just, yeah, I wanted- I wanted my own family, I wanted my own piece of me, sort of, so I guess so I felt whole, I kind of always felt a little bit missing. (Megan)

Ash, Jennifer, Gina and Rachel discussed the medical reasons behind their decisions as to who would carry their children;

It was actually a really easy decision for us because Michelle wasn’t able to carry. So, um, we knew from earlier in our relationship that if we were ever going to have kids it would be me, so it kind of was just a predetermined... [smiling and nodding]. She was medically unable to carry. (Ash)
So, my wife's endometriosis, so therefore it can be a bit tricky to have kids, 'cause she's left it untreated for quite a while now and so...you know, we were thinking, if she was going to be the one to carry him, she would definitely have to get treated for that first. (Jennifer)

Rachel's two years older so she decided- we decided for her to try first, and then that didn't work, in the long run. (Gina)

unfortunately though, I ended up doing IVF, and that was not successful either, and then I opted to stop that, and then said to Gina, how about she have a go, [chuckle] because really, um, that was our choice in that point in time, and, um, she then agreed, um, with the thinking that she still did want children, and um, so she had a go, and fell pregnant straight away, and then we had Emma. (Rachel)

Many parents who used fertility clinics to have children faced challenges when accessing these services. Steve and James commented that their parenting journey started in a south Asian country where their sons were born;

So, the boys, were born, uh, in [South Asian Country], through a surrogacy clinic in [South Asian City], so we were there for the boys' birth (Large smile, nodding), so we were the first people to hold them, it was (smiling) amazing, yeah! Um so I guess that's where our parenting role started straight away, so we were in [South Asian City] for six weeks. (Steve)

At the time of the interview and writing this paper, Australia has different, complex laws regarding surrogacy in each state. In Western Australia, for example, surrogacy is only legal when it is altruistic (without monetary gain for the surrogate) and used for different-sex couples or single women who are unable to conceive or carry a child to term (Surrogacy Act 2008). In this regard, all
surrogacy arrangements in Western Australia that are entered into by male same-sex couples are illegal. For many male same-sex couples wishing to have children, one of their few options to have biological children involves the costly process of utilising a surrogate overseas. This option remains inaccessible to many couples for financial reasons and may be one of the reasons why there were so few male participants in the current study.

Kym and Dawn wanted to have children through reciprocal IVF arrangement, where an embryo created from one partner’s egg is implanted in the other partner. This request was initially declined by a hospital, as this option is considered to be a surrogacy arrangement;

We went to [Hospital] and they said they wouldn’t do it, um, ‘cause it’s called reciprocal IVF, which is kind of like surrogacy, which is kind of a little bit illegal [holds out hand flat, palm facing downwards, shakes hand in rocking motion] in WA, unless you have a medical reason, which we did. (Kym)

It’s not legal to do it the way that we did it unless you’ve got fertility issues. (Dawn)

Lisa and Amanda also had a reciprocal IVF arrangement, which they could only enter into due to medical difficulties;

We were actually going through the process of... um, me trying to... donate my eggs to Lisa, but there was a whole process of, um, she had to be.. seen to be infertile, she had to be seen to be infertile, she had to have at least one IVF try, um, so there was a big.. a big, big discussion about that, they had to go through all their legal paperwork. (Amanda)
Counselling is a compulsory part of assistive reproductive technologies involving donor gametes (NHMRC, 2017). However, counselling with regards to accessing donor sperm was considered a hurdle on the path to parenthood by seven participants;

‘Cause you do counselling which I found, like, a little bit patronizing, because, this idea of someone who’s never met you does an interview with you who then decides whether or not you should be allowed to have kids, it’s like, well...other people don’t have to do this. (Sara)

Yes, so we looked at the fertility road, and I had such a problem with having to pay exorbitant amounts of money, then having to undergo sort of, compulsory counselling, which I just find so incredibly ridiculous, because especially working in youth work with lots of young parents, [holds up one hand at eye level and stares at it] nobody else is having to do counselling before they become a parent, and I just found it so incredibly ridiculous, that that was the number one kind of option, especially if there was no kind of fertility issues. (Sue)

I think through fertility clinics and stuff, it’s, like, can be quite expensive, especially the ones we looked up, you had to go through, like, six months of going to psychologists and doing all that stuff, and we just were like, “This is just going to be ridiculous, like having to jump through hoops.” (Jana)

[My partner and I] were just saying to [the fertility counsellor], because Yasmin’s [My partner’s] [Asian ethnicity] and I’m Caucasian, um, and she’d sort of- she asked us something about some donor or.. and we’d said, well initially, we wanted.. you know, an [Asian ethnicity] donor, um.. and she sort of stopped us and said, “well, hang on a sec, why do you want a [Asian ethnicity] donor...?” and we explained to her that you know, well, ideally we wanted our child to look a bit like both of us, I guess, and she’s like, “No, hang on a sec, I just don’t get
it,” and I still to this day can’t work out how she does not get it, I don’t understand, I cannot believe that she would have got a [Asian ethnicity] man in there with his Caucasian wife and not understood why they wanted Asian sperm. (Stacy)

Sue and Jana explained that this was part of the reason why they accessed a website designed to match people who want to become parents with potential donors;

this amazing kind of website, Australian based sort of website, about I guess, people can be any sort of denomination, any sort of gender denomination or sexuality denomination, go on and provide either their services to other people or request services, so you can go and request sperm donors, egg donors, surrogates, whatever, or you can advertise your kind of-you can advertise to be a surrogate, whatever, so we went and- I mean, I was incredibly sceptical, so we went and checked it out, and it’s almost kind of internet dating for eggs and sperm, ah, which is a bit weird, but...it’s a really strange concept, I must say. (Sue)

As Sue and Jana commented above, the cost involved in accessing assistive reproductive technologies was a challenge to many participants who chose to become parents this way; seven other participants mentioned this;

Very long process. Very expensive, very long, very emotional, but [nodding] we got what we needed, we got what we wanted [chuckle] it was worth it. [nodding] (Amanda)

Some other challenges faced by participants when accessing assistive reproductive technologies included the changing laws concerning sperm donors. Carol talked about how the laws relating to Australian sperm donors were changing around the time when she and her wife wanted access to this service, and how this affected their experience of becoming parents;
So, we started looking [for fertility clinics] just after the laws in [Australian state] changed about donor sperm, and so it was right around the time when it went from being where the donor didn’t have to consent to their details being made available to any resulting children to when their details did have to be made available. So, because of that, a lot of that, a lot of donors dropped off the list, they chose not to continue, a lot of Australian donors, which meant that a lot of clinics didn’t actually have any donor sperm available for new patients.

(Carol)

Carol also expressed her frustration at how easy it is for different-sex parents to have children when she and her wife found the process to be very difficult. When commenting on the counselling required to access donor sperm, she mentioned;

You know, “And what will you tell your baby about the fact that they’ve got two mums?” you’ve two loving parents who really wanted you so much they spent a whole lot of money on making you, you know, what’s a straight person got to do to be able to get pregnant? They go out to a bar and they get drunk, and sleep with some random, and wham, bam, they’re pregnant. You know, where’s the counselling there? (Carol)

Despite IVF and other assistive reproductive technologies being one of the few methods available for same-sex couples to become parents through, Sara, Kym and Amanda felt that the fertility clinic system was not made for their families. Sara lamented;

We felt like we were kind of being squashed into a system that was just designed for, you know, going through the IVF, IUI, kind of fertility clinic, like, squashed into a thing that was designed for male-female couples who’d had troubles with fertility, even one of the other
things—example is that getting good information about success rates, and people— you know, ‘cause we would look it up, and the council— the clinics like, advertise, and then, but of course the rates they’re talking about are rates like, based on people going to them because they have fertility issues, they don’t have rates based on people who have no history of infertility, which is us. (Sara)

Jennifer and Carol discussed potential discrimination by fertility clinics as being a challenge; Eighteen months we had to wait, um, and the clinic coordinator said that as much as she doesn’t like to say this, it is mainly because of us being a same-sex couple that we had to wait as long, so they don’t really, they don’t usually like to say that, but that is why she said, ”You know, if you were any heterosexual couple, single, you know, or within a relationship, you’d probably get within six months or less.” (Jennifer)

One of the clinics that we looked into, they said, “Oh, it’s our belief that a family needs both a male and a female adult, and therefore we choose not to provide services to same-sex couples.” (Carol)

Deb, Sara and Carol commented that forms and paperwork relating to pregnancy and birth were not always inclusive of their family and used outdated language; There’s things like form filling, you know when they say, ‘who’s the dad?’ and you’re like, ‘Oh, Dad’s name is...Annel’ [laughter] And you know, I mean, there’s still a lot of, um, businesses out there that haven’t thought that through. (Deb)
There’s a kind of like a little annoying thing, you know, like with the forms that they say it’s “Mother/Father” (Sara)

On the birth certificate we can both be ‘mother and mother’, but on his health records, so over here we have the blue book, and that registers all of their immunisations, and all of that sort of stuff, that book has ‘mother and father’. There is no other page that you can get that just has ‘mother’ or ‘other parent’, or anything like that, it’s all ‘mother/father’. (Carol)

Five participants commented on either themselves or their partners being stepparents to their children. Shannon and Sam talked about how their partners had integrated into their families gradually, and now have a strong relationship with the children;

She’s, you know, around a lot, uh, the kids really- the kids love her, they come towards her, yeah so she’s- [gestures outwards] she’s gone out into that parenting role, naturally, as in time, yeah. It hasn’t been forced, it’s just been a natural [makes flowing shapes with hands] sort of progression. (Shannon)

And then slowly but surely, Alison’s integrated herself, so it started with like, [moves hands together from one side to the other side for emphasis] help with like, bath time, or help with bedtime, or help with dinner, and then, now we have very...like, [holds hands in front of body, a distance apart, pams facing each other] she does one thing and I do another thing, and like, [hands suddenly face up] it- and like I said, organic, it just happened. (Sam)

Michelle and Jess each had children from previous different-sex relationships and formed a blended family with their relationship. However, they faced unique challenges from their families of origin and their ex-husbands because of their becoming a family;
It’s so.. all over the place, I mean, everything was fine, until the moment when her ex’s family went [moves hands on either side of her head] “Ooh, oh my God, what do you mean you guys are in a relationship?” and went absolutely batshit crazy. (Michelle)

At the moment, I’m in Family Court, so that is a lot of pressure, um, I’d had my kids full time, then my ex-husband ended up going to jail for fifteen years, um, and then I wanted to move out and get a divorce, and because it’s a Muslim family, and they’re a tight, tight family, they didn’t want that, they wanted me to wait for fifteen years, and I was like, “No, I’m not waiting,” and then a while later, I met Michelle, and obviously Muslims are...they’re against the gay/lesbian scene together, so that was a big- a whole commotion [gestures explosion] inside the family, um, and because I didn’t listen, I was just like, “Nope, see yous later, I’m just done, I wanna start my life with her, I wanna- you know what I mean, I just wanna do my own thing,” that’s how we end up in Family Court, because they were like, “No, you’re not having the kids because you’re with her,” (Jess)

Deb and Anne faced additional challenges from Deb’s family of origin due to Anne being a transwoman and starting her transition after the birth of their children;

I guess what’s difficult for me is there’s been lots of other drama, ‘cause my family haven’t accepted it [Anne’s transition] at all. Um, and so yeah, there’s still lots of drama going on and that side of things, which causes me some grief. (Deb)

We got through it ourselves pretty well, but Deb’s family have been pretty awful to us, um, so yeah, that was pretty rough, and Deb’s had a hard time coming to terms with that. I don’t speak to her family any more. (Anne)
Emily and Lana talked about how their journey to parenthood began with their charity work inspiring them to foster;

We used to work [in a charity organisation], and she had this, um, she had this moment with a young kid who was on the streets, or his parents were, so he was, I think he was about nine or something, and she developed a really good relationship with him and it just started her thinking that, you know, there’s these kids are in need of care, and...I don’t know, she came home she’d talked about it to me one weekend, and we just thought that that might be a way we could make a difference. (Lana)

They started by being providing respite care for twin brothers, but described the ‘mad scramble’ for placing their newborn brother;

Jack’s, um, birth mum, she was pregnant with him and no-one knew. Child protection didn’t know, um, she tried to pretty much hide it, and she went to hospital and had him, and she gave a false name ... and so to cut a long story short, um, no- DCP had not organized a placement for Jack and, um, so there was a mad scramble for placing Jack into a home, and um, our case manager at the time just said- rang us and said, “this is what’s happened,” and we were respite caring for his older brothers, who were twins, and um, she just said, “Would you be willing to take a baby?” and we went, “Ah, yeah!” (Emily)

This was complicated by their being assessed to care for a school age child, and having to get reassessed to care for the infant;

So our parenting journey, we got thrown in there, and we had two weeks to prepare,
basically, for a baby, so we changed the room around to a nursery, we got Jack, and we had to just, learn as we went, and it was just- it’s been pretty tough, especially at the start, you gotta really- yeah, it was really hard, ’cause we didn’t- it was just hard, really hard, ‘cause we really weren’t in the- we weren’t psychologically probably prepared as much physically, yeah, but not psychologically, so that was tough. (Emily)

Eight other parents also described their experience of having children to be difficult at the start. Sara, Jennifer, Megan, and Rachel described a difficult pregnancy and birth for themselves or their partners;

I had to go Royal Flying Doctors as well, so that was a bit full on because he didn't as much amniotic fluid around him, so they did, “We've got to sent you up from [Australian country town] to [suburb].” (Jennifer)

Participants became parents in a variety of ways, with many opting to use assisted reproductive technology. Accessing this system came with challenges for many participants, who faced medical issues and discrimination, and who also expressed frustration at the cost factor and the relative ease with which different-sex couples may become parents. For parents who had formed blended families, there tended to be a gradual process of integrating the stepparent into the family (Dainton, 1993), until they became a parent figure to the children. The following section will discuss how the participants feel about their future as parents.

**Into the Future**

Participants discussed their hopes, fears, and changing ideas of their roles as their families head into the future. Seven participants discussed their ideal family size in terms of their family
being complete or wanting more children. Five parents talked about how their family was now complete with the number of children that they had;

We never wanted more than two, it’s a nightmare if you have more than two, um, monetary wise it’s a nightmare if you have more than two, and if they go running off in separate directions [separates hands horizontally to demonstrate point] and there’s two of you, you can handle two, and Jana comes from a really big family and I come from a small family, I think two works well, um, and people seem to think that the gender matters, that we have one of each when actually [shaking head] we always- we were always going to have two [chuckle]. Like, I can handle two at the shop by myself, you can’t handle three, and we had two under two, so...and it’s a long time, like it’s a whole year of being pregnant, and the career stops and everything else kind of stops, and- no, we’re done. [laughter] (Sue)

Dawn and Jennifer talked about the possibility of having another child in the future;

I’m hoping she loves him that much and he grows up and she’ll be like, [quietly] “I want another baby!” (Dawn)

Nine participants talked about their worry for their children into the future, particularly as they start school. Seven parents specifically expressed their fear of their children being bullied or being excluded from social groups at school because of their family structure;

One of my colleagues, her kids also have two mums, and they are like, primary school age, and I know that having had a discussion about the plebiscite, and marriage equality, like some of the kids at school would be kind of mean, and “You can’t really have two mums,” or whatever
else, so that is something that I worry about, and you know, you can’t- like I can’t fully protect my daughter from that. (Sara)

Sara’s worry about being unable to protect her child into the future was echoed by Megan;

I guess every day I- when we’re out in public, I’m fearful that someone’s going to be bold enough to say something to us that’s against our relationship, and I’m fearful that my daughter will be exposed to such negative thoughts and outlooks by people that she doesn’t know, you know, she didn’t choose to be brought into this world, um, and it’s my role to I guess, protect her from that [...] I just get a bit fearful that I’m not going to be able to protect her enough from that kind of stuff. (Megan)

Despite the acknowledgement of future challenges, nine parents expressed hope that the social climate in Australia would change by the time their children go to school. They were hopeful that their children would be protected from some of the current negative attitudes towards their families when they do attend school;

A lot of people just assured me that, um, by the time my children go to school, like, it’ll be probably more widely accepted and stuff, so I guess, yeah, it was just sort of working on being okay with it, and being okay within myself to be able to, I guess, help my child through that if that ever does happen. (Megan)

Fourteen parents talked about their roles changing, or potentially changing, both from when they first became parents to the present and from the present into the future;
Obviously at the start she was you know, sole parent, so she called all the shots and I was kinda just the good friend that’s like, “Oh, yeah, cool,” I just relied on her. And then as things got more serious, and I had to obviously show that I was in it as well, you know, and that Caleb knew and understood that, you know, we were both res- his parents then, so... [shrug] worked for me. (Alison)

I think it will be quite different when Erica goes back to work, ’cause we’ve got Faith on the waiting list for childcare, hopefully to start in January, so...yeah, I think that once she’s in childcare, basically the amount- like ideally if we kind of get what we want, we would both be working four days a week, and then we have one weekday a week each at home with Faith. For me, ’cause I’m a council staff, I will just have to take every [unintelligible] to do council stuff, like, I’ve talked a bit about that already, um, and then we’ve got the weekend. So that would make it kind of a bit more equitable in terms of the time spent with Faith. (Sara)

I think ’cause at the moment, I’m probably a little bit softer than Dawn, and I think that as he gets older and I’m home with him all the time, I’ll start to get firmer [smile] and Dawn will get softer. (Kym)

Shannon discussed how her partner, her children’s stepmother, had eased into the role gradually over time;

She’s, you know, around a lot, uh, the kids really- the kids love her, they come towards her, yeah so she’s- [gestures outwards] she’s gone out into that parenting role, naturally, as in time, yeah. It hasn’t been forced, it’s just been a natural [makes flowing shapes with hands] sort of progression. (Shannon)
This was echoed by Sam, who talked about Alison’s integration into their blended family;

And then slowly but surely, Alison’s integrated herself, so it started with like, [moves hands
together from one side to the other side for emphasis] help with like, bath time, or help with
bedtime, or help with dinner, and then, now we have very...like, [holds hands in front of body,
a distance apart, pams facing each other] she does one thing and I do another thing, and like,
[hands suddenly face up] it- and like I said, organic, it just happened. (Sam)

As most participants had preschool age children or younger, many expressed a worry for child
going into future, especially for when their children begin attending formal schooling. This worry
was related to the effects of widespread negative views of their family structure, and the exposure
of their children to these views. However, many parents also discussed their hope that there will be
a change in the social climate in Australia by the time their children attend school, such that their
fears are unfounded and that their children will be accepted by their peers.

About half of the participants talked about how their roles tend to change over time. Many of
these changes related to trying to find a balance that worked for their family, and changes in
employment for both parents. The following theme relates to participants' parenting decisions and
their reasons for these.

How and why we Parent the way we do

How we Divide Parenting Tasks and Make Parenting Decisions Together

Twenty-two participants talked about how paid employment had an impact on how their
family divided parenting tasks. Specifically, Steve talked about how his changing perception of
parenting had an impact on his family’s work arrangement;
In the beginning, like when we were first planning to have kids, I think it was- I kind of thought of myself as being more of the stay-at-home parent role, um, and then.. I think every parent doesn’t realise how hard having kids is (laughing), um, so, yeah, it quite naturally became (nodding) what, um, yeah, in those first few months being home, it was like, “Okay, this is obviously harder than I thought it was going to be,” in different ways, um, so we kind of- yeah- just I talked to James and got pretty open, which, you know, “I need a little more help, I want to start working a few extra days- you know, a few days a week, to get mentally, you know, in the mind frame. (Steve)

Twenty parents talked about their family’s decision regarding who would be the primary caregiver at least when their children first came into their lives. This decision was often tied to which parent carried the child, breastfeeding decisions, and the parents’ careers and finances. Fifteen participants talked about how breastfeeding was a major initial parenting task, and which had an impact on deciding paid working arrangements and division of other parenting tasks. Ten of these parents discussed how breastfeeding was a deciding factor in who would be the primary parent;

It made sense that she [my partner] would have to be home for some time, because, um, she’s breastfeeding, and then, we haven’t really decided that that’s going to be forever, you know, she’ll do that until she’s not breastfeeding exclusively, so at least until six months. (Georgia)

I think when you have a baby and like, when you’re breastfeeding, you know, your mum is really, for the first year or maybe longer, um, mum has to kind of do most of that, um, we did have Bryce in our bedroom for the first couple of months. (Deb)
‘Cause we were, um, very committed to breastfeeding, so even though it’s possible for one
person to give birth and the other one to be primary carer, with feeding kind of makes it
harder. (Sara)

Imogen, Gina, Rachel, and Stacy talked about how they felt they or their partners did more of
the caregiving and household tasks when their children were first born, due to breastfeeding around
the clock;

A big part of us having a small baby is, like, you do breastfeeding, having to feed every few
hours, so we discussed that, um, and I think if anything, Georgia tries to do more, of all the
other stuff because she wants to compensate because I always have to be- so, um, she will,
yeah, kind of compensates, tries to do more nappies and stuff like that. But we didn’t really
discuss it before it happened. (Imogen)

For Rachel, this time was also an important opportunity to bond with her daughter, as well as
giving her partner a break;

I had to... consciously take on .. uh, and actively take on some of the roles because.. I knew
that I was missing.. that bonding time through not- with Gina doing the breastfeeding and all
of that, so, um, I took on things like, uh.. I read to her before um, uh, before putting her down,
I did that right from when she was born, and that was more for me than for her, that was- it
was just my little time to have with her, so Gina would feed her.. and would give her to me
and I’d sit and read to her and sing her a song, and then I’d- and then I’d put her down, and
then.. and even to this day, that’s what we’ve done every night since then, and- and that
certainly has helped, in- in that bonding- not- not just for her, but for me as well, so that- that
was a special thing that I had with her, and I - I made sure to do the baths as well, and so I was always the one that did that.. and that was important for Gina as well, 'cause it gave Gina.. that break, which she absolutely [chuckle] needed. (Rachel)

Nine participants discussed how the parents’ careers and finances shaped their decision regarding who would be the primary parent; Emily and Lana talked about how they decided who would be the stay at home parent when they began fostering their son;

Lana was probably, well, she was earning more, I think, she was more career minded, [quietly] and I was really happy to kind of not work for a while! But now I’m “really working” [laughter] Um, yeah, I think it was those factors, um, yeah, she thought I might be a bit better at home full time, I don’t know, I think it was more money, financial, and the fact that she enjoyed her job more than I did at the time so yeah. (Emily)

Kym, Dawn, Deborah, Ash and Jennifer also talked about how finances and earning capacity were factors in this decision;

I think when Jacob- especially when Jacob was born, and my role was to have the baby and then to feed the baby, and, you know, to kind of be the body for the baby for such a long time that what that left for Michelle was to be the earner for the baby, so it was how she constructed herself. (Ash)

And also 'cause her job earns more than mine, I thought that was also why we were like, this isn't going to work, because we need her income over mine more than anything, and she's very career focused and everything like that. (Jennifer)
For James and Deborah, their or their partner’s flexible job hours were important in establishing who would be the primary earner or stay at home with the children;

So, um, I guess with my job, ‘cause I’m self-employed, my work is quite flexible, um, so, you know, if I need to be home in the morning for something in particular, or had a really bad night with Jack or something like that, I could just come into work later or, you know, there’s a bit more flexibility around my role, whereas with Karen, you know, she’s- being a nurse she has set shifts, and she has to be at work, you know, that eight or nine hours in the day, and it’s not really negotiable, um, so I guess it kind of made sense that I would- and plus I really- I really like my job, so it kind of made sense for me to be the full time worker when I have the flexibility and I love my job. (Deborah)

Lana and Sara talked about how they found paid employment easier than being the stay at home parent;

It’s been the toughest thing we’ve ever done, I’d rather manage two hundred personnel than look after one toddler, um, ‘cause I find that that’s a lot harder. (Lana)

She was quite excited about the idea of being a stay at home parent, and kind of that being her focus for, you know, at least a year or more, whereas for me, I would- if I would be a stay at home parent, I would- I don’t know, I find it hard to take them out for an hour, I worry that I would be, like, bored, that I would be, stir-crazy, like I’d feel isolated, I’m a workaholic, so I worry that I’d be unhappy kind of feeling disconnected from my work. (Sara)

Fifteen participants noted that they used explicit communication with their partners when dividing parenting tasks and a united approach to parenting;
I mean, we just said, you know, as long as we talk about it a lot and open communication, and be clear about, you know, “You tell me how you feel and ask me how I feel,” and “If you’re stepping in too far I’ll let you know, if I want you to do more, I’ll let you know” So it’s line of communication open to, you know... (Shannon)

Incessantly. Constantly. Like very lesbian-y, all the time. Everything is stuff we decide on together, even if it’s- I can’t give you an example now, but even if it’s something we don’t have to decide on together, we’d still inform each other, you know, intense communication about anything we decide to do with that, um, or, kind of bouncing around ideas together about like the big things like sleep, you know, when they’re little and you’re talking about how we’re going to approach their sleep, we would have to have discussed that first and agreed on a plan before we did anything. (Ash)

However, Gina lamented that there may be too much communication at times;

Sometimes I think there is too much communication, like sometimes it would just be better if, like, someone didn’t care [chuckle] about specific issues, like, um, like I’m wanting to wean Emma ‘cause I’m still breastfeeding her just for that last feed at night, but, like, Rachel has got all these opinions about, like, what sort of bottle and what sort of milk, and what should we do, and like, and that’s really hard, ‘cause- from, I don’t- not from everyone but lots of my friends said, just like, “Oh my God, my husband couldn’t care less,” like, or have any opinion about it, and just be like, “Oh, go, whatever you want, up to you, darling, you’re weaning him,” like, so sometimes it’s like, I think because there’s two mums, that sort of communication stuff, there’s like a lot of talking and that can be frustrating sometimes. (Gina)
Ten participants talked about how their different parenting roles arose from their different strengths;

I sort of would be more playful and, like, just play with her, like just doing crazy stuff, whereas Rachel is really good with, like, reading books, and like, you know, learning stuff, and has a lot more routine with her. (Gina)

Alison does Caleb’s lunch every day for school, ’cause I fucking hate making lunches and she doesn’t mind doing it! [laughter] (Sam)

Twenty-one parents talked about how it was ‘natural’ or ‘organic’ to come to their roles. These participants talked about their division of parenting tasks coming about without a great deal of explicit communication between the parents;

Just falls into place, usually we all just do any- [shrug] I don’t know, ’cause everything just falls into place. We go to the shops, decide what everyone wants for dinner, then- I don’t know, just everyone- everything just falls into place, like nobody says, “today I’m doing this and this and this,” you just do it if it needs to be done and if you have the time to do it. (Michelle)

For us it was just a natural kind of organic thing that just happened, um, we have a pretty equal relationship when it comes to- like before we had the baby like when it comes to household domestic stuff, we’ve always been pretty, um, like equal there. Um, so it just happened really naturally that just try to do as much as we can for the other person. (Imogen)

And then slowly but surely, Alison’s integrated herself, so it started with like, [moves hands together from one side to the other side for emphasis] help with like, bath time, or help with
bedtime, or help with dinner, and then, now we have very...like, [holds hands in front of body, a distance apart, pams facing each other] she does one thing and I do another thing, and like, [hands suddenly face up] it- and like I said, organic, it just happened. (Sam)

Five participants talked about what they had decided their children would call themselves and their partners;

It’s nice when people make the effort to learn our names, and I’m Mama, and Michelle’s Mummy, but from, like, I don’t know, two, Jacob knew, if, the childcare workers would say to him, “Mummy’s here,” or “Mum’s here,” and no-one is Mum, so that was like a non-name, you know, and he would know that what they called us might not be what our names were, like he could understand that from a very young age, he could put his own meaning to those kind of words, but it is nice when people make the effort to remember instead of just using a generic “Mum” or “Mummy” (Ash)

I always wanted ‘Mum’, um, and then we were thinking, we were thinking ‘Mother’ or what else could we use, and then [my wife] just went, "Mama!" and I was like, yep, why not, so, um, yeah, and it just makes it easier as well with having paperwork stuff here and there, ’cause I can write 'Mum' and then just write 'Mama', so yeah. So it’s a lot easier on paperwork as well [chuckle]. (Jennifer)

For Emily and Lana, who are fostering their child, they also discussed what their son calls his birth parents;

To make it easier for him, we’ve referred to [his birth mother] as ‘Mummy Anne’ and [his birth father as] ‘Daddy Ian’ ‘cause all of [his siblings] refer to them that way, so if he asks later, she’s
‘tummy mummy’ and we’re ‘every day and always mummies’, and hopefully that will help him work out the difference. (Emily)

Ash and her partner conceived their child through a known donor, and Ash was specific regarding the language she uses to describe this relationship;

If we’re at the shops, especially looking quite straight, if we’re at the shops and I say, “Tomorrow you’re going to Dad’s house,” that completely erases my family, but if I say, “Tomorrow you’ll go to your donor’s house,” or, “Tomorrow you’ll go to Jonathan’s house,” and then Jacob goes, “I’m going to see my dad,” well, that’s where I can sit with it being okay. So, I’m not going to call him those things, but I feel like I can’t intrude if that’s how he decides that’s how he wants that relationship to be, then [big shrug] he can call him that if he wants. But anybody else, I correct them, if they say, ‘cause like I said, our donor’s quite involved, if anyone refers to him as ‘the father’ or the whatever, I correct them and I say, “No, he’s the donor.” Yeah. (Ash)

Deborah, Ash, Lisa, and Stacy talked about how their children spend time with each parent shapes the parents’ roles;

Because Karen’s at home with them during that time, then she, you know, she has that, I guess, the main- [grimace] I feel comfortable in saying the main say in how they’re disciplined, because, you know, she has to deal with them, you know, most of- she’s at home with them three days a week, they’re in day care two days a week, because of Karen’s- she does work, works one night and one day, generally, um, yes, so, um, you know, if there’s something that I believe is- should be done a particular way, then I’ll kind of bring it up with Karen, so I guess if I have really strong disbeliefs, or if I have a strong belief that it shouldn’t be a particular way,
then I’ll bring it up with her, but generally I kind of just let her do the disciplining, yeah [...]
because she’s at home with them the most, so we didn’t actually sit down- oh, we didn’t actually sit down and go, “Okay, well, you know, your role is to discipline the children,” it was more so “Okay, you’re at home with them the majority of the time, so, you know, I’ll follow whatever discipline you choose to have with the children, if it’s something that I disagree with, then I’ll bring it up with you, otherwise, you know, I’ll just go along with what you think.”
(Deborah)

Paid employment had an impact on how most of the participants divided parenting tasks with their partners. Decisions surrounding primary care of the children when they first came into participants’ lives were related to which parent carried the child, breastfeeding decisions, and the parents’ careers and finances.

For half of the participants, explicit communication with their partners was crucial to dividing parenting tasks and maintaining united parenting team, although many participants also felt that coming to their parenting roles was ‘natural’ or ‘organic’. For many participants, their different parenting roles arose from different strengths and interests. The next section describes how participants use their different roles to work together as parenting teams.

**Most of the Time we Have Different Roles, but we Share Parenting and are a Team**

Fifteen parents talked about engaging in different parenting tasks, or types of tasks, than their partner, as commented on in subtheme 2.1. For example, six participants talked about their division of household tasks with their partner;

We’ve always shared the load with everything, you know, like, and I mean, Amanda does most of the cooking, but I fold the washing, like, we’ve both got our little jobs that we do, um, I never felt comfortable bathing him, because I was just so, like, worried that he was going to
slip out of my hands or something, and so she took on that, um, early on, but I would kind of do bed time. (Lisa)

Emily discussed how her role encompasses sourcing medical care for her child, but her partner, Lana’s, role does not;

I take care more of the medical side of things, with the appointments and things, and I have to deal a lot with... the, um, fielding the calls and all the...um, not acute stuff, that’s more medical, but I mean medical, um, the more...imminent stuff that needs to be done, like, I am-Lana doesn’t really have to deal with a lot of that. Do you know what I mean? [ticking off on fingers] Like I go to the [health service], I’ll go to the [other health service], I’ll go to all these things, she doesn’t do that.

However, seven participants stressed that while their roles were different, they were equal.

Sara eloquently explained her philosophy when it comes to work;

So, it definitely was deliberate that we wanted an equitable division of work, where I guess work is defined as paid and unpaid, and so usually what happens when we’re at home is both of us are working, so, like, she’ll be doing the laundry while I do the dishes, or both of us are resting, or you know, whatever, watch the TV or whatever else. And if I’m not home then we’re kind of both working, ‘cause she’s parenting and I’m at work, so...yeah, that’s pretty even. (Sara)

Ten participants talked about having the same parenting role as their partner, in that they both do all parenting tasks;
Basically, we do everything exactly the same, except the breastfeeding, I think she probably does a few more nappies than me, because I'm breastfeeding. Um, so I will usually feed and then- well, actually a lot of the time after I finish feeding, Georgia will take her to burp her, um, so, besides that, we're everything's pretty fifty-fifty, really. (Imogen)

You know, my idea of teamwork is that you just do the whole thing, whatever is required is what you do, so- and Jana seems to have the same thought in that we- we just have always worked out that way, so whatever needs doing, whoever is capable, more of a communist attitude, I guess [laughter] Socialist attitude, so we just- we don't ever kind of think about that, we don't ever go, "Oh, that's not my job," or whatever, um, yeah [shrug] I mean, they're little people, and there's only having to breastfeed them that was different, everything else is any different. (Sue)

For Jess, a feeling of togetherness was important for her family;

Like if we’re cooking, like we’ll all go and cook together, you know what I mean? If we’re all gonna do something, we’re just all gonna do it together, if we’re going to play a game, we’re gonna watch a movie, it’s all just all of us together. So I don’t- yeah, we don’t really do much separate, so we’re always- you know, we’ll go down here [points out the window] for walks, we’ll come and find in the bush together, we’ll bring it all back, [motions scattering something on the floor] look what we all found, you know what I mean? (Jess)

This notion of working as a team was common, with thirteen parents also talking about how they and their partners work together to parent their children;
I guess it continues to evolve, um, [pause] I think we’re a lot more fixed in our ideas at the beginning, and like, as we’ve gone along we’re a lot more kind of collaborative, I guess, we still have disagreements about what we should do with the kids, but we work them out, like we don’t, you know...we work them out, basically, and try to present a united front to the kids, ‘cause otherwise they walk all over you [smiles]. (Anne)

I give him a bottle, we give him a bottle over night time, and, um, we just tried to work out what was the best way to do that, so I’ll give him the bottle around ten, ten thirty, eleven thirty, and Kym will have a good six hours sleep at the start of the night, and then she’ll be up for the rest of the night with him and I’ll have a good six hours solid sleep in the back half of the night, before I have to go to work. (Dawn)

I think, um, we’d been together so long that we have similar thoughts and attitudes and processes, and we both work in kind of that same sort of field, we see lots of kids between us and lots of kind of parenting stuff between us, and I think we just- we always end up kind of being on the same page, we have really similar beliefs and that, there’s very few things that we differ on, so I think when we had Orlando, we already had a baseline knowledge [moves hands outwards from centre, hands flat, palms facing down] of how each of us would do things, so, you know, sleep routines, discipline kind of routines, um, you know, what we thought about simple things like screen time, eating, all that sort of stuff, we were already on the same page, so it made life really easy, and that we weren’t arguing with each other. (Sue)

As noted in subtheme 2.1, about half of the participants noted that they engage in different household and parenting tasks with their partners. However, some participants stressed that these different roles carried the same importance to running their household. About a third of the participants felt that they have the same parenting role as their partners and are both equally
involved in all parenting tasks. Despite these differences in figuring out who does what role, many participants noted that they and their partners worked together as a parenting team. The following section will discuss influences on participants’ parenting.

**Influences on our Parenting**

Participants described many factors which influenced their parenting methods and techniques. Eight parents talked about how parenting books, parenting experts, and wider literature on the topic were helpful in establishing parenting habits, and solidifying existing thoughts and feelings about parenting;

And on research we realised that yeah, we were actually doing that attachment parenting style more than anything else. (Carol)

Imogen reads a lot of books and does a lot of research, and I’m not really a researching kinda girl [smiles]. Um, but she did read a really interesting book, it’s called the Danish Way of Parenting, and she read that and kinda was telling me a few bits and pieces from it that I really- that kinda resonated with [me]. (Georgia)

However, Rachel expressed her frustration at a lack of resources specifically for parents in same-sex relationships, and the lack of representation of same-sex parents in the media more broadly;

I’ve read various things on, like, just Google and, some, you know, some gay parenting, um, there’s not a lot out there.. from what I’ve discovered, um, and certainly for books, I went looking for books first, and, um, [shaking head slightly] I’ve- I- there was really.. nothing out there, especially from a lesbian point of view. (Rachel)
Whilst resources such as parenting books specifically catering to same-sex parenting exist (e.g. *The Complete Lesbian and Gay Parenting Guide* by Arlene Istar Lev), Rachel’s frustration at not being able to find any such resources points to an issue with access to these works, and a lack of knowledge about them within the communities in question.

In addition, Stacy hinted towards the notion that too much parenting literature may lead to a negative effect;

I think one of the downsides of being a parent today is that it’s way too easy to read way too much. (Stacy)

Eight participants discussed how they worked in certain industries and professions which helped shape their parenting practices and their philosophies about children, families, and parenting;

And our values, they really inform how—like it’s really— the things we prioritise with Jacob are based on our values, like him being a kind person, and him respecting when others say “No,” for example, you know, so I work in violence and abuse prevention, so that’s—he’s far, far ahead of where other three year olds—four year olds are, when it comes to, like, when somebody says “Stop, stop touching,” all that kind of stuff, you know, it’s our values really inform how we parent as well. (Ash)

And work helps is that we— you know, I’m across the research of things, I’m aware of things, I’m aware of brain development things, you know, I’m aware of what is normal behaviour, so is Jana working with toddlers it’s wonderful, is that we both go, “That’s normal three-year-old behaviour,” so it’s easier to mould your own attitudes based on that sort of stuff. (Sue)
For Amanda, however, who works in childcare, this influence was less than she was expecting;

It was definitely a learning curve [child crying loudly] from working in childcare, everyone’s got their, “You’ll know what you’re doing, you work with kids every day,” it’s completely different when it’s your own child, ‘cause your heart’s attached to it, so it was definitely a... what.. like, now we’re home, like, what do we do? (Amanda)

Many participants discussed the importance of role models, both positive and negative, in forming their views on parenting and their parenting practices. Fourteen participants talked about parenting role models who they sought to emulate;

My sister has older children, Amanda’s sister has children, so we’ve picked up bits and pieces, and um, [shakes head and shrugs] yeah, nah, I think everywhere, online, going on like online forums, there’s everything, playgroup, um, Mason and I went to playgroup from him being about five months old, so, you know, that obviously helped as well [nodding]. Yeah. (Lisa)

Erin and Jess talked about how they followed their partner’s lead when it comes to parenting practices;

If I mimic anyone it’s probably Megan to make sure that we’re parenting Chloe in a similar way, so that Chloe doesn’t get mixed messages. (Erin)

Sixteen participants described witnessing parenting practices that they disliked, and that they intended to avoid or implement alternative strategies with their children;
My parents divorced when I was really, really young, um, my dad not being there so much, I’ve tried to, you know, learn from the mistakes of the parents kind of thing, um, trying to be very... present in my children’s life. (Steve)

I feel just looking at my family and like my parents and then looking at me and Erin, um, Mum was left to do everything on her own, and fulfilled the- this could also be to do with, like, the time of, like, when they were brought up and stuff, but Dad was out working and didn’t help, and he’d go down to the pub and stuff, and it was just like, it was predominantly the woman’s role to do everything and housekeep and raise the [children], where with Erin and I even find with some of my friends online as well, like they’re constantly sitting there and whinging about their husbands not helping out doing stuff, and I just kind of sit back and laugh, [smiling] just thinking, ha ha, like, not laugh meanly, but just thinking to myself, I don’t have this issue, ’cause we both- I guess we both have that maternal, caring instinct about us that we- we both- I guess we both know how we want our family run and how it needs to be run because we do have our daughter in the forefront of our mind. (Megan)

I had quite a rough childhood, I had a mum who wasn’t very- she wasn’t neglectful, but she wasn’t very good at being a mum, and so I reflect on what she did as a mum and I know that that’s definitely not what I want to do, so I then do the opposite. (Carol)

As Steve, Megan, and Carol described above, a number of participants felt that there were flaws in their own parents parenting, which they wanted to avoid when raising their own children. Despite describing a difficult childhood, Lana acknowledged that her parents raised their children in the best way that they knew;
My dad was very aloof, uh, my dad didn’t talk about anything, uh, my dad was a borderline alcoholic – a functioning alcoholic – my mum had four kids all under the age of six at one point, my mum didn’t cope very well, my mum had some mental health [issues] [shrug] and Dad was never there, so I guess from that I’m like, “I’m not going to be that person for my son, I’m not going to, you know, not discuss how I feel, I’m not going to show how I feel, not going to not be there for my son,” Um, I want him to grow up as balanced as possible and avoid all the therapy bills [smiling and nodding] […] I mean, my parents did the best they could, and I know it was really tough back then, a lot different than it is today, but yeah, it was…it was tough. (Lana)

There was some overlap with participants seeing their parents as being both positive and negative influences on their own parenting, with seven participants noting aspects of their own parents’ parenting that they both liked and disliked;

I don’t mean that my parents haven’t parented me well, don’t get me wrong, I guess as a young toddler I don’t remember how I was parented, um, yeah, my parents have done a fantastic job, and I love them very dearly, there’s probably things as Chloe gets older that I might do differently, like I was very much sheltered from things, um, as in, um, I wasn’t allowed to go out to places, um, once I turned eighteen I still had a curfew and stuff like that, so I think it’s- in terms of how I would have liked to have been parented, it’ll probably more come into play as Chloe kind of gets to her teenage years. (Erin)

Nineteen participants talked about how their upbringing affected their own parenting more generally;
I think it’s just natural, like once you get into a stressful situation like parenting [half chuckle] you will just fall back on whatever you have implicitly learned from your parents parenting you, um, so yeah, I’ve been quite aware of that, I guess. (Gina)

I can’t engage with [parenting literature] on just one level because I’m reading it and I want to relate to it as me the mother, but then I want to relate to it as, you know, as me the daughter, and I would do that differently, so it’s kind of hard to- I can’t read it on both levels, and Michelle would say the same, her mum’s too soft, mine was too hard, and hers was too soft, um, and so we definitely talk about how that hopefully helps us find somewhere in the middle, but neither approach is how we want to be with our kids. (Ash)

A lot of our parenting has come from our own upbringing, like we have to bring those into the equation, um, although we were smacked, it never ever- we both agreed that we don’t do that with Jack, [smiling] we try to reason with him, and at times we just...[both hands up, palms facing out, in a ‘hands off’ gesture] but we don’t- we don’t advocate that, as some parents do, but we don’t, but we were smacked, both of us. Um, um...and I guess what...I think I was brought up in a very loving home, Lana’s different, but she can answer that, um, and I guess I had a stay-at-home mum, and that was kinda nice for me, so I wanted to emulate that for Jack, um, the things that we don’t do is um, [sigh] we do try to talk more about emotions and feelings, we try to talk so he can communicate really well and be in touch with that, which I think I didn’t really get and neither did Lana, it was just the era, maybe [shrug]. I don’t know... (Emily)

Lana and Gina noted that they had no parenting role models and came to their parenting methods in other ways;
Just trying to find, like, role models, I guess, is quite hard, like, like same-sex couple role models, ‘cause we don’t have, like, a lot of gay friends, um, and we went to the playgroup, or Rachel went to the playgroup [chuckle] ‘cause she only went once and she was a little bit like, “Oh..” you know, just not for us for whatever reason, um, so, I guess that’s quite difficult, like you’ve sort of just gotta make up your own roles. (Gina)

There were many factors which influenced participants’ parenting methods and techniques. Some participants talked about books, parenting experts, and other parenting literature which had shaped how they parent their children, and others noted that they worked in certain industries that influenced their philosophies about children, families, and parenting.

Many participants spoke about role models influencing their parenting philosophies and practices. About half of the participants discussed parenting role models they sought to emulate, and many also described witnessing parenting practices they disliked, and wanted to 'model away from'.

Participants often viewed their parents as their first parenting role models, for better or worse. Some participants noted that there were aspects of their own parents’ parenting that they liked and some that they disliked, and many participants talked about how their own upbringing influenced their parenting in a more general way. The next theme will discuss how participants view how their families differ from different-sex couples.

We may be Different to Different-Sex Couples, but That can be a Good Thing

Notions of Different-Sex Parenting, Gender Stereotypes, and how These Affect our Family

Participants commonly discussed notions of different-sex parenting. Fifteen participants shared their thoughts and observations regarding different-sex parented families, often reflecting common stereotypes of mothers and fathers;
I think a lot of parenting’s quite fear-based, like, you know, you have to be scared of your dad
[furrows brow and clenches hand into a fist] , and- and your mum is, you know, you don’t
really respect your mum, she’s just the- she’s just this person that does everything for you
that you can walk all over, and I think there’s- like there’s that kind of an attitude.  (Georgia)

The dads go out to work and the mums get stuck, like, at home, looking after the kids, and
that’s been like, a marked change, ‘cause our friends, the people that I’m thinking about and
are sort of like, very progressive, and would never have said that they would have been like
that as parents, [chuckle] before being parents, and then suddenly, like, they’re just in the,
like, you know, just suddenly they’ve just gone into those roles, and mum’s complaining about
the housework and the dad’s like, wanting to have a beer, and just like so...[chuckle]
gendered, which even they hate, but it’s just naturally happened somehow. (Gina)

As described above in subtheme 2.3, nineteen parents talked about how their own childhood
influenced their parenting. When talking about aspects of how they were raised, Lana, Deb, and Ash
described dominant discourses of mothers and fathers;

Michelle was raised by a single mum, and, um, still saw her dad, but he didn’t, like, raise her,
and, um, I had like a very traditional, mum at home who did everything, dad who [shrug]
didn’t do anything, um, so that’s definitely influenced us, whether it’s been like, that’s how we
want to be, or that’s how we’re consciously not being. (Ash)

Ten parents reflected on how these observations and notions of different-sex parenting differ
from their own experiences of parenting;
[Different-sex parents have] generally got more [holds hands apart, palms facing inward] rigid roles, um, so, in general, like, you know, my brother and his wife have a child, they would take it in turns to get up at night, or they were taking it in turns to get up in the morning, used to drive me nuts, ’cause I used to think that, you know, if you’ve had a difficult day and you’re then the one that has to get up at night, that’s a bit rough, um, and then, sort of, Jana’s got siblings that have kids on her side as well, they sort of have rigid- more rigid rules and they sort of just go- it’s an easy road to never have to change a poo-y nappy, for that one, or it’s an easy road or a nice road for that one to be able to do that, or to not have to do the disciplining, or whatever, and I used to just kind of go, [shrug] you know, my idea of teamwork is that you just do the whole thing, whatever is required is what you do, so- and Jana seems to have the same thought in that we- we just have always worked out that way, so whatever needs doing, whoever is capable, more of a communist attitude, I guess [laughter] Socialist attitude, so we just- we don’t ever kind of think about that, we don’t ever go, “Oh, that’s not my job,” or whatever. (Sue)

six other participants also felt that different-sex parents have more rigid parenting roles than same-sex parents;

We knew with some other couples that, like, or, you know, we’d seen other parents, ’cause we’re talking to friends where, like, the baby’s born and then the mum – if it’s a mum and dad – the mum is expected to do most of the parenting and most of the housework, and most of the cooking, and the dad, like, you know, stuff- his workload doesn’t increase very much, and so we were very determined to not have that model. (Sara)

Seven participants went on to describe their own parenting roles to be more egalitarian, in comparison to the roles held by different-sex couples;
I know friends of ours, um, I just think of one couple, um, she will pick up her son from daycare, she'll then get dinner, she'll do the housework, husband will be have worked all day, then come home and have a couple of beers and that's pretty much the extent of his help.

(Emily)

Participants often compared their own families and parenting with different-sex parented families in other ways. Dawn, Jennifer, Jana, and Rachel compared the non-birth mother role to the role that fathers have in different-sex parented families. For example, Dawn commented on the stronger connection her partner, their child's birth parent, had with their son;

I don’t know if dads feel that way, but, um, [shrug] I- yeah, I think she has the stronger connection with him than I do, but I- I'm not bothered by that, 'cause I love the fact that I didn’t have to give birth. (Dawn)

Rachel, whose partner gave birth to their daughter, strongly disliked the notion of being compared to a father figure;

I think everyone wants to box you in as the dad, it's like, I'm not the dad, but, I- then you go, well, I'm not the birth mother, and it's like, yeah, I think that's where people then get stuck, because then they don't know what to- what box to put you in, and people want to put you in a box, and, uh, and others- and I think it's because they're wanting to understand it, but because they don't know what box to put you in, then.. they just go back [mimes pulling something out of own head] to what they know, and it's like, yeah, but that's offensive, so [chuckle] don’t say that, [chuckle]. (Rachel)

Rachel went on to explain how dominant notions of motherhood has had a detrimental effect;
With two mums, one of them has to be up here [moves one of her hands slightly above her head] in that role that we understand as a society, and it’s like [shaking head] no, again, it’s offensive, and I think that’s where my empathy for the fathers has really come through in going, well, we, it’s not that they’re- they’re naturally like that, we’ve boxed them like that, and we do that from day one, and it’s- it’s horrible, yeah, it’s very [makes disgusted face] but that’s my take on it [smile]. (Rachel)

Having to conquer that heterosexual, mother/father role, um, has certainly been [sigh] an ongoing thing, um, even- even from people who are supportive, or our family, or that, we, you know, are very close, and um, where they...they’ll just say things like, again they’re, it’s just reinforcing that “Well Gina gave birth, so- I’m the mum, but Gina gave birth so she’s really the mum,” [rolls eyes] um, you know, and that just, from my point of view, is just hard to deal with. (Rachel)

However, not all participants felt that their families lay outside the norm. Steve and Georgia talked about how they saw their parenting roles as being identical to that of parents in different-sex relationships;

My role as a parent, I guess is the same as any dad, um, yeah so it’s... mornings, early wakeups, get out with the boys, cooking, playing, um, educating, I guess to some extent, they’re only two and a half turning three, uh, reading stories and books and all that kind of stuff. (Steve)

Erin noted that she feels her family is the same as other families;
I don’t view my parenting journey any different to anyone else, ah, Chloe’s not different to any other kid, um, all of our friends are actually hetero couples, with the exception of one, who’s same-sex couple, and yeah, we’re no different the way that our family grows to theirs.

(Erin)

Deborah, Amanda, and Ash commented on the similarities between their families and families with different-sex parents;

Karen’s the more emotional, sensitive person, and I’m the more practical person, so I guess we still have both [alternates moving hands up and down to resemble a scale] sides, and kind of- I guess in a way, we have similarities to a heterosexual couple as well, because, you know, Karen is the more [moves both hands to one side of the table] she’s kind of the more emotional person in the relationship, where’s I’m [moves both hands to the other side of the table] you know, my, you know, I guess, being the breadwinner, and being more practical, the one that kicks the footy with, you know, with them, and, you know, it’s kind of similarities to a heterosexual couple, in that way.

(Deborah)

Michelle and Jess were in the unique position of both being in different-sex marriages prior to forming a family together. They both described traditional roles in their marriages, which Michelle compared to being like a single parent;

I was pretty much a single parent, like, because- not really, like… in a way, because their dad was forever just at work, so it was me just doing everything for them, so, yeah. (Michelle)

With my husband, it was only me doing the parenting, whereas when it’s me and Michelle, it’s actually both of us, so that I’m adjusting to, ‘cause I’m not used to having someone else’s
opinion or having someone else say something, it’s always been me, so, yeah. [nodding] I’m learning from that as well. (Jess)

Jess went on to compare her previous experiences with her current family, emphasising the togetherness that she felt;

Like, like if we’re cooking, like we’ll all go and cook together, you know what I mean? If we’re all gonna do something, we’re just all gonna do it together, if we’re going to play a game, we’re gonna watch a movie, it’s all just all of us together. So I don’t- yeah, we don’t really do much separate. (Jess)

About half of the participants talked about their notions of different-sex parenting, which often reflected common stereotypes of mothers and fathers. Participants also discussed how their observations of different-sex parenting, including their feeling that different-sex parents have more rigid parenting roles, differ from their own experiences of parenting.

Some female participants discussed the ambiguous role of the non birth mother, with some female parents comparing themselves or their partners to a father role. Other participants did not like their role being thought of in this way and talked about how they feel their role is thought of by the wider community.

Still other parents felt that their roles and their families were identical, or very similar, to different-sex parents and families, stressing the normalcy of their family configuration. Two participants were in the unique position of being in different-sex marriages prior to forming a female same-sex family, and this gave them a unique insight into how same- and different- sex families operate in their cases. The following section discusses how some participants feel that being in a same-sex parented family gives the parents freedom in their parenting roles.
We Have More Freedom to do What we are Good at as Parents Outside of Gender Roles

As mentioned above, six participants discussed how they felt that different-sex couples have more rigid parenting roles than same-sex couples, and Gina talked about how she felt that there are no same-sex couple role models for families like her own. As such, twelve participants described the ability to create new roles within their families for themselves and their partners as a strength of their family;

There’s like that social expectation of like, women do more work around the house, and we are both women, there’s not, like, a default model to use, so you sort of have to create your own model, and I think that’s good (Sara)

Maybe from already having been, like, in an alternative kind of relationship, and not having those strict rules, we’re already outside of like, what society would expect us to do, so then I guess we had the freedom to be more creative with our roles and our- yeah. Yeah, it is really good in some ways, ‘cause you’re not stuck in those roles, yeah. (Gina)

Steve, Imogen, Sara, and Gina talked about how they were freer from gender stereotypes and dominant notions of motherhood and fatherhood than their counterparts in different-sex parented families;

It can be a good thing, because we’re not restricted by traditional gender roles, we really just work towards your strengths rather than what’s a preconceived idea of what we should be doing, which I really agree with, um, that, yep, in our family we obviously, we are more inclined to do things that are in our- what we’re good at. Um, so yeah, Georgia’s kind of a little bit better at putting her to sleep than I am, um, you know, and I’m better at some other things, and same stuff just ‘round the house, you know, domestic duties and stuff. (Imogen)
Sue noted, half jokingly, that one of the good things about being in her family configuration is that she and her partner get Father’s Day off;

Well, we miss Father’s Day which is really wonderful, so it’s a day where we don’t have to have the stress of that [laughter]. (Sue)

Although Sue said this in jest, it alludes to the wider reaching freedom of being in a family such as hers.

Many participants talked about having the ability to create new roles within their family, and how this was a strength of having same-sex parents. Other participants talked about how they felt freer from gender stereotypes and stereotypes of what mothers and fathers do when compared to their counterparts in different-sex families. The next section describes how participants feel they offer more nurturing and empathy for their children and partners than parents in different-sex families.

**We Offer More Nurturing and Empathy for our Children and our Partners**

Eight participants talked about being on the ‘same level’ or wavelength as their partners, or understanding their partners better as they are the same gender;

I don’t have to wonder why she’s being crazy, um, because I probably already know why she’s being crazy, um, and I find it helpful to be able to remove that kind of argument, is it removes an easy argument to be had, I don’t have to go, “It’s because you’re such a man,” or whatever, like, you just act the way you do because you’re the person that- the gender is irrelevant, because the gender is the same, I think where things are different then they become a
problem in themselves, if they're going to then they will. I think having the same gender makes gender completely irrelevant in what we do. [shrug] which is good. (Sue)

Nine participants discussed how they felt their two-mother families had more empathy;

It’s good for the kids ‘cause they’ve got two, sort of the nurturing [waves hand for emphasis], empathic kind of side, I guess. (Anne)

Without totally stereotyping, um.. I think... I think more emotional empathy, in terms of certainly, like the beginning, the hormones and the anxiety and all of that, I think- I think certainly... um, I think being- being hormonal yourself and having, you know, already dealing with some version of that, I think there’s certainly a level of empathy that I think would be different. (Rachel)

Amanda talked about a ‘mum instinct’ in her family;

In some aspects of raising kids that having two mums is.. you know, is positive, we um, I don’t know, just that mum- that mum instinct. (Amanda)

Five parents talked about how they were aware of their partner’s needs and incorporated this awareness into their parenting role. For example, Carol discussed taking over parenting tasks when she saw how exhausted her wife was;

For me to have special time with my son...so I’m the one that always baths him, and that’s how he and I have bonded, so that was the only conscious division of duties, you know, everything else- I just saw how exhausted and tired she always was, when he was born, he
was jaundiced and quite little, and so he had to be fed every two to three hours, and it would take an hour to feed him, and so she was just exhausted constantly, so I’d try and do as much as I could, to help her as well. (Carol)

Rachel discussed how she felt her family with its two mothers provided more emotional support for her daughter;

I think for Emma... I think there is.. an emotional nurturing that I think.. she gets from both of us. (Rachel)

Participants described being on the same level or wavelength of their partner, as they are both the same gender. The participants felt that this helped them to understand their partners better. Participants also discussed how they were aware of their partners’ needs because of this, and that they were able to incorporate this into their parenting. The following section will discuss participants' notions of how their children have a better understanding of and acceptance of diversity.

**Our Children Have a Better Understanding of and Acceptance of Diversity and Community**

Six participants talked about how they felt their children had a better understanding of and acceptance of diversity, as their family had two parents of the same gender;

Because our family is- will be the different to some of the other families that Faith will see, it means that there’s no way to get around the reality of, like, talking to her about diversity, and inclusion, and this kind of message of, ‘everyone is different, and that’s good,’ and, um, you know, it’s, like, nice to have, like, different kinds of friends, and that kind of upholds the diversity message, I think. (Sara)
Deb, Deborah, Sue, and Amanda talked about how they and their children have pride in their family:

I took Mason to the shops and for the first time, he was talking to a little girl and I actually heard him, she said, “Oh, my mummy and daddy are down at the shop,” and he said, “I’ve got two mummies,” and that was the first time, and then he looked over and gave me a big grin and that was the first time I’d actually heard him say it to another child. that, you know, I was just, like, you know, this is good, he’s- he gets it, and.. so it was, yeah, made my heart stop for a little minute, so I’m just getting to that point where he’s happy to tell people, like, he’s not embarrassed, he’s not- he doesn’t think it’s anything different, his friends at daycare don’t think it’s different, so. (Amanda)

In addition, five participants talked about how their children look different to themselves or their partners and their experience of this. Often, this was indicative of family diversity and an opportunity to instil the value of diversity with their children;

‘Cause Erica has blonde curly hair and blue eyes, so I was expecting the baby to have blonde hair and blue eyes, and when she came out she had dark hair and dark eyes, and I was like, “That’s not my baby!” (Sara)

So I flit on a bad day of going, “Oh, what have we done,” especially for Millie who we used a really dark-skinned donor for, so Millie’s actually darker skinned, so she is very very little and dark skinned and has two mums, and I kind of go, that would potentially be a lot to bear, for her, as opposed to Orlando, who’s very white. [chuckle] And relatively tall, and big, and whatever. (Sue)
Sara, Jennifer and Jana had the experience of the non-birth parent looking more similar to their child than the birth parent, and this led to some potentially awkward situations;

I even had this, um, this cleaner at the shops say to me, “Oh wow, is that your son?” I’m like, “Yeah, that’s my son,” “Oh, he looks so much like you!” I’ll be like, “Oh, thank you.” But inside, he’s got no- he shouldn’t look like me at all, but, like, everyone at work says, you know, “I can’t believe you didn’t give birth to Orlando, ’cause he looks like you and he’s-“ so he’s got my personality, where Millie has Sue’s personality. (Jana)

Sara and Ash talked about how they felt a connection with other families who also have same-sex parents. Sara stressed how it is important for her daughter to have a support network of other children in similar families;

She will have a lot of role models in terms of in other kids who are a bit older than her growing up with two mums too, so I hope that that support network will help support her and she can ask them on a kid-to-kid-level being like, “What do you do when kids say this?” we can give her advice, but like, I don’t necessarily know, like, you know, the inner workings of the mind of like, a ten year old, in 2027 [chuckle]. (Sara)

Some participants felt that their children had a better understanding of and acceptance of diversity due to their family structure. Other participants talked about how they and their children had pride in their families, and some participants discussed how their children look different to themselves and their partners. For these participants, this was often an opportunity to further instil the value of diversity with their children. The following theme describes support structures for the parents I interviewed.
We get Support From Many Places

Support From our Families

Ten participants discussed receiving support from their families, both practical and emotional;

We actually went to [Country in Oceania] for a holiday and stayed with his mum and sister, and just having that extra set of hands, we were like, “Oh God!” It’s so- it’s so much easier with family around, so we moved to [Second Australian City], ’cause in terms of career there’s not much going on for us in [Country in Oceania], um, and just being, just having family close by has just been amazing. (James)

When we first had Mason, um, ’cause obviously the other pregnancy didn’t work out, um, it was crazy, like we were really lucky to have so much support, ’cause we were going through fertility for so long, like, we had so many people rally behind us, we had so much love and support at work, and friends and family, and everything. (Lisa)

Megan described how she was able to communicate with her family better after having a child herself;

There was a strained relationship with my dad, who, um, that has been kind of fixed now as well, and I guess me having a child has allowed me to communicate with my brothers and their families a little bit more, yeah, so I guess, yeah, the relationship with my mum has like, always been quite solid and good, but um, I guess, yeah, just having a child kind of makes me feel like I can relate with the rest of my family. (Megan)

However, not all extended families were supportive. Six parents described hostility to varying degrees from various family members;
Deb’s family have been pretty awful to us, um, so yeah, that was pretty rough, and Deb’s had a hard time coming to terms with that. I don’t speak to her family any more. (Anne)

My sister has a husband, which when he [our son] was born didn’t want nothing to do with him, he said, “That’s, you know, disgusting and wrong, he’s not going to be loved, he’s going to be bullied, he’s not going to be cared for,” Um, he still hasn’t seen him to this day and my son’s nineteen months now, and this is my brother in law, so, and he still hasn’t seen him, ’cause he says, “Oh, I was brought up in the way that, you know, parents were a mum and dad.” (Jennifer)

Jess described how her ex-husband’s family fought for custody of her children because the family did not like her being in a same-sex relationship;

At the moment, I’m in Family Court, so that is a lot of pressure, um, I’d had my kids full time, then my ex-husband ended up going to jail for fifteen years, um, and then I wanted to move out and get a divorce, and because it’s a Muslim family, and they’re a tight, tight family, they didn’t want that, they wanted me to wait for fifteen years, and I was like, “No, I’m not waiting,” and then a while later, I met Michelle, and obviously Muslims are...they’re against the gay/lesbian scene together, so that was a big- a whole commotion[gestures explosion] inside the family, um, and because I didn’t listen, I was just like, “Nope, see yous later, I’m just done, I wanna start my life with her, I wanna- you know what I mean, I just wanna do my own thing, ” that’s how we end up in Family Court, because they were like, “No, you’re not having the kids because you’re with her,” Um, and then it just got messy, and then...yeah. (Jess)
Jana recalled when she initially came out to her family, and her mother’s worry that she would be unable to have children, but that she eventually became comfortable with the concept;

Like first thing my mum said when I told her I was gay at seventeen, she was like, “Well how are you going to have kids?” I was like, “Mum, we can have kids, like it just will be hard-different,” and stuff, and she was like, “Oh, you know, you’ll be a great mum, but now you can’t have kids,” I’m like, “Yeah, I can,” so then when I told her we were pregnant, and like, you know, it took my mum a while to kind of be okay with it, so when we told her we were pregnant in ten years, my mum was just like, “Oh my God! That’s so exciting.” (Jana)

Many participants talked about receiving practical and emotional support from their families of origin when their children were first born, but not all families were supportive. Some participants described animosity to varying degrees originating from their families of origin and ex-partners, with one participant describing her mother’s worry that she would not be able to become a parent due to her orientation. The following section will describe participants’ support from day care, work, and parenting groups.

Support from Childcare Services, Work, and Parenting groups

Participants reported receiving support from outside their families, mainly from their workplaces and inclusive childcare services that their children attend. Sara, Erin and Lisa talked about the support they received from work and workmates;

I, yeah, reached out my boss, who I’m very good friends with, kind of reached out and asked her, like, “What do we do?” ’cause she at that time had a six month old, um, and had a- that was her second child, so she recommended that book, and we read it, and um, yeah, didn’t
look back, so we’ve probably heavily relied on that, in the first, say, four to six months, um, and then just kind of went with our own parenting style and how we do things grow from there. (Erin)

Jennifer, Megan, Lisa, and Amanda discussed the importance of finding an inclusive and welcoming childcare service for their families;

So when I called up, um, a place, I just said, “I need to ask if you’re a religious day care,” and they said, “oh, no we’re not,” I said, “Oh, good, I just need to make sure ‘cause we’re a same-sex family,” and they go, “Oh! Don’t worry about that, we’ve got another same-sex family here,” and right from the start really made us feel welcome, and when Mother’s Day came up, they asked us about, like, if we both want presents, um, on that day, or what not. Um, and I said, “Yeah, we’re both mums, so we’ll celebrate Mother’s Day,” um, and when Father’s Day came around, they actually gave us both a present as well, um, and what was it, they made rum balls and did [shows interviewer child’s artwork] this little painting, and just said at the bottom, ‘thank you for all you do,’ so they’re good, they’re really supportive, we’ve been included in all of it, um, so we haven’t felt any different in regards to day care, so we’ve been extremely lucky. [nodding] (Megan)

For Jennifer, this journey was more challenging due to previous experiences with less inclusive services;

It’s just a lot better because we feel like we made the right choice as parents, and I feel like he’s not getting left out or treated differently or anything like that, we can walk in there and they’ll be like, "Oh, that's Mama," "Oh, that's Mum," you know, and they, they’ll say, "Oh, Mum's picking you up later with Mama," and you know, they’re not afraid to say that, the
other [day care] was like [quietly] "Oh, Mum's picking him up later," "Oh, which one?" You know, all things like that, oh, okay, so yeah, that definitely helps a lot, making us feel like we made the right decision. (Jennifer)

Imogen, Sara, Jennifer, and Megan talked about accessing online support and information, primarily from Facebook groups;

This whole other world kind of opens up, in terms of being connected to other parents now, like we’re in a lot of Facebook groups, and the support that we got from those groups, like emotional support, in terms of people ranting and also quite practical things. (Sara)

Jennifer recalled how a contact from an online parenting support group connected her with an LGBTQIA-friendly day care service;

I just went on Facebook one day and [asked] a few people in the group, and one of the girls wrote back, "Oh, I actually work at a centre and my partner actually works there too, and we've got our two kids there," and I said, "Oh, okay, I'm assuming they're very friendly with, you know, same-sex families, and things like that," and she goes, "Yeah, definitely, that's for sure," and I said, "Oh, okay, that's definitely something we're looking for, then," Which I didn't think they would be, because it's, like, all on their website, it's a generic website, it says about Catholic values, and things like that, so I was a bit like, [confused expression] "Okay, maybe not," like, you never know these things because sometimes, you know, Catholics and Christians, um, you know, that values as well sometimes, so I was like, "Oh, okay," and I was like, "Are you sure? It says on there about Catholic values and stuff," She's like, "No, it's definitely cool," and I'm like, "Okay..." so they made things better, and they went through the same clinic as us as well, um, yeah, and I'm just like, "Ohh, okay, I just don't know to be scared
or not!" [laughter] um, so that definitely makes us feel a lot better as a person, yeah, definitely. (Jennifer)

Sara and Lisa talked about how playgroups, particularly rainbow playgroups, were an invaluable source of support for their families;

Like [the assumption of heterosexuality is] something that comes up a lot, you know, which is why I like going to a playgroup that has all same-sex families, you know, you don't even have to worry about that when you walk in, it's just like, “great,” you just can be yourself, so you don't have to worry about someone asking you about your home situation or anything. (Lisa)

Sara described the various playgroups that her partner went to with their daughter, and how her partner liked the rainbow playgroup best;

‘Cause she goes to like, three playgroups every week, the AVA one, the council one and the rainbow one, and the rainbow one she likes the best. (Sara)

However, Jennifer talked about how, whilst she liked the idea of the rainbow playgroup, her work schedule precluded her from attending;

After I moved to [Australian city] I found out they've actually got a playgroup for pride families, so it's definitely a lot better by the sounds of it, I haven't had a chance to go yet because they have it Monday mornings and [chuckle] I usually work Monday to Friday, but yeah, no, it's definitely something I'm trying to aim to go out, for him and for me, um, so I'm trying to find a job that's part time in order to do that, make it a lot better for me and a lot better for him, you know, we won't feel judged, um, or anything like that. (Jennifer)
Gina talked about how she and her partner felt that the local rainbow playgroup was not for their family;

We went to the playgroup, or Rachel went to the playgroup [chuckle] 'cause she only went once and she was a little bit like, “Oh...” you know, just not for us for whatever reason. (Gina)

Other in-person groups were important to Deb, Sara, and Sue;

We’ve been to a few ‘Rainbow Stompers’ which is like a rainbow families groups. (Deb)

However, Jennifer experienced discrimination in her mother’s group, and this led to her leaving this group;

I still get, like, [taken aback expression] like taken back by, was one at a mother’s group in [country town] where I was the only one who had a child who had two mums in the group, and one of- so Dylan was- Dylan's my son, sorry [smile], he was playing with one of the other kids which was a boy. And all of a sudden the mum just pulls him away and looks at me funny, and I asked her, "What's wrong with that?" and she goes, "Oh, he's playing with my son," I said, "Yeah," and then I looked over and realised what they were doing, they were holding hands, you know, just as kids do, you know, in chants and things like that, and he was so young, and yeah, she just literally picked him up and pulled him away from Dylan, and I was just thinking in my head, what's that about? And went home and said to Lee what happened, and she said, "Oh, she's probably just afraid her child would get gay germs, or something," [chuckle] and so we had a good laugh about it, but, you know, I didn't really want to go to mother's group after that [...] it got to the point where I would only go to, like, you know,
birthday parties for those kids in the mother's group, because I didn't want them to feel like, you know, I didn't want to be involved or anything, you know, was only the certain parents that were like that, like, yeah, and also like, yeah, just little comments here and there, like, you know, "I can't believe you would raise a child into this world, you know, with two mums," and everything like that, and I kind of just had to sit there and just take it, you know. (Jennifer)

Participants talked about how they received support from their workplaces, colleagues and from inclusive childcare services. Some participants discussed the importance of finding an inclusive and welcoming childcare service, and their experiences with services which alienated their families.

Some participants talked about accessing online support and information in the form of support groups for people with their family structure. Participants also discussed in-person groups in varying ways, with some viewing playgroup, particularly rainbow playgroups, as an invaluable source of support for their families. The following section will explore other challenges participants faced.

**Other Challenges our Families Face**

Six parents talked about background homophobia as they go about their day-to-day activities and parenting tasks;

It’s kind of like, ongoing, like, background homophobia that we absorb, and like that affects me, in the way of feeling angry and frustrated and upset, and like, you know, that I don’t necessarily, like, I become distrustful of people, like, if they say something that’s homophobic and it’s like, “Well I did like you but now I don’t.” (Sara)

Megan noted that some comments which appear to be homophobic may be genuine questions and an attempt to understand her family;
We’ve had one person ask who the real mum is, and we’ve answered, “Well, we both are,” and I think I just put that down as she wasn’t being malicious or nasty or anything like that, I just think people that aren’t in that situation don’t always have the ability to understand, so, um, I don’t mind when people ask me questions, because it helps me educate where we’re coming from, and make them realise we are just the same. (Megan)

Megan and Lisa talked about how reading negative comments online had a negative impact on them and their families;

The things that you read online, like, it gets you down, you know, I mean, I don’t know if you’ve seen any of it, but it’s nasty, you know, you go on there and you can’t help but feel and then you’re like, am I doing something wrong to my child because I’ve put them- they didn’t ask to have two mums, so you can’t help but think, “Oh my God, like am I doing something wrong [clutching chest with one hand] to my child, like is he going to be scarred from this?” But then at the same point, you know, he’s got two loving parents, so I don’t think we’re doing anything wrong, but you can’t help that sometimes those little things just get into your head, and you think, “Oh my God, what am I doing?” [nod] Yep, so. You just can’t help but worry sometimes. [nodding] (Lisa)

Ash and Megan talked about feeling as though they must prove their family works;

From a social justice perspective there is good stuff, but I don’t buy the idea that it has to be better stuff, I don’t have to be a better parent than anybody else, so like when the research is presented as there is no discernible difference, then I feel comfortable with that, but I don’t think we have to be anything better or worse, or different than anybody else, I think it’s enough of a factor for us to have to be better, or, you know, have, you know, better
educational outcomes for our kids or anything, ‘cause that’s not useful for us, it’s
disingenuous for us to say that this is the way we have to perform compared to other people,
it’s about saying that this is another shape that a family can take, and the same that we did
with single parents, single mothers all those years ago when that was shocking, that- that
family structure was something that shocked people, and was a little bit like, um, risqué, but
none of my friends at school were from single parent families, that was something that I just
didn’t know, and so in my lifetime to change so much, but what it is is another iteration of-
another version of, um, what a family can look like, and so correlating outcomes against the
shape of a family doesn’t- it doesn’t make any sense to me. You know, it feels a little bit like
we’re trying to prove ourselves, and I don’t think we have to. (Ash)

Megan talked about how she had a different idea of safety for her family as opposed to
families with different-sex parents;

When I was calling around for day cares, I had to ask if they were, you know, okay with same-
sex families, and things like that, so it’s- it’s those little things I guess that, when you tell
people that you’ve got to, like, ask these things, they don’t necessarily realise ‘cause of people
I speak to are so for it that they don’t fathom that there are still issues, even booking holidays,
we’ve got to be careful where we book holidays to, just to make sure that it’s not, you know, if
we go overseas it’s not to a place that’s illegal, or looked down upon for our type of families,
so safety is a big priority, um, but safety to a same-sex couple means something completely
different to hetero couples, yeah, just so freedom for us, walking around the streets, we’ve
got to make sure that, you know, yeah, we’re going to a place where it is safe and where
we’re accepted, um, yeah, but otherwise I guess it’s just those type of little things that we’ve
got to really be vigilant about, um, and be mindful of. (Megan)
In a similar vein, Sara talked about how she felt she and her family were lucky to be able to live in their inclusive area, as some areas are not as safe for families such as hers;

I do feel very lucky, well, partly lucky in that- partly deliberate, to live where we live, so, it is a very inclusive area, and that’s one of the reasons why we live there, like, when it changed to- ‘cause I bought the house three years ago, it was, when it came to deciding where to buy a house, it was like, I have to buy a house in an area where I would feel safe, um, and like, my kids will be safe,” and so that was very intentional, and like, we’re on the tram line with the, like a GBC that specialises in working with the LGBTIQA people, so, like, you know, that was all very intentional, but I guess like, the thing is, like we’re lucky we could afford to live in [our suburb] ‘cause not everyone can. (Sara)

Lisa talked about possible discrimination from a religious school she and her partner applied to;

We applied for a private school and didn’t get in, now, we don’t know why we didn’t get in, it’s a new upcoming area, and look, we didn’t think- tried not to think too much about it, you know, it’s like, “did we not get in-” I mean, we’re down the bottom of the list, you know, we’re not religious, you know, all of that, so I get it, we’re not the top priority, but then you can’t help but put in your mind- is it because we’re a two mum family? (Lisa)

Many of the interviews were conducted around the time of the Australian marriage law postal survey in 2017. As such, this was a topic discussed by eleven participants, who felt that the surrounding debate had a negative impact on their families and their parenting;
With the plebiscite at the moment you know, I.. think.. it’s been interesting, I feel like... well, I don’t feel like, we [emphasis] are in some way being evaluated by society and that’s not a comfortable thing, um, you know, and I feel like it’s something beyond our kids, I feel like, you know, at the zoo or out in the park, at the moment I feel like if people see us and go, “Oh, they’re same-sex parents...” [shrug with hands outstretched] and our kid does a typical obnoxious kid thing, you know, are they gonna vote ‘no’ on the plebiscite ‘cause our kids are a bit.. [half chuckle] do you know what I mean? It’s completely unfair on them, because they aren’t allowed to be kids. (Stacy)

With all the marriage equality stuff at the moment that’s just a bit [scrunches up nose] sucks, you know, yeah, so, yeah, just the sort of things that people are saying, so ahh, yeah, that’s just a concern, like, if something doesn’t get resolved this time, it’s going to keep going on. (Gina)

Gina also talked about how the public commenting on her family’s private life was challenging to deal with;

I think people- just cause it’s [moves hand in circular motion] in the, you know, ether so much at the moment, everybody’s just having their two cents worth, so [shrug] yeah, it’s not discrimination, but I guess it’s just people feeling free to comment on [chuckle] your life and family, which sucks, yeah. (Gina)

Four participants talked about how they were glad their children were too young to understand the debate raging at the time of the interview;
The plebiscite is bringing up a lot of discrimination and, um, lies, and bullying, and, um, really horrific homophobia that would absolutely be affecting kids with two mums, and Jacob is, um, just too young, in another year he wouldn’t be too young, he, um, and so I’ve spoken to his childcare about it because it is something that I’m conscious of for him, so yeah, at the moment unfortunately there is a huge minefield of really concerning stuff that would absolutely have a detrimental effect on kids in families like ours, and we’re lucky that our kids are young, but that’s not to say that there aren’t so many that are gonna be affected by other people’s prejudices. (Ash)

However, some of the challenges faced by participants were more benign. Six participants talked about participating in awkward conversations or situations regarding their families, mainly stemming from assumptions of heterosexuality;

The only one little tiny thing was when the paediatrician came into the hospital to have a look at Felix when I was about to be discharged and called Dawn ‘sir’ and didn’t even look at her properly, just assumed ‘cause I was holding Felix that she was a boy, I just thought that that- but that wasn’t from any- that was just his already- his already preconceived idea of what he was going to walk into. (Kym)

Sometimes there’s been like, a few awkward interactions, like when people, like in the street or if I’m, for example, chatting to someone who was in the pharmacy while I was waiting for a script, and people thinking that I was Faith’s birth mother, and so they’re like, asking questions about like, “Oh, how was the birth?” or like, “Oh my goodness, I can’t believe you went through that and you look so good,” and you have to kind of make this- like these decisions of like, do I say, “Oh, I’m not the birth mother,” and then it’s like, followed by, like, awkwardness when they try to backtrack, and then it’s kind of like, ruins the conversation, or
do you just go, “Oh, thanks!” and just want it to end soon? So yeah, that’s- I mean, it’s fine, it’s not like, upsetting, it’s just, like, increases the number of awkward interactions, I think! (Sara)

Michelle, Megan, and Rachel talked about mental health challenges in their families. For Michelle, ongoing legal issues exacerbated her challenges;

I had to go through the whole drug tests, pee tests, having all my tests say, confirmation required because of the classes of medication I’m on, and then the second thing of testing after everyone in the court talking about crap about me, just to prove that that was my medication. No apology in the end, it’s like, “Oh, that’s just the process.” They stood up in the court, and they literally.. I didn’t know that they could just.. disclose your history just like that, the lawyer, their family lawyer was like, “She takes these meds, she has this illness, she’s severely depressed and that,” That’s against my rights, I personally believe. (Michelle)

Not all participants recalled facing challenges. Kym, Deborah, and Erin talked about feeling there was a lack of significant challenges facing their families;

But no, I don’t think- at the moment, there’s not any challenges. I can’t say there won’t be any going forward, but we haven’t come across any. (Deborah)

Participants talked about many challenges facing their families, including background homophobia and reading negative comments online that affected them. Other participants felt as though they needed to prove that their family works.

A couple of participants talked about having a different idea of safety and safe places to live because of their family configuration, and another participant discussed possible discrimination from a religious school she was hoping to send her son to. Many participants talked about how the
Australian marriage law postal survey in 2017 affected themselves and their families, with some participants commenting that they were glad their children were too young to understand what was happening in society at the time.

Other challenges were more benign, such as an increase in awkward situations due to assumptions about participants' family structure. Several participants noted mental health issues in their families, which exacerbated other challenges these families faced.
Chapter 5: Analysis

As noted in Chapter 3, the denotative level of Feminist Post-Structuralist Discourse Analysis (FPDA) “aims to give a concrete description of what is going on in a text” (Baxter, 2003, p. 75). It is at this level that some of the methods of content analysis are appropriate, such as noting turn-taking of participants, and recognising repeated patterns of responses (Baxter, 2003). I have achieved this by arranging my raw data into themes and subthemes in Chapter 4. By noting participants’ repeated patterns of responses, I can identify what discourses at play across the entirety of my data set, and how they interact with one another. As Baxter (2003) notes, it is only through extensive notes and observation that the analyst may become aware of discourses that are consistently at work in a specific setting, in this case, in how parents in same-sex relationships come to and experience their parenting roles.

Connotative analysis uses this denotative analysis to identify discourses which may be operating in a text (Baxter, 2003). At this level of analysis, it is important to note how and when discourses appear in a range of contexts (Baxter, 2003). Baxter (2003) recommends utilising participants’ non-verbal language, verbal language, and metalanguage to identify discourses and the interactions of these within a text. In this way, participants’ patterns of behaviour, their verbal language, and how participants describe their speech, behaviour, and relationships can point to discourses shaping their behaviour and language, and how these discourses interact. To identify the interplay of discourses, it is also important to consider who has the power, or who participants feel has the power (Baxter, 2003). Dominant discourses are those which seek and expect to hold the most power over thoughts and actions (Moss, 2017), and by noting which entities hold power, dominant discourses may be identified.

The use of video recording in this project allowed for the identification and transcription of nonverbal cues. These data were used to inform the analysis process, as speech events were analysed in the context of simultaneous nonverbal behaviours. Often the accompanying nonverbal
In the current chapter, I will engage in a connotative analysis of my findings, as presented in Chapter 4. I will proceed by identifying discourses within repeated patterns of participants’ non-verbal language, verbal language, and metalanguage, and by noting how these discourses interact with one another to shape how participants come to and experience their parenting roles. To this end, I will utilise the descriptions of dominant, feminist, and queer theory discourses of families, motherhood and fatherhood which were highlighted in Chapter 2 to note their presence and interaction in participants’ recollections of their parenting experiences.

The Evolution of the Family We Made

Becoming a Family

There are many journeys that participants took to come to their current family configuration, including accessing assisted reproductive technologies (ART), foster care arrangements, and blended family structures. The process of becoming a family is the first of many parenting experiences described by participants, as decisions that participants made during this process are decisions that they make as parents. In addition, many of the choices participants faced on their path to parenthood are unique to parents in same-sex relationships, and therefore pertinent to the current study.

In Chapter 4, I identified that 11 participants noted that they had always wanted to be a mother or a parent. The language used by the participants in this context reflects their conflation between the notions of ‘being a mother’ and ‘being a parent’, which is reflected in some feminist discourses of motherhood (e.g. Phoenix et al., 1991). These discourses often use the terms ‘parent’ and ‘mother’ synonymously (e.g. Phoenix et al., 1991), suggesting that within these discourses, women engage in the bulk, if not all, of the parenting in two parent, different-sex parented families.

Participants often spoke at length about the methods they chose to become parents, as this decision constitutes the first choice they made as parents. This diversity of family formation
embodies a queer theory discourse, as the parents I spoke to challenge the family binary as described by Oswald et al. (2011). This binary posits that all families outside the biological, two different-sex parent family model are “pseudo” families (Oswald et al., 2011). In addition, dominant discourses of family formation state that families should be formed within the context of a different-sex marriage (Marshall, 1991). In this context, most of the participants in the current study, their families, and paths to parenthood stray from this dominant discourse of how a family should be formed, what a family should look like, and the roles that the parents play in its formation. There is therefore tension between dominant discourses and queer theory discourses of family formation in this instance.

Another area in which there is tension between dominant and alternative discourses is that of assisted reproductive technologies (ART) and access to these services. Whilst several large-scale studies have analysed trends regarding access to these services (Stephen et al., 2016; Wang et al., 2007), these studies do not tend to acknowledge the same-sex couples who access ART. In addition, there is little information available about the proportion of different-sex and same-sex couples who seek to utilise these technologies (Assisted Reproductive Technologies Review Committee, 2006). The implicit assumption in these works is that ART are accessed primarily or exclusively by different-sex couples, thereby supporting the dominant discourse of families consisting of one mother and one father. In the present study, twenty-one of the twenty-nine participants became parents through ART, suggesting that this is a common method used by same-sex couples to become parents. In a discursive sense, the access of these services by gender and sexuality diverse people may serve as a ‘queering process’ (Oswald et al., 2011) which resists the heteronormative nature of this institution by challenging the sexuality binary of its usual clientele. In this regard, participants’ access of these services reflects a queer theory discourse of families over a dominant discourse of this institution.

The decision to utilise either a known or unknown donor was one which was discussed by twelve participants. Some of these parents were adamant that they wanted an unknown donor,
noting that they wanted themselves and their partners alone to be the parents of their children and that they did not want to ‘share’ their children with other parties. The notion of ‘sharing’ one’s children represents some dominant discourses of families, which assume that families have two parents only (Fan et al., 2012). Other participants who opted for an unknown donor talked about the potential for relationships between themselves, their child, and the donor being ambiguous and confusing, and that there was the potential for the known donor to attempt to claim custody and visitation for the child in the future. These concerns also reflect the dominant discourse that families should have two parents only (Fan et al., 2012), as the parents felt that having an additional parent figure would be confusing for everyone involved. In this regard, the participants embody some specific dominant discourses of how families ‘should’ look, but disregard others. With regards to power, there is a sense that participants felt that a known donor would hold more power than themselves, and that if the donor attempted to gain custody of the child that this custody would be granted. This points to dominant discourses of biological parenting, and that biological parents are the only ‘true’ parents of their children (Sosnowska-Buxton, 2014).

Some parents felt that choosing a known donor would better suit their families. These parents cited several factors for this decision, including the cost and medical component of accessing a fertility clinic, and the importance of their children knowing about their own background and ‘where they come from’. With regards to wanting to avoid fertility clinics, participants opting to self-inseminate at home may reflect some dominant discourses of motherhood, which posit that pregnancy and birth should be as natural as possible (Malacrida & Boulton, 2012). One participant put this into words, noting that “we didn’t want all that medical intervention”. Whilst parents who opted for known or unknown donors embody dominant discourses of families and motherhood and different ways, all these parents represent a departure from dominant discourses of families which state that a mother and a father must be present (Redding, 2008). In this way, some of the participants’ notions of parenthood reflect some dominant discourses of motherhood and families and disregard others.
In addition, some dominant discourses of motherhood prescribe that the experience of becoming a mother should be medicalised and childbirth should be completed in a hospital (Malacrida & Boulton, 2012), and other dominant discourses of childbirth recommend that it should be ‘as natural as possible’ (Malacrida & Boulton). These competing dominant discourses of motherhood, conception and childbirth are prescriptive, noting what mothers ‘should’ or ‘ought to’ do. This contrasts with feminist discourses, which largely focus on an individual’s ability to make choices for themselves (Simons, 1984). In this regard, participants who choose a known or unknown donor, or choose to either utilise a fertility clinic or to inseminate at home all reflect their choice in the matter, and therefore feminist discourses of motherhood. However, Simons (1984) notes that such a ‘choice’ cannot be divorced from the era in which the choice is made. In this regard, the choice to either engage in medical intervention or to pursue a more natural approach needs to be viewed in the context of the society (i.e. the dominant discourses of the time) in which it is made. In this sense, the choice to pursue as natural an experience of conception, pregnancy and childbirth as possible, whilst being the participant’s choice, is also aligned with dominant discourses of motherhood.

Whilst dominant discourses of motherhood focus on how women ‘should’ become mothers and what mothering behaviours they ‘should’ engage in, queer theory questions who is left out of this institution (Stein & Plummer, 1996). In this case, in dominant discourse conversations about how to become a mother, mothers in same-sex relationships are not considered, or they are not considered to be ‘real’ mothers. This is exemplified when participants noted that they felt that the institution of ART was not made for them.

Participants described challenges specific to their situation as a same-sex couple when attempting to access ART. Several participants described the cost component of treatment as being one of these challenges. As one participant commented, accessing ART spaces is often the first option for same-sex couples attempting to have a child, but these services are often prohibitively expensive. From a queer theory perspective, gender and sexuality diverse people who would not be
able to have children without medical assistance are left out of conversations about who gets the treatment. In Australia, ART are covered by Medicare if the couple can prove medical infertility (Assisted Reproductive Technologies Review Committee, 2006). Within this system, same-sex couples are only able to access subsidised ART if they have already undergone a certain number of unsuccessful procedures, with these previous procedures not being covered by Medicare. As one participant mused, this system is not designed for parents in same-sex relationships.

In addition to the cost of treatment, participants often expressed frustration at the compulsory counselling which accompanies gamete donation. This form of counselling is intended to provide relevant information to prospective parents so that they can make informed decisions regarding potential ART procedures (Department of Health, 2022). Counsellors in these sessions are required to discuss potential long-term psychological and social implications of gamete donation, in addition to the varying degrees of significance all parties ascribe to biological connections (Department of Health, 2022). Prospective parents are also informed of the rights of donor conceived people to obtain identifying information regarding their donor, and that people conceived in this way are permitted to attempt to contact their donor once they attain 16 years of age (Department of Health, 2022).

Participants described this process as ‘patronizing’ and ‘ridiculous’, particularly because people in different-sex relationships do not have to undergo counselling to have children, and that counselling was ‘another hoop’ for potential parents to jump through. The power here seems to lie with ART providers, as they have the power to grant or deny services to clients who satisfactorily ‘perform’. This component of ART and participants’ responses to it represent a tension between dominant discourses of service delivery – that all service users need to undergo the same process – and a queer theory discourse that this is an unfair additional requirement which same-sex couples must fulfil to become parents.

The phrases used by participants to describe their ART experiences points to the parents viewing the process as convoluted and unfair, as though they must perform to become parents,
although different-sex do not typically have to do this. In addition, the notion of ‘jumping through hoops’ has its origin in performing circus animals. Although it is unlikely participants had this image in mind, the use of this idiom points to the speaker perhaps being subconsciously being viewed as a curiosity, or as ‘other’, and being made to ‘perform’ under the power of others.

Two participants talked about potential institutional discrimination from fertility clinics, which was linked to the parents’ status as a same-sex couple. In both situations, the clinics are asserting their power to provide or deny services according to their own ideology, thereby making themselves the dominant parties. The dominant discourse of families in this case is that children should have a mother and a father, and the clinics are enforcing this discourse the right of services to select service users. The above challenges that participants described reflect the service providers’ embodiment of this dominant discourse, which clashes with prospective parents’ feminist discourse of having the right to choose when and how to become parents (hooks, 2000).

The non-birth mothers who I talked to described a feeling of ambiguity and feeling out of place when accessing ART. Some of this awkwardness was due to the assumption that they were the birth mothers of their children, as dominant discourses of motherhood include the notion that parenthood, particularly motherhood, is biologically based (Katz & Hunt, 2014; Sosnowska-Buxton, 2014). When examining the institution of ART through a queer lens, the institution seemingly excludes these families, and is much more difficult for same-sex couples to access than for different-sex couples. In this regard, there is tension between queer theory discourses and dominant discourses when considering prospective same-sex parents’ access to assistive reproductive technologies.

Participants negotiated the issue of biogenetic connectedness in different ways when forming their families. For female participants who became parents in the context of their present relationship, decisions regarding their child’s biogenetic origins included deciding which partner would contribute genetic material, which partner would attempt to conceive, and whether the couple would choose a known or unknown donor. Participants considered how important
biogenetic connectedness was for themselves personally, for their partner, and for their potential children when making each of these decisions.

Nearly all participants with more than one child felt that it was important for their children to have a biogenetic connection to each other. For this to occur, siblings either had the same donor, same biological mother or both. Some participants and their partners valued their potential biogenetic connectedness to their children differently. These participants usually noted that they found it simple to decide which partner would attempt pregnancy first, as one partner felt more drawn to the experience than the other. Other participants and their partners both wanted to experience pregnancy and birth, so each gave birth to a child with the same donor.

The notion of biological kinship can be a source of tension for non birth mothers. ‘Biological kinship’ in the sense that biological ties alone create families is a social construct (Katz & Hunt, 2014), and this dominant discourse of families is inherent in the decision potential parents make in relation to the use of a known or unknown donor.

In one example, a non-biological mother noted that she felt confronted by the possibility of her child having a known donor, as there would then be two people, excluding herself, in the child’s life who have a biological connection to that child. For this mother, the concept of biological relatedness becomes a source of contention, as biological relatedness is important to family ties, according to dominant discourses of families (Katz & Hunt, 2014). The mother is aware of this, and notes that she feels confronted by there being multiple people close to her daughter who have a direct biological link to the child. It is implied that this mother feels confronted by her child’s biological relatedness to other people because she does not have a biological link to her child, but the potential donor, who would be part of the child’s life, would have this connection. Although she would still be her child’s mother, and would engage in mothering behaviours, she notes that she would be confronted by the notion of somebody else who is present in the child’s life, but not involved in the child’s day to day care, having a biological connection to the child.

The above scenario suggests that, according to dominant discourses of families, biological
parents have more ‘claim’ to children in the hierarchy of parents, and that biological connectedness ranks higher than social parenthood. In this regard, there is a tension between a dominant discourses of families being that biological relatedness alone forms families and queer theory discourses which posit that same-sex couples can and do form families (Sardadvar & Miko, 2014).

Some of the other reasons participants cited for choosing an unknown donor reflect other dominant discourses of families. Some participants reflected that they did not want to submit their children to ambiguous relationships with potential known donors, or to put a strain on their own relationships with these men. These reflect a dominant discourse that a family is comprised of two parents alone, and that no other adults may assume the status of ‘parent’ (Bruno, 2014; Fan et al., 2012). The nuclear family model is one which it appears many parents sought to emulate, as nearly all the parents described their child’s family in terms of the members of their household, and the parents whose children had birth parents outside of the household seemed to express that this arrangement was not ideal through sighs and other nonverbal communication.

However, there were other aspects of participants’ experiences which aligned with both dominant and alternative discourses of motherhood, fatherhood, and families. Amongst the women who became mothers within the context of their present relationship, the feminist notion of choice (hooks, 2000) is pertinent with regards to parents coming to the agreement of who would carry their child or children. Many mothers who became parents in the context of their current relationship described deciding who would become pregnant and give birth as an easy decision. That is, they described one partner strongly wanting to go through the process of pregnancy and childbirth, and the other as having a strong aversion to it. Within these preferences, the families simultaneously reflect and reject dominant discourses of becoming mothers, as one parent is eager to become a mother through becoming pregnant and giving birth, mirroring dominant discourses of motherhood (Marshall, 1991) and the other parent still wants to become a mother but through different means.

The participants discussed the factors that went into this decision, including the desire or lack thereof to become pregnant and birth a child, maternal age, and other biological factors. Some
participants talked about how they wanted to become mothers but did not want to go through pregnancy and birth. For these participants, there seems to be an intersection between feminist discourses of choice (hooks, 2000), and queer theory perspectives of families, in that the families in question are headed by same-sex couples, and that they chose to become parents through pregnancy and birth, or by becoming a social mother. Although queer theory discourses sometimes consider parenting and ‘queerness’ to be antonyms (Gibson, 2014), they may work together when considering how the notion of queer parenting combines with feminist notions of choice.

In addition, almost all the participants discussed being part of a two-parent family unit, particularly those mothers who chose an unknown donor. This reflects dominant discourses of families which stress that families should have two parents (Bruno, 2014), but they stray from this dominant discourse of families because the parents are in a same-sex relationship (Redding, 2008). Despite this tension between competing dominant discourses of families, the families who made these decisions embodied a queer theory discourse of their experiences as they discussed their choices from a queer perspective.

One of the participants became a mother through access to IVF as a single woman. When describing forming a family with her new partner, she talked about the natural progression as her partner slowly became a part of the family unit. One of the dominant discourses of motherhood is that women ought to become mothers because they are capable (Grant, 1993). In this sense, the stepparent in this family stepping into a parenting role, particularly a mothering role, is aligned with this dominant discourse of motherhood. In terms of co-alignment with feminist discourses of motherhood, some of these discourses (e.g., hooks, 2000) emphasise the importance of women’s choices regarding their own motherhood. In this sense, the participant’s partner’s choice to slowly integrate into the family unit and to eventually become a parent figure in that family is consistent with a feminist and dominant discourse of motherhood and families.

Another way in which dominant and alternative discourses aligned was in the parenting names and titles that participants gave themselves and other important adults in their children’s
lives. One family formed when the parents began fostering their child, which led to a permanent placement. The parents explained that they encourage a relationship between their son and his biological parents, although it can be emotionally difficult for themselves as foster parents. This family’s configuration also strays from dominant discourses of families, as multiple parents are active in the child’s life (Bruno, 2014). However, the parents in this situation also used parenting titles to distinguish their parenting roles from those of their child’s biological parents. One of the mothers in this family talked about explaining their family to her son as she and her partner as being ‘every day and always mummies’ and his biological mother as ‘tummy mummy’. In a way, this reflects the dominant discourse that children have two parents only, or two primary parents (Bruno, 2014).

Some parents talked about their decisions surrounding pregnancy as being based on biological ties. For example, several parents talked about basing these decisions around their children sharing a biological parent, either through their donor or having the same birth mother. This desire for biological relatedness reflects dominant discourses of family which assume family members are biologically related (Sosnowska-Buxton, 2014). However, the intersection between the configuration of these families, having same-sex parents, and their desire for biological relatedness among their children, represents a combination between queer theory discourses and dominant discourses of families.

Some of the ways in which participants described their parenting experiences and roles reflect both cohesion and tension with dominant discourses of motherhood, fatherhood, and families. For example, eleven of the participants who had their children within the context of the current relationship commented that they had always wanted to be a parent. This reflects a dominant discourse of motherhood which states that women should become mothers (Grant, 1993), and some feminist discourses which state that women should become mothers if they are biologically able to (Chodorow, 1978). There is therefore cohesion between these discourses in this situation. However, other feminist scholars, such as hooks (2000), emphasise the value of choice, and that a
woman’s choices with regards to becoming mothers and the mothering behaviours they engage in cannot be separated from the social and political climate of the time (Simons, 1984). Therefore, the participants commenting that they had always wanted to be a mother may in part be a product of the society they live in, in which dominant discourses of motherhood state that women necessarily need to become mothers to fulfil something and that the process is transformative for these women (Grant, 1993).

Other participants described family kinship models which included parents and other important adults in their children’s lives. These additional parent figures included known donors, birth parents, and former spouses. These families stray from dominant discourses of families as they lay outside the two parent model (Bruno, 2014), but are also partly aligned with it, as the parents in these families were careful to assign parenting titles to these secondary parents which reinforce the primacy of their family unit. For example, one parent specified that her children referred to herself and her partner as ‘mama’ and ‘mummy’ respectively, but their known donor was either called by his given name, or referred to as simply ‘the donor’.

Other participants spoke about the formation of their blended families, where one or both parents had children before they began their current relationship with their same-sex partner. According to dominant discourses of families, these arrangements are already outside of the norm as there is a notion of biological families needing to ‘stay together’ (Flood, 2008). Of these families, two participants spoke about an ongoing relationship with their children’s birth parents. These relationships also stray from the dominant discourse of children having two parents only (Bruno, 2014), but in some ways they also embody some dominant discourses of families as the children involved have both a mother and some form of a father in their lives (Redding, 2008). For the families in which only the two same-sex parents are present in the children’s lives, they embody the dominant discourse in that children simply have two parents (Bruno, 2014).

The participants described their experiences and decisions surrounding becoming parents in ways which both reflected and rejected dominant discourses of motherhood, fatherhood, and
families. In particular, the dominant discourses of two-parent families was largely upheld, and the notion of having to give birth to be a mother was rejected. There were some notable intersections between feminist and dominant discourses of motherhood, particularly the notion that women ought to mother. Some of the tensions between discourses which I identified included those between queer theory discourses and dominant discourses of the circumstances in which participants become parents, particularly with regards to accessing assisted reproductive technologies. The following section will discuss participants’ notions of parenting into the future.

**Into the Future**

Some participants talked about either having attained their ideal family size or wanting to have more children in the future. The decision of how many children to have can be linked to the feminist notion that a woman’s choices regarding childrearing and whether to become a mother cannot be separated from the culture of the time period in which she lives (Simons, 1984). In this regard, from a feminist discourse of families, these participants’ choices regarding how many children they have cannot be separated from the era in which they have children. According to the latest available data, in Australia at the time of writing, families with children on average have one or two children (Australian Bureau of Statistics, 2015; Australian Institute of Health and Welfare, 2020). This can be considered a dominant discourse of how many children a family should have. Understanding the culture in which participants form and raise their families, the tendency for their families to mirror the average Australian family size may reflect dominant discourses of families and therefore participants’ experiences align with both dominant discourses and feminist discourses of families.

About a third of the participants discussed their worry regarding their children as they get older, particularly as the children start attending school. These participants noted their fear of their children’s possible bullying and exclusion. This reflects a dominant discourse of mothers and mothering that one of the roles of mothers is to selflessly care for others (Wearing, 1990). However,
nine participants expressed hope that the social climate in Australia would soon change to become more accepting of families such as theirs. One branch of feminist thought, liberal feminism, promotes the notion that all people in a society should have equality of opportunity, and that individuals should be treated as such rather than experience restrictions based on their membership of a demographic (Saulnier, 2000). With regards to families with parents in a same-sex relationship, the aim for such families to be on the same social standing as those with different-sex parents reflects this feminist discourse of family. These views were often expressed simultaneously, with parents both concerned about their child’s welfare upon starting school and expressing hope that by that time their family would be treated more equitably by the school and wider community.

Fourteen parents talked about their roles changing, or potentially changing, both from when they first became parents to the present, and from the present into the future. This notion of changing roles represents a departure from dominant discourses of families, in which mothers and fathers have separate roles which cannot be altered (Doucet, 2006; Schindler & Coley, 2007). However, the participants in the current study described dynamic roles which adapt to meet the ever-changing needs of their children and partners, thereby straying from this dominant discourse.

Participants in the current study described a great deal of change, from the past to the present and from the present to the future. Many of the ways parents spoke about these changes reflected both dominant discourses of families and motherhood, and feminist discourses of these constructs. The following sections will explore discourses present in how participants conceptualise their parenting roles.

How and why we Parent the way we do

*How we Divide Parenting Tasks and Make Parenting Decisions Together*

Almost all participants noted that their family’s decisions surrounding regarding paid employment had an impact on how participants divided parenting tasks, specifically arrangements concerning balancing child rearing with paid employment. Female participants tended to talk about how discussions regarding these arrangements often occurred before engaging in the process of
attempting to fall pregnant. Often, these conversations took place with the understanding that the partner who was to fall pregnant would also breastfeed and stay at home with their child for some time after the birth, with the other parent becoming the primary or sole breadwinner.

Decisions concerning pregnancy and breastfeeding, particularly the tendency for the birth mother to be the stay-at-home and primary parent immediately following the birth can be linked to some dominant discourses of motherhood. These discourses stress the importance of biological motherhood and discount the roles of other women and mothers in the child’s life (Park, 2013). hooks (2000) notes that in the wake of second wave feminism, when women and men began to have more equality in their intimate relationships without children, the patriarchal medical establishment began to insist on new mothers breastfeeding. This aspect of child-rearing automatically places more responsibility on the mother who has given birth (hooks, 2000), and therefore leads to parenting roles which are based on biological functions.

With regards to female same-sex couples, four participants noted that within their families, the non-birth mother typically engaged in more caregiving and household tasks than the birthmother, who was breastfeeding on demand. For these families, a feminist notion of working hard to achieve equality between partners is evident (hooks, 2000), as these families specifically eschew the dominant discourse notion that the birth mother must necessarily take on the bulk of child rearing (hooks, 2000).

Other dominant discourses of families were present in the ways in which participants talked about their work and childcare arrangements, particularly the notion that one parent is the ‘earner’ in the family and engages in paid work, and the other parent is the ‘carer’ and engages in housekeeping and childcare activities (Doucet, 2006; Schindler & Coley, 2007). For parents in different-sex relationships, a dominant discourse of parenting is that these roles are to be divided along gender lines (Doucet, 2006; Schindler & Coley, 2007). However, the parents whom I spoke to did not have gender as a reference for determining these roles, as they were all in same-sex relationships. A common arrangement for the participants in the current study was if one parent
was in a higher-paying occupation or had more opportunities for career advancement than their partner, then they were more likely to continue engaging in paid employment after their children were born. This freedom for parents to choose roles outside of their gender is aligned with feminist discourses of families, particularly the notion of parents having choice with regards to their roles (hooks, 2000). In this regard, the way that these parents came to their work and childcare arrangements with their partners reflect both dominant discourses and feminist discourses of parenting and families.

About a third of the parents spoke about their personal preferences and strengths factoring in decisions surrounding paid employment and child rearing. For example, some parents noted that they found paid employment to be easier than child rearing and that their partners wanted to be a stay-at-home parent. This notion of being able to choose parental roles is aligned with feminist discourses of families – in particular, being able to choose roles which match parents’ interests and strengths (hooks, 2000). However, dominant discourses of families are also present, as these parents tended to conceptualise parenting roles as being either an earner role or a caregiver role, similar to dominant discourses regarding fathers’ and mothers’ roles in their families respectively (Doucet, 2006; Schindler & Coley, 2007).

Several parents described how the amount of time their children spend with each parent determined their parenting roles. For example, Deborah noted that because her partner was at home with their preschool age children far more than herself, her partner had far more input in how the children were disciplined. This mirrors some dominant discourses of families as this discourse expects one parent to stay at home with the children and therefore take on the bulk of childrearing duties, while the other parent engages in paid employment (Fan et al., 2012). In other ways, the fact that both parents are women speaks against this discourse, particularly the notion that one of the mothers in the main breadwinner. Instead, this mother appears to be embodying a feminist discourse of motherhood, in which a woman may simultaneously be a mother and be employed outside the home (hooks, 2000).
Almost all participants spoke about the communication, both explicit and tacit, with their partners which led to the formation of their parenting roles. Over a third of participants described coming to their parenting role as ‘natural’ or ‘organic’. These participants reflect dominant discourses of motherhood and fatherhood, as these discourses describe motherhood as being natural and instinctual (Sardadvar & Miko, 2014). However, according to feminist discourses of motherhood, a woman’s mothering experiences cannot be separated from the time period in which she lives (Diduck, 1993). In this regard, these participants’ experiences of coming to their roles naturally would be a product of the culture in which they live, in which women are considered natural caregivers for children.

Some of the major factors in determining parents’ roles include work arrangements and personal preferences. For many parents, the decision as to which parent would become pregnant and give birth was tied into discourses of what it means to be a mother, feminist notions of choice and personal preferences. The following section will examine how parents compare their parenting roles with those of their partners.

**Most of the Time we Have Different Roles, but we Share Parenting and are a Team**

Over half of the participants described themselves and their partners as having different parenting roles, in that they engage in different parenting and household tasks. This simultaneously reflects some dominant discourses of families as the parents have different roles (Doucet, 2006; Schindler & Coley, 2007) but also represents a tension with other dominant discourses of families which prescribe set roles based on parents’ genders (Doucet, 2006; Schindler & Coley, 2007). Some participants felt that the ability to choose their own parenting roles outside of gendered parenting stereotypes to be a strength of their family configuration.

Ten parents noted that they have the same parenting role, in that they both engage in all parenting tasks. This is aligned with some feminist discourses, which aim for equal participation from both parents (hooks, 2000). Furthermore, this notion of equal parenting conflicts with some dominant discourses of parenting and families. For example, one dominant discourse of
motherhood and fatherhood proposes that mothers and fathers have (or should have) different parenting roles based on what they are biologically capable of doing (Doucet, 2006; Schindler & Coley, 2007). In this regard, according to some dominant discourses of motherhood and fatherhood, the participants in the present study should have the same roles as their partners, as two mothers or two fathers should have the same parenting role.

Whilst some participants felt that they have different roles from their partners and others noted that their roles do not differ significantly, most stressed that their roles were of equal importance and that they valued each other’s work. This represents a nuanced relationship with dominant discourses of motherhood and fatherhood, in which some aspects of these discourses are upheld, such as parents having different parenting roles, and in which other aspects are rejected, such as an unequal division of labour. The next section will discuss influences on participants’ parenting roles.

**Influences on our Parenting**

Participants noted the importance of parenting role models, both in terms of practices and roles that they wished to emulate and those which they aimed to distance themselves from. Many participants described their own childhood and how they were raised, particularly by the parent of the same gender as themselves. This tendency to model their parenting on, or away from, their own parent of the same gender, reflects dominant discourses of parenting being gender-based (hooks, 2000). For example, one of the fathers in the present study noted that his own father was not present for much of his childhood, so one of his core parenting values is to ‘be there’ for his own children. This is strongly aligned with dominant discourses concerning fathers, particularly that which says that fathers need to be present for their children (Edin & Nelson, 2013). At the same time, the participants seemed to be free to choose how their own roles strayed from those of their models, reflecting a feminist discourse of being able to choose how one parents and one’s own parenting roles (hooks, 2000).

Eight parents described how parenting books and the wider parenting literature influenced how
they parent their children. The use of these resources represents a desire to refer to perceived
experts in the field to improve parenting ability. Whilst a dominant discourse of parenting includes
the use of these materials, doing so might have a different meaning for parents in same-sex
relationships. Because different-sex parented families are often viewed as the optimal environment
for raising children (Redding, 2008), parents in same-sex relationships may feel that they must exert
more effort into their parenting in order to appear to be as competent as parents in different-sex
relationships (Miller et al., 2017). In this regard, there is a relationship between dominant
discourses and queer theory discourses of parenting regarding the use of parent information
materials.

Many participants noted how parenting role models shaped their parenting practices and values.
These role models were both those whom the participants wanted to emulate, and those whose
parenting behaviours participants wanted to distance themselves from. These role models included
participants’ own parents, to whom participants typically compared their own parenting to their
parent of the same gender. Dominant discourses of fatherhood appeared to be present, in that
within these discourses fathers need to ‘be there’ for their children, but participants also noted that
they had the freedom to distance themselves from their own parents’ parenting. This represents an
interaction between dominant and queer theory discourses of parenting. The following sections will
describe the discourses present in comparisons that participants made between their own families
and families with different-sex parents.

We May Be Different to Different-sex Couples, But That Can Be a Good Thing

Notions of Different-Sex Parenting, Gender Stereotypes, and how These Affect our Family

For many participants, their observations and notions of different-sex parenting reflected
dominant discourses of motherhood, fatherhood, and families, but their own parenting experiences
and roles did not. Specifically, half of the parents shared their thoughts and observations regarding
different-sex parented families, often reflecting common stereotypes of mothers and fathers. This
includes six parents who felt that parents in different-sex relationships often have more rigid
parenting roles. This indicates that parents in same-sex relationships often have a clear notion of dominant discourses of motherhood, fatherhood, and families, and can see these roles being fulfilled by others without necessarily engaging with them themselves.

Ten participants offered suggestions as to how their own families and parenting experiences differed from their counterparts in different-sex relationships. These participants proposed that parents in different-sex relationships may have more rigid roles than themselves, and that this was the major difference between different-sex and same-sex family structures. These participants’ notions of different-sex parenting and families reflect an awareness of dominant discourses of motherhood, fatherhood, and families, and a deliberate departure from these discourses. Instead, these parents appear to embrace other discourses of motherhood, fatherhood, and families, particularly the feminist notion of choice as it pertains to families (hooks, 2000).

hooks (2000) suggests that feminist parenting embodies deliberate choices about the way that children are raised, particularly the rejection of the rigid enforcement of gender roles and performance on said children. With regards to parents, hooks (2000) also notes that feminism stresses the need for men to participate equally in parenting with women, which may be extended to both parents in same-sex relationships. In this regard, the observations that participants have made about the differences between their own families and those which are headed by different-sex parents represent a tension between dominant discourses of mothers, fathers, and families, and feminist discourses of these constructs.

The notion of the tension between the pursuit of either a ‘queer difference or an acceptable sameness,’ originally used in an investigation of LGBT+ representation on television talk shows (Gamson, 1998), refers to gender and sexuality diverse individuals and their community gaining visibility at the expense of some social acceptability. This dichotomy can also be understood in a discursive context; the embodiment of a ‘queer difference’ can be thought of as an alignment with queer theory discourses in terms of how queer identifying people embrace their ‘otherness’, and ‘acceptable sameness’ may be understood as the ways in which queer people mimic dominant
discourses of social phenomena and personal appearance in order to be viewed as normative within this context. Bhabha (1994) wrote about mimicry in the context of colonized peoples imitating and taking on the culture of their colonizers. ‘Acceptable sameness’ with regards to LGBT+ individuals and their families can be thought of as a variation of mimicry as by Bhabha (1994) proposed, as aspects of heterosexual, dominant discourses of motherhood, fatherhood, and families may be imitated by parents in same-sex relationships for various reasons.

The above discussion regarding queer difference and acceptable sameness is relevant when considering the participants who compared the non-birth mother’s role in their own families to that of a father in different-sex families. These parents and their families reflect the concept of ‘acceptable sameness’ in that they are aligned with dominant discourses of families in which ‘genuine’ families have a mother and a father (Oswald et al., 2011). Whilst some mothers in the present study seemed content with being thought of as their child’s ‘father’, other parents lamented the ambiguity of the non-birth mother role, noting that others have equated their role with that of a father, but that they were mothers and did not agree with being viewed in this way.

Although many parents felt that there were major differences between their own families and those of different-sex families, some participants felt that their parenting roles and their families were identical, or very similar, to those of parents in different-sex relationships. The similarities that some parents noted seem to be aligned with the notion of ‘acceptable sameness’ as described above, in that participants have internalised dominant discourses of motherhood, fatherhood, and families, and attempt to emulate these in their own parenting practices. In doing so, they embody a dominant discourse of motherhood and fatherhood but at the same time, do not acknowledge any ‘queer difference’.

Two participants were in a unique position as both had been in previous different-sex relationships before forming a blended, same-sex parenting family with their relationship. As such, they were able to compare their experiences of being in a different-sex relationship and being in a same-sex relationship. These participants stressed that their different-sex relationships had much
more rigid and traditional roles than their present relationship together, reflecting dominant
discourses of families (hooks, 2000). For these mothers, their present relationship and family
resembles a departure from this rigid family structure, and reflects a feminist discourse of equal
participation by both parents (hooks, 2000).

Many participants noted differences between their own families and those with different-sex
parents. Often these observations highlighted common stereotypes of motherhood, fatherhood,
and families, indicating that whilst participants are aware of these dominant discourses, they often
feel as though they do not apply to their own families. However, not all parents felt this way; some
noted similarities between their own families and those of different-sex parents. This represents an
alignment with dominant discourses of families over queer theory discourses. The following sections
will further discuss participants’ departure from dominant notions of gender roles.

**We Have More Freedom to do What we are Good at as Parents Outside of Gender Roles**

Twelve participants noted that the ability to make new parenting roles was one of their
family’s strengths. As parenting roles are static and gender based within a dominant discourse
understanding of families (hooks, 2000), these participants demonstrate a tacit understanding of
these dominant discourses but may feel that they not apply to their family. In this sense, they stray
from dominant discourses of motherhood, fatherhood, and families and instead reflect an
alternative discourse of these constructs. These participants appear to be more aligned with queer
theory discourses of families and parenting, as they make their own model of what the parents do in
their families, outside of what mothers and fathers are expected to do based on their gender
(Gamson, 1998).

Similarly, four participants described one of their strengths as being not tied down by
stereotypes of motherhood, fatherhood, and families. This indicates a further departure from
dominant discourses of motherhood, fatherhood, and families, in that the participants feel as
though these discourses do not apply to their families. Instead of feeling excluded from this
intuition, they feel free from it, and can employ an alternative discourse in their families and
parenting. Instead, queer theory discourses are present, as queer theory aims to examine social phenomena and institutions through a queer lens (Stein & Plummer, 1996). As the participants are navigating the institution of family and parenting as queer persons, their experiences and observations of families reflect a queer theory discourse.

Many participants described their ability to create new parenting roles, and not being tied down by common stereotypes of motherhood, fatherhood, and families, to be strengths of their families. The ways that participants talked about these stereotypes indicated an understanding of dominant discourses, but without a need to conform to them. Instead, participants appear to align with queer theory discourses of motherhood, fatherhood, and families, in that they create their own family model, separate from the prevailing model.

**We Offer More Nurturing and Empathy for our Children and our Partners**

Some participants talked about how their family structure allows them to offer more empathy for their partners and their children, and to participate in more effective communication with their partners. Eight participants commented that they felt that they could understand their partner better than what they had observed in different-sex couples and offered the explanation that this was because they are the same gender as their partner. This reflects a dominant discourse of gender, as men and women are assumed to have different communication styles (Gamble & Gamble, 2021) and that therefore two men or two women in a relationship would be better able to understand one another. This finding is also aligned with queer theory discourses of families, as the concept of queer difference is present – the participants identified how their families and parenting differ from those of different-sex couples (Gamson, 1998).

Nine participants talked about how they felt that their two-mother families provided more empathy and emotional support for themselves and their children. This reflects dominant discourses of motherhood, which suggest that mothers are to take on a caring, nurturing, self-sacrificing role, which these participants imply that they participate in (hooks, 2000). However, there is a conflict between this dominant discourse of motherhood and some feminist discourses of
motherhood, which support parents being able to choose their own parenting role (hooks, 2000).

Another discourse tension is present in participants’ discussion of their awareness of their partner’s needs, and how they incorporate this awareness into their parenting roles. These participants stray from dominant discourses of motherhood, fatherhood, and families, as within these discourses, families include one mother and one father, and the different-sex parents have different, predetermined roles based on their genders (Doucet, 2006; Schindler & Coley, 2007). Because the parents in different-sex families have their set roles within dominant discourses of families, it follows that the parents in these families would not engage in parenting tasks which are the ‘domain’ of the other parent. Same-sex families stray from these discourses, as there are two mothers or two fathers, and therefore alternative parenting roles need to be negotiated. These participants’ reflections align with some feminist discourses of parenting, which emphasise that both parents need to have an equal role in the child’s upbringing (hooks, 2000).

Many participants noted that they were better able to understand their partners, being the same gender. This reflects a dominant discourse understanding of gender, as within these discourses, men and women are emotionally and mentally different and two people of the same gender would be better able to understand one another than two people of different genders. Many of the mothers felt that a strength of their families was that their children were able to receive more empathy and emotional support, there being two mothers in the family. This reflects dominant discourses of motherhood, as these discourses emphasise mothers’ nurturing and caring of their children. Finally, an awareness of their partners’ needs was a commonly discussed issue, as some parents felt that they were better able to identify when their partners needed assistance with parenting tasks and would work this into their parenting role. This awareness represents a departure from dominant discourses of families, as within these discourses, mothers and fathers have their set roles within the family and neither may engage in the tasks of the other.

Our Children Have a Better Understanding of and Acceptance of Diversity and Community
Three participants talked about how they and their children have pride in their family. This strays from dominant discourses of families, which suggest that families must have both a mother and father to function, and that families that do not fit this ideal are therefore ‘pseudofamilies’ (Oswald et al., 2011). By having pride in their families, they reject this dominant discourse and instead embody a queer theory discourse of embracing their queer difference (Gamson, 1998).

Five participants talked about how their children look different to themselves or their partners and their experience of this. Most of the time this was a benign observation, but it does reflect dominant discourses of families that children must be related to and therefore look like their parents (Di Nucci, 2016). In addition, three participants talked about how their children looked more like the non-birth mother than their birth mother. Participants’ reaction to these remarks often aligned with this dominant discourse of parents and families, as most of the participants reported being pleasantly surprised when people pointed out how they look like their children whom they are not genetically related to.

Six participants noted that they felt their children had a better understanding of and acceptance of diversity, as their family had two parents of the same gender. This is reflected in previous literature on this topic (Epstein, 2005; Hays & Samuels, 1989; Perlez & McNair, 2004) and in the queer theory concept of ‘queer difference’ (Gamson, 1998). Feminist discourses of families are also present, in that one of the aims of feminism is to increase public understanding and inclusivity of diversity (Beasley, 1999).

Several participants noted that they or their children expressed pride in their family. This represents a departure from dominant discourses of families which stress that families must include a father and a mother, and instead reflects a queer theory discourse of accepting their queer difference. Six participants talked about how they felt that their children had a better understanding of and acceptance of diversity, because of their family configuration. This reflects both queer theory notions of embracing queer difference, and feminist discourses of increasing public acceptance of diversity. The following sections will discuss the families’ supports and challenges.
We get Support From Many Places

Support From our Families

Some participants received assistance from their families of origin, both practical and emotional, and others experienced varying degrees of hostility from their families. The participants who talked about receiving help from their families reflect some dominant discourses of families, in that family members are obliged to help one another (Burg, 1999). However, the families stray from the dominant discourse that a family should have a mother and a father (McEvoy, 2017). This may be considered a queering process, as these families challenge family binary as proposed by Oswald et al. (2011). As such, these participants and their families reflect both dominant and queer theory discourses of families, and this cohesion is presented in Figure 14.

Alternatively, there is discourse tension present in participants’ discussion of their families’ hostility. These experiences reflect their families’ embodiment of dominant discourses of families in that ‘genuine’ families have a mother and a father (McEvoy, 2017; Oswald et al., 2011). The participants themselves reject dominant discourses of families, and instead reflect queer theory discourses of families by refusing to privilege heterosexuality over their own sexuality and families, and therefore rejecting heteronormativity (Yep, Lovaas, & Elia, 2014).

Participants talked about the support, they received, or challenges they experienced, from their families of origin. In those families which received familial support, queer theory discourses of accepting queer difference are present, whilst for the participants experiencing family hostility, their families of origin appear to be embodying a dominant discourse of families containing one mother and one father. The following section will describe support from other sources.

Support From Childcare Services, Work, and Parenting Groups

Six participants talked about their workplaces or inclusive childcare services as being an important source of support for their families. Dominant discourses of families also prescribe that families consist of a mother and a father, and that anything outside of this is a ‘pseudofamily’ (Oswald et al., 2011). In this sense, the parents, their supportive workplaces, and the institutions
their children attend also represent a departure from dominant discourses of families and embodies queer theories of families by accepting these families and by providing support.

Participants had varied experiences of playgroups and other in-person parenting support groups. Playgroups can provide an excellent source of support for parents (Davies & Harman, 2017; Jackson, 2009), and two participants talked about the importance of being part of inclusive playgroups for their parenting and for support. These parents favoured rainbow playgroups, which are specifically for sexuality and gender diverse parents. Safe spaces, places meant to be solely accessed by specific minority groups, can have a positive impact on the mental health and wellbeing of those who access these spaces (Hassan et al., 2018). Safe spaces for communities of sexuality and gender diverse people specifically may construct a sense of safety for these communities (Hassan et al., 2018). In this regard, a playgroup specifically intended for gender and sexuality diverse parents would serve a dual purpose of being both a safe space for these parents, in addition to providing support and other benefits that playgroups typically provide.

From a queer theory perspective, traditional playgroups may exclude gender and sexuality diverse parents, or make them feel unwelcome, depending on the culture of the group. The creation of rainbow playgroups, therefore, indicates the creation of a safe space and offering the benefits of playgroups within a supportive atmosphere. These spaces also disregard some dominant discourses of families, which assume that families have a mother and a father [REF]. In this regard, rainbow playgroups and the parents who access these playgroups stray from dominant discourses of families and embody queer theory discourses of accepting their queer difference.

Participants’ workplaces and playgroups were two of the most discussed sources of support, outside of participants’ families of origin. The workplaces and accepting childcare services and playgroups represent a departure from dominant discourses of families, and instead queer theory discourses of acceptance are present. The following section will describe the discourses present in other challenges participants faced.

Other Challenges our Families Face
Eleven participants discussed how the Australian Marriage Law Postal Survey and the ensuing public discourse surrounding this were detrimental to their families. Participants noted the severe negative impact of their families and parenting being targeted for intense scrutiny. The ‘No’ campaign during this time questioned whether same-sex parents can provide an optimal upbringing for their children (Power, 2017), and therefore represents discourses of families and parenting, which also suggest that children require a mother and a father (McEvoy, 2017). When observing this event through a queer theory lens, such a reading would consider how same-sex families and issues are presented (Stein & Plummer, 1996). In this regard, same-sex families are presented as ‘other’, juxtaposed with the central position of different-sex parented families.

When discussing the postal survey, participants talked about how they felt as though their families were more visible and under scrutiny. There seemed to be a public discourse at the time that it was acceptable to discuss the issue openly; several participants noted that their friends and family members who were against the legalisation of same-sex marriage were much more vocal during this time, to the detriment of said same-sex families’ mental health and wellbeing.

Several mothers noted that they were thankful that their children were too young to understand the public discourse at the time of the interview. This reflects a dominant discourse of motherhood, that mothers are to protect their children and to be concerned with their wellbeing (Doucet, 2006). The mothers who noted this seemed to be more concerned of the effect the debate had on their children, rather than on themselves or their partners. This also reflects dominant discourses of motherhood, as these discourses encourage mothers to selflessly care for their children (Wearing, 1990).

In addition to the Australian Marriage Law Postal Survey, some participants discussed the day-to-day experience of homophobia, both online and in person. Some participants noted that the negative content can make parents doubt their own parenting, representing some dominant discourses of families and of same-sex parents - the notion that parents in same-sex relationships cannot provide an optimal upbringing for their children (Oswald et al., 2011).
Some of the more benign challenges experienced by participants include awkward conversations stemming from assumptions of heterosexuality. There is an interaction of queer theory discourses and dominant discourses, as participants often had to choose between erasing their family by not correcting heteronormative comments, and awkwardly correcting comments. This tension also represents the concept of ‘queer difference’ vs ‘acceptable sameness’ (Gamson, 1998), as parents must choose how much of their family structure to divulge at the cost of appearing heteronormative.

**Summary**

Discourses of motherhood, fatherhood, and families interact with one another in varying ways to build participants’ notions of motherhood, fatherhood, families, and parenting. The ways that participants talked about their experiences most strongly represented dominant discourses of these constructs, both in terms of the presence of these discourses and participants’ deliberate departure from them. Feminist discourses and queer theory discourses were often present alongside dominant discourses, alternately aligning and contrasting with these.

Commonly, dominant discourses of motherhood, fatherhood, and families aligned with either feminist or queer theory discourses of these constructs; this is demonstrated in Table 4. This is significant, as dominant discourses are those which other discourses are compared with and measured against (Raiter, 1999). To have dominant discourses of motherhood, fatherhood, and families appear so often in comparisons with alternative discourses confirms the dominant discourses as such. The fact that dominant and alternative discourses of families, motherhood, and fatherhood combine so readily may suggest that dominant discourses of these institutions may be changing to take into account a greater diversity in family forms, at least for the parents in same-sex relationships in the present study.
### Table 4

**Example Quotations for Discourse Combinations**

<table>
<thead>
<tr>
<th>Discourse combination</th>
<th>Example quotations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dominant discourses *</td>
<td>“My parents divorced when I was really, really young, um, my dad not being there so much, I’ve tried to, you know, learn from the mistakes of the parents kind of thing, um, trying to be very... present in my children’s life.” (Steve)</td>
</tr>
<tr>
<td>feminist discourses</td>
<td>“I think when Jacob- especially when Jacob was born, and my role was to have the baby and then to feed the baby, and, you know, to kind of be the body for the baby for such a long time that what that left for Michelle was to be the earner for the baby, so it was how she constructed herself.” (Amy)</td>
</tr>
<tr>
<td></td>
<td>“I’m fearful that my daughter will be exposed to such negative thoughts and outlooks by people that she doesn’t know [...] it’s my role to I guess, protect her from that [...] I just get a bit fearful that I’m not going to be able to protect her enough from that kind of stuff.” (Megan)</td>
</tr>
<tr>
<td>Dominant discourses *</td>
<td>“I don’t have to wonder why she’s being crazy, um, because I probably already know why she’s being crazy, um, and I find it helpful to be able to remove that kind of argument, is it removes an easy argument to be had, I don’t have to go, “It’s because you’re such a man,” or whatever, like, you just act the way you do because you’re the person that- the gender is irrelevant, because the gender is the same.” (Sue)</td>
</tr>
<tr>
<td>queer theory discourses</td>
<td>“We were really lucky to have so much support, ‘cause we were going through fertility for so long, like, we had so many people rally behind us, we had so much love and support at work, and friends and family, and everything.” (Lisa)</td>
</tr>
<tr>
<td></td>
<td>“We then came to the decision that we would go through an anonymous...”</td>
</tr>
</tbody>
</table>

*Dominant discourses:
1. feminist discourses
2. queer theory discourses
donor, because it just, you know, rules out the majority of the, um, confusion and everything like that as well, um, and we just wanted a child just for both of us [chuckle] we didn't want to share with anyone else." (Jennifer)

Feminist discourses *
queer theory discourses

“I think Amanda just always had that desire, like, to want to have a baby, even though I wanted to have a baby, I was scared of the whole process, like, you know, just how we’re gonna do it, and giving birth, and like, all that just petrified me, so I was kind of happy that we had that someone else that was willing to do it.” (Lisa)

“Because our family is- will be the different to some of the other families that Faith will see, it means that there’s no way to get around the reality of, like, talking to her about diversity, and inclusion, and this kind of message of, ‘everyone is different, and that’s good,’ and, um, you know, it’s, like, nice to have, like, different kinds of friends, and that kind of upholds the diversity message, I think.” (Sara)

Throughout the analysis process, there appeared to be an ongoing tension between dominant discourses of how families ‘should’ look and operate, feminist discourses which champion parents’ choices with regards to family formation and parents’ roles, and queer theory discourses regarding the freedom of non-heterosexual people to form families, raise children, and be fairly represented in institutions which concern them; Table 5 presents examples of these tensions.
Table 5

*Example Quotations for Tension Between Discourses*

<table>
<thead>
<tr>
<th>Discourse tension</th>
<th>Example Quotation</th>
<th>Aligned discourse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dominant discourses</td>
<td>“A big part of us having a small baby is, like, you do breastfeeding, having to feed every few hours, so we discussed that, um, and I think if anything, Georgia tries to do more, of all the other stuff because she wants to compensate because I always have to be- so, um, she will, yeah, kind of compensates, tries to do more nappies and stuff like that.” (Imogen)</td>
<td>Feminist discourses</td>
</tr>
<tr>
<td></td>
<td>“You know, my idea of teamwork is that you just do the whole thing, whatever is required is what you do.” (Sue)</td>
<td>Feminist discourses</td>
</tr>
<tr>
<td></td>
<td>“I think everyone wants to box you in as the dad, it’s like, I’m not the dad, but, I- then you go, well, I’m not the birth mother, and it’s like, yeah, I think that’s where people then get stuck, because then they don’t know what to- what box to put you in.” (Rachel)</td>
<td>Feminist discourses</td>
</tr>
<tr>
<td></td>
<td>“With my husband, it was only me doing the parenting, whereas when it’s me and Michelle, it’s actually both of us.” (Jess)</td>
<td>Feminist discourses</td>
</tr>
<tr>
<td>Queer theory discourses</td>
<td>“We felt like we were kind of being squashed into a system that was just designed for [...] male-female couples who’d had troubles with fertility.” (Sara)</td>
<td>Queer theory discourses</td>
</tr>
<tr>
<td></td>
<td>“Maybe from already having been, like, in an</td>
<td>Queer theory</td>
</tr>
<tr>
<td>Discourse tension</td>
<td>Example Quotation</td>
<td>Aligned discourse</td>
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<tr>
<td>alternative kind of relationship, and not having those strict rules, we’re already outside of like, what society would expect us to do, so then I guess we had the freedom to be more creative with our roles and our- yeah. Yeah, it is really good in some ways, ‘cause you’re not stuck in those roles.”</td>
<td>(Gina)</td>
<td></td>
</tr>
<tr>
<td>“[My son is] just getting to that point where he’s happy to tell people, like, he’s not embarrassed, he’s not- he doesn’t think it’s anything different, his friends at daycare don’t think it’s different.”</td>
<td>(Amanda)</td>
<td></td>
</tr>
<tr>
<td>“What’s a straight person got to do to be able to get pregnant? They go out to a bar and they get drunk, and sleep with some random, and wham, bam, they’re pregnant. You know, where’s the counselling there?”</td>
<td>(Carol)</td>
<td></td>
</tr>
<tr>
<td>“‘Cause you do counselling which I found, like, a little bit patronizing, because, this idea of someone who’s never met you does an interview with you who then decides whether or not you should be allowed to have kids, it’s like, well...other people don’t have to do this.”</td>
<td>(Sara)</td>
<td></td>
</tr>
</tbody>
</table>

As presented in Table 5, the most common source of discourse tension was between dominant discourses of families, motherhood, and fatherhood, and feminist and queer theory discourses of these institutions. It is worth noting that the most common discourse cohesion was also between dominant discourses and other discourses. The dominant discourses’ numerous interactions with alternative discourses point to the continued dominant position of these
discourses.

When participants aligned with multiple discourses, the combination commonly involved dominant discourses and another discourse, but when there was a clash of discourses, participants tended to align more with alternative discourses and reject dominant discourses. In cases of tension between queer theory discourses and feminist discourses of families, the discord was mainly concerned with how the process of conceiving a child differs for people in same- and different-sex relationships. Within feminist discourses, it is a person’s right to choose whether to become a parent and how to do so. Some of the mothers in my study were aware of that notion and expressed frustration that they, as people in same-sex relationships, were not able to exercise their right to have children as readily as women in different-sex relationships.
Chapter 6: Discussion

This chapter presents my findings and analysis in the context of relevant previous research, before suggesting pathways for future research and presenting recommendations for policy and practices concerning families with same-sex parents. I will describe how the dominant discourse of families having different-sex parents is imposed on same-sex parented families, leading to role ambiguity and unclear behaviours associated with the role.

This study investigated how parents in same-sex relationships experience and construct their parenting roles. Dominant discourses of families endorse strict prescribed roles for parents in different-sex relationships, but do not offer prescriptions for parents in same-sex families. In this way, same-sex parenting is an incomplete institution (Cherlin, 1978; Hall & Kitson, 2000). Being the only available prescribed roles, dominant discourses of families, motherhood, and fatherhood permeated participants’ descriptions of their experiences; participants depicted systems and institutions which excluded them, and which failed to acknowledge their families.

Current Findings, Previous Findings, and Discourses

From the findings, five key themes were identified; the data formulating each of these themes will be discussed in detail. The data suggests that there are many ways of becoming and being a parent in a same-sex relationship, and that dominant, feminist, and queer theory discourses of families and parenting combine and contradict one another in various ways in the creation of these roles. Within the current and previous chapters, there are different amounts of content between the different themes. The quantity of participants who discussed each topic was a factor in this; for example, ninety percent of participants discussed the formation of their families and the decisions associated with this process. This was an important topic for a quarter of participants, whose discussion of family formation accounted for over twenty percent of their individual interviews. Participants were eager to explain how they had created their families and their decision-making processes.
Another factor in the disparate lengths of these sections is how meaningful participants considered the various topics. For example, whilst a third of participants spoke about how their families differed from their counterparts with different-sex parents, these participants used emotive language and appeared eager to share their insights. Likewise, whilst half of the participants discussed how role models aided them in coming to their parenting roles, they did not emphasise the importance of this factor.

**The Evolution of the Family we Made**

**Becoming a Family.** The findings suggest there is a variety of configurations of how same-sex families are formed. These findings support those of previous large-scale studies, which also found many paths to same-sex family formation and that these families also have diverse configurations (Dempsey, 2013; Power et al., 2010). Family formation was evidently important for participants, 90 percent of whom expressively spoke at length about how their families came to be, and how they are structured.

The findings highlighted assisted reproductive technologies (ART) as the most common method for participants to became parents; almost three quarters of participants used sperm donation. Such findings support previous literature, which has also identified sperm donation as one of the most common paths to parenthood for female parents in same-sex relationships (Bos & Hakvoort, 2007). The findings also shows that two thirds of these participants discussed their decision regarding a known or unknown donor; this indicates how important participants regarded this choice.

The findings indicate that participants who chose an unknown donor feared that choosing a known donor may have led to ambiguous family boundaries and strained familial relationships. In addition, participants feared that had they chosen a known donor, the donor may have attempted to claim custody of the child in the future. These findings support previous research, in which parents explained that choosing an anonymous donor would allow for an emotionally uncomplicated, clear family situation in which family boundaries are protected and would also ensure that the donor does
not become involved in childrearing (Englert, 1994; Herrmann-Green & Gehring, 2007). The findings also support previous literature in which participants opted for an unknown donor to avoid the possibility of a known donor attempting to claim custody of the child (Gartrell et al., 1996; Gartrell et al., 2015).

The findings suggest that participants who chose an unknown donor may have done so to avoid having to negotiate ambiguous roles and relationships which are not prescribed by dominant discourses of families. This finding offers support for some dominant discourses of families in which members’ relationships are prescribed based on how they are related (Redding, 2008), and that roles which are not clearly defined, such as stepparents and known donors, are associated with role ambiguity and role strain (Cherlin, 1978). In addition, this finding suggests that being a known donor, or the child of one, is an incomplete institution (Cherlin, 1978), although incomplete institutions have been primarily studied with regards to blended families (Cherlin, 1978; Hall & Kitson, 2000). An incomplete institution is a familial role in which behaviour or relationships are difficult to identify or define (Cherlin, 1978; Hall & Kitson, 2000). In this way, families with known donors also represent incomplete institutions, as there is no social script from which to base relationships and behaviour upon within these family configurations. Future research may investigate the existence of such a script, or how these families come to their roles in the absence of one.

The findings also suggest that participants who chose an unknown donor felt that it was important for their child to have a maximum of two parents. This supports previous literature concerning same-sex parents, with participants in these studies asserting that a stable home environment with two parents only was important (Almack, 2006). This finding also speaks to some feminist (Simons, 1984) and dominant discourses (Austin, 2007; Hobbes, 2018) of parenting. Within each of these discourses is the notion that parents have a right to bring children into the world and to raise them as they see fit, and the tacit notion that adults who are not parents of the children in question do not have this right and are therefore permitted only limited input to their upbringing.
The findings also suggest numerous social and financial challenges associated with accessing and attempting to access ART. The male participants whom I spoke with explained that their twin children were born via a surrogacy arrangement in a south Asian country, and that the parents stayed in that country for the first six weeks of their children’s lives. Whilst the fathers did not discuss the challenges associated with this process, previous literature has noted the immense financial cost of surrogacy to prospective parents (Goldberg, 2010), and issues regarding the legality of the procedure in different jurisdictions (Young, 2016).

The findings indicate that same-sex couples face significant financial challenges when accessing other forms of ART; 24 percent of participants noted that the cost of ART was an issue for their families. This issue may be partially due to current Medicare laws in Australia, which specify that the partner receiving treatment must be assessed to be medically infertile before subsidies for ART may be applied (Australian Institute of Health and Welfare Amendment, 2019). Same-sex couples wishing to have a biological child through an unknown donor cannot attempt to conceive without medical intervention, and the fertility status of the partners is typically unknown until they have undergone multiple failed rounds of intra-uterine insemination (IUI) and in vitro fertilisation (IVF). The couple must therefore pay for the full cost of treatment for a certain number of rounds of IUI and IVF before they may be considered medically infertile and thus qualify for subsidisation of these services; Goldberg (2010) describes this as an example of heterosexism in the medical setting. The data indicates participants’ frustration with this system, with one participant comparing their lengthy, costly struggle to become a parent with the experience of hypothetical heterosexual people falling pregnant with no medical intervention or cost involved.

The findings suggest that complicated surrogacy laws were challenging for four participants who intended to become parents through reciprocal IVF arrangements. This procedure, also known as co-IVF or egg sharing, involves one partner’s oocyte being fertilised by donor sperm and the resulting embryo then being implanted into the other partner for the duration of the pregnancy (Roth, 2017; Yeshua et al., 2015). In some Australian states and territories this procedure is legally
considered surrogacy and is therefore not permitted unless there are medical reasons why the biological mother (the partner who is contributing her egg) cannot become pregnant (Surrogacy Act, 2008). Two participants experienced difficulty finding a willing healthcare provider to perform the procedure, given its legal ties to surrogacy, but eventually discovered one partner’s infertility and were therefore able to access this method of conception.

Under the convoluted legal-medical system, female same-sex couples wishing to both have a biological connection with their child cannot legally have one mother provide genetic material for their child and the other gestate their child, as the gestating mother is legally a surrogate for her partner, and the surrogacy laws do not consider the intention for both women to raise the child. The laws which equate reciprocal IVF with surrogacy appear to have been made without consideration for same-sex couples and is a strong example of heterosexism and discrimination against same-sex couples in the medical setting.

For 13 percent of participants in the study, both parents in female same-sex couples wished to have a biological link to their child. This supports the presence of some dominant discourses of motherhood, in which biological motherhood is the only ‘legitimate’ form of motherhood (Sosnowska-Buxton, 2014). In this way, participants align with some dominant discourses of motherhood, but reject other dominant discourses of families – particularly those which assert that parents should be different genders. This nuanced relationship between participants and dominant discourses of families, motherhood, and fatherhood may point to shifting dominant discourses or entirely new discourses of families.

The findings reported that 39 percent of participants who became parents through donor gametes considered counselling to be a generally negative part of the ART experience. Such data highlights that these participants felt that counselling sessions were condescending, that their lives were being scrutinised, and that it was an unnecessary part of the ART process. Counselling is a prerequisite for ART involving donor gametes (National Health and Medical Research Council, 2017), as it is intended to reassure patients and their partners about the medical component of the
procedure (Baetens & Brewaeys, 2001). However, the present findings support previous literature which suggests that counselling prior to donor insemination may be used to screen the couple, to ensure they are psychologically and socially ‘fit’ to receive treatment and subsequently become parents (Baetens et al., 2002). The findings also support the Benward (2015)’s conclusions that mandatory counselling for gamete donation recipients may become an obstacle to receiving treatment for many couples, including those of different genders.

The findings suggest that the ART system was not intended for same-sex couples or their families as reported by three participants. This would support previous literature concerning ART, particularly donor insemination, which notes that clinics offering these services were originally meant to aid different-sex couples to become parents (Almack, 2006). Almack (2006) refers to the heterosexual framework inherent in the ART treatment system, and that this system aims to uphold the traditional family model i.e., two different-sex parents and their shared biological children.

This study found that there are many challenges facing same-sex couples wishing to access ART services. Despite fertility clinics becoming increasingly more open to accepting same-sex couples as clients, the financial cost, perceived scrutiny in the counselling process, and legal barriers to some forms of ART make this process inaccessible to many same-sex couples wishing to become parents. From a Foucauldian perspective, the medical institution holds the power of determining which candidates will become parents, and those who become parents outside of medical institutions and systems transfer power from the institution to themselves.

The findings indicate that three participants reduced or avoided the above challenges with regards to ART by choosing a known donor; five more participants had initially planned to use a known donor but ultimately accessed fertility services. Participants noted that this choice was made to bypass the financial challenges related to using a fertility clinic, to make the process of becoming parents less medicalised, and they felt it was important for their children to have a knowledge of ‘where they came from’. These findings support previous literature, which notes that parents who choose a known donor feel that their child has a right to know of their genetic background, or to
have a relationship with the donor at some point in the future (Almack, 2006; Bos & Hakvoort, 2007; Gartrell et al., 1996; Gartrell et al., 2015; Goldberg, 2010; Herrmann-Green & Gehring, 2007). The findings also support those of other studies, which have noted that many fertility clinics do not provide services to female same-sex couples (Almack, 2006; Herrmann-Green & Gehring, 2007), and therefore choosing a known donor is utilised to become parents outside of the medical institution.

The findings outline several factors which contributed to how female participants decided which partner would become pregnant and give birth to their children. A third of female participants who had utilised sperm donation had decided that the older partner would try to become pregnant first; this finding supports prior studies which have also described maternal age as a factor in this decision (Herrmann-Green & Gehring, 2007; Wendland et al., 1996). Another factor in this decision was whether one parent felt more drawn to pregnancy and more strongly desired a biological link to the child than their partner did; 44 percent of participants discussed this factor. This finding also supports past literature which has identified the desire to experience pregnancy and childbirth as a factor in deciding which partner would carry their child (Goldberg, 2010; Herrmann-Green & Gehring, 2007; Wendland et al., 1996), and in some cases is the most decisive factor (Herrmann-Green & Gehring, 2007). With regards to desiring a biological connection with their children, the current data supports previous findings, which note that for some parents in same-sex relationships, having a genetic link to their children is important (Goldberg, 2010). The present data suggests that medical infertility was another factor in this decision; this gives partial support for previous literature, in which this is also a factor in the decision of who will carry the child for a small number of mothers (Goldberg, 2010).

The finding that having a biological link to their children was important for five participants may be associated with dominant discourses of motherhood, particularly those which emphasise biological motherhood (Sosnowska-Buxton, 2014). Future research may investigate factors which contribute to what degree parents internalise these discourses.
The findings demonstrate that although 62 percent of participants became parents through ART or gamete donation, 17 percent of participants formed blended families through their relationship with their partner. These findings indicate that stepparents in these families had gradually integrated into the family and now have a strong relationship with the children. The data supports previous literature concerning blended families, which has noted that stepparents’ gradual integration into the family is common, despite the stepparents feeling pressure to ‘instantly’ form a relationship with their stepchildren (Dainton, 1993), and wanting to assimilate into the family quickly (Cherlin & Furstenburg, 1994). Blended families appear to be common amongst Australian same-sex parents. Power et al. (2010) surveyed 455 families parented by same-sex couples and noted that 57% of these families were parenting children who were conceived in the context of a previous family configuration. Stepparents are therefore present in a significant number of these families, although the precise proportion of stepparents in Power et al.’s (2010) sample is unclear.

The current findings suggest that, although they experienced some role ambiguity when first forming their families, the stepparents in this study were very clear about their position and role within their families and readily identified as parents of the children in their care. This contrasts with previous studies, which found that stepmothers in different-sex parented blended families tend to experience a considerable amount of ambiguity surrounding their role (Weaver & Coleman, 2005). Some discourses of parenting, motherhood, and stepparenting may partially explain this discrepancy; within dominant discourses of motherhood, mothers are expected to fulfil a primary caregiver role (Doucet, 2006), and stepparents to fulfil a ‘secondary parent’ role (Weaver & Coleman, 2005). Therefore, stepmothers are expected to simultaneously fulfil the contradictory roles of ‘primary caregiver’ and ‘secondary parent’.

Stepmothers in different-sex relationships are often careful to not identify as a mother, for fear of offending their stepchildren’s biological mother (Weaver & Coleman, 2005). Dominant discourses of fatherhood often position the biological mother as a gatekeeper to a biological father’s contact with his children (Cowan et al., 2010), and offending or upsetting the biological mother may lead to
her refusal to allow contact between the children and their biological father. However, in same-sex
stepfamilies, the stepmother is in a relationship with the biological mother, and many of these issues
become moot points; this was certainly true for the stepmothers in this study, who strongly
identified as their stepchildren’s parent.

Indeed, the findings indicate that all participants who were members of blended families did
not experience significant issues relating to their family configuration. However, the data highlighted
challenges for two participants, for whom the ongoing presence of their ex-husbands presented
other difficulties. These participants described significant hostility from their families of origin and
their ex-husbands’ families over their formation of a family with two mothers. This finding supports
previous literature which reports specific challenges to same-sex blended families, notably
homophobia from ex-spouses and their families (Hequembourg, 2004). The data also supports
previous studies which have identified participants’ same-sex family configuration as a factor in their
custody battles with former spouses (Hequembourg, 2004; Lynch & Murray, 2000). As previously
discussed, dominant discourses of families emphasise legitimacy of different-sex parented families
over other family forms (McEvoy, 2017). These may factor into the hostility these participants
experienced, as their extended families’ antagonism is linked to the participants’ family structure.

The data demonstrates that fewer than seven percent of participants became parents through
fostering and none through adoption. This finding is somewhat at odds with common depictions of
adoption, which is often portrayed as a common and accessible option for prospective parents in
same-sex relationships (Coram Ambitious for Adoption, 2020). However, navigating Australian foster
care and adoption systems can be a complex and lengthy process for prospective adoptive parents
(Department of Communities, 2020), and may factor into why there were so few foster and adoptive
parents in the present study.

The findings indicate that the two foster parent participants experienced few significant
difficulties when applying to become foster carers and in their experience of this role. The
participants noted that they had prepared for a school age child but were then asked if they could
accommodate an infant; the participants related no other challenges related to the care agency. This finding contrasts with previous literature, in which foster care agencies with religious affiliations may decline same-sex couples’ applications to become foster carers as the agencies are opposed to such relationships (Australian Psychological Society, 2020), and some agencies may discourage potential carers who have not had children yet (Keogh & Svensson, 1999).

These findings are also at odds with other research, in which carers often report experiencing challenges with regards to foster children’s behaviour (Octoman et al., 2014) and meeting their mental health needs (York & Jones, 2017). In contrast, although their foster child has a chronic health condition, the foster parents in this study did not describe significant challenges with their child’s behaviour or in meeting his mental health needs.

Potential carers often express discomfort at the idea of returning children to their biological families (Triseliotis et al., 2000), and this was indeed challenging for the foster carers in this study. Foster care agencies stress that a goal of this system is to support the reunification of children with their birth families, and that placing a child with foster parents is most often a temporary arrangement (Panozzo et al., 2007; Tsang et al, 2005). Children in foster care (even permanent care, such as the child of this study’s participants) usually also have regular contact with their birth parents and other family members (Taplin, 2005), either to support the eventual reunification with their birth families, or with the intention of the child having a stronger sense of identity (Boyle, 2015; Taplin, 2005). For aspiring parents, the knowledge that a foster child has birth parents and a family of origin whom they may have an attachment to and ongoing contact with, is disruptive to the dominant discourse of families only having two parents and one household (McEvoy, 2017; Sayres, 1992). The above challenges are common reasons for why people choose not to become foster carers at all (Triseliotis et al., 2000) and may explain the low proportion of foster carers in the present study.

The findings highlight participants’ nuanced relationships with dominant discourses of motherhood, fatherhood, and families. The ways in which participants became parents reflected some dominant discourses of families and motherhood and rejected others; 93 percent of
participants were in single-household, two parent families, with seven percent sharing parenting
with a former partner. This reflects dominant discourses of families as having two parents, but strays
from these discourses as the families that participants form have two same-sex parents. It appears
participants are balancing Gamson’s (1998) notions of ‘queer difference vs acceptable sameness’, by
violating some dominant discourse notions of families, but adhering to others rather strictly.

In considering these findings, this study proposes that a new discourse of families and
parenting is beginning to take shape. This new discourse incorporates some of the previous
dominant discourse notions of family structure, particularly that of families having two parents, but
which also incorporates some feminist discourses of parenting, including those in which parents
share parenting tasks, divide these tasks equitably, and value working together as a team. It is
unclear whether this emerging discourse is applicable solely to same-sex parented families, or to all
families; further research is required to investigate its prevalence amongst parents more generally.

**Into the Future.** The findings indicate that participants’ families and roles changed over time,
and that participants anticipated further change in the future; this finding supports previous
literature in this field (e.g., Goldberg, 2010). The data show that 78 percent of role changes and
potential role changes were linked to the couple renegotiating roles and duties as new situations
and issues arise, such as the birth parent returning to work, and 22 percent of role changes related
to a stepparent integrating into the family.

As noted in the previous section, the findings suggest that stepparents in same-sex parented
families experience far less role strain than stepparents in different-sex parented families. However,
the findings also indicate that stepparents’ current parental role differs from their role when they
first joined their family. When the family first formed, the stepparent tended to defer to the
biological parent when making parenting decisions, as family members were adjusting to new family
dynamics and the stepchildren and stepparent were building relationships with one another. Whilst
this does support literature regarding stepparents’ roles in different-sex parented families (Weaver &
Coleman, 2005), the tendency for stepparents in same-sex parented families to become more parent-like in their role over time is a point of departure from previous findings.

The difference between the present findings and those of previous literature may be accounted for by an interaction of dominant and queer theory discourses of motherhood, fatherhood, and families. As previously discussed, dominant discourses of motherhood may partially explain stepmothers in different-sex parented families’ reluctance to use the title ‘mother’. Within these discourses, families may contain only one mother (Park, 2013), and the biological mother may be considered a gatekeeper to the father’s contact with the children (Furstenberg & Cherlin, 1991). According to these discourses, if the stepmother becomes too ‘mother-like’, this may upset the biological mother who may in turn restrict the father’s contact with the children. In same-sex parented stepfamilies there is no risk associated with the stepmother becoming too ‘mother-like’, as her partner is the children’s biological mother and usually encourages the stepmother to fulfil a more active role in the family; this was often the case with participants in this study. In addition, in same-sex parented families the unit already strays from dominant discourses of families, as there are two mothers or two fathers present in the one household. Therefore, the dominant discourse of families having one mother, and this mother engaging in the bulk of the childrearing, does not appear to apply to families with two mothers or two fathers; future research may further investigate this finding.

The finding that the stepparent’s role changes over time in same-sex parented stepfamilies contrasts with dominant discourses of families, motherhood and fatherhood. These discourses are prescriptive with regards to gendered parenting behaviours (Singh, 2016), and the core roles do not appear to change as their children age.

The data indicates that close to a quarter of participants feared that their children will be at risk of bullying and social exclusion at school. This finding is congruent with previous research, in which parents also reported concern about how their family configuration will impact upon their child’s social development (Goldberg, 2010; Ryan, 2012; Trub et al., 2017). The present findings also
suggest that about 30 percent of participants felt that the social climate in Australia would become more positive towards families such as theirs by the time their children go to school, and that their children would feel more welcome in schools by this time. These participants may be correctly noticing a trend, as longitudinal studies have found that the Australian public’s attitude towards same-sex couples and their families has become increasingly more favourable over the past decade and may continue to become even more so (Perales & Campbell, 2018).

The current findings provide evidence for shifting dominant discourses of families. In contrast with dominant discourses from decades ago, participants’ hope for improving societal attitudes towards families such as theirs, and longitudinal studies predicting such a trend (e.g. Perales & Campbell, 2018), point towards these discourses changing to include nuclear families with two same-sex parents. Although dominant discourses of families may be shifting in some respects, other dominant discourses of families, such as the ideal of the two-parent family, remain. The following sections will discuss the present findings regarding parenting behaviours.

**How and why we Parent the way we do**

**How we Divide Parenting Tasks and Make Parenting Decisions Together.** The findings demonstrate how participants decided to share household and work responsibilities when their children were first born. Some of the factors associated with these decisions included which parent was pregnant with the child, breastfeeding decisions, and the parents’ careers and finances. These findings offer support for previous literature, which also found differentiated parental roles in families with same-sex parents in the initial stages of parenthood (Goldberg, 2010; Goldberg & Perry-Jenkins, 2007).

The current findings support some dominant discourses of families and parenting and demonstrate a departure from others. Within these discourses, mothers are expected to engage in caregiving and household management tasks, and fathers are primarily expected to fulfil a provider and disciplinarian role (Arnott & Brown, 2013; Freeman, 2004; Paschal, et al., 2011; Schindler & Coley, 2007; Schreffler, et al., 2011); participants also described how their parenting roles were
highly differentiated at the beginning of their children’s lives. However, these roles became less separate as their children grew; this represents a departure from dominant discourses of motherhood and fatherhood.

The data also highlight that close to a quarter of participants emphasised their different roles being of equal value. These findings may offer support for some feminist discourses of parenting (e.g. hooks, 2000), which advocate an egalitarian approach to parenting - an equitable division of labour, in which parents may engage in different tasks, but both recognise that their tasks are of the same value (Wolfe, et al., 1999).

The findings indicate that participants firmly regarded motherhood and mothering behaviours as a form of labour; participants discussed both parenting and paid employment when talking about ‘work’. The participants who were engaged in more paid work than their partners seemed acutely aware of how much their stay-at-home partner worked to take care of their child, and four participants described how they therefore engaged in as much housework and childrearing as they could to lessen their partner’s workload. This finding disregards some dominant discourses of work and motherhood, which separate ‘mothering’ behaviours from paid employment (the latter alone being classified as ‘work’) (Managhan, 2005), and some which considered women incapable of work at all (Oliver, 2005). Instead, the findings align with some feminist discourses of motherhood, in which mothering is regarded as a form of work (Maher, 2004).

The data indicates that decisions surrounding breastfeeding had an impact on how participants decided upon paid work arrangements and division of other parenting tasks with their partners; over half of the participants discussed these decisions. As previously noted, four participants described how the non-breastfeeding partner consciously took on more of the other caregiving and household tasks as they recognised that breastfeeding, especially on demand, was a time-consuming and physically taxing task. In addition to sharing the workload of caring for an infant, one participant also detailed how the nonbirth mother’s involvement in and creation of sets of rituals (e.g., reading a story before bed) with her child helped to develop a bond between them.
These findings support those of Goldberg and Perry-Jenkins (2007), who found that the nonbiological mothers in their study also established their own routines and activities with their children. This was done both to ease the birth mother’s workload and to establish a bond between the nonbirth mother and her child (Goldberg & Perry-Jenkins, 2007).

The findings show how participants’ careers and finances had an impact on how they and their partner divided parenting tasks beyond their children’s infancy. Thirty-one percent of participants described how the partner with less flexible work hours or more earning capacity tended to engage in more paid work than their partner, who engaged in more childcare and unpaid labour. These findings support previous literature; whilst several authors have noted a pattern of one parent engaging in more paid work and the other parent doing more childcare (Goldberg et al., 2008), there also tended to be an egalitarian division of household tasks (Dempsey, 2013; Herrmann-Gehring, 2007; Sullivan, 1996).

The findings suggest that there are many ways to be a mother or a father. These data contrast with dominant discourses of motherhood and fatherhood, which emphasise that there is only one right way to be a mother or father (Cowan et al, 2010; Marshall, 1991). These findings appear to align more with some feminist discourses of mothering, which assert that there are many variations of mothering behaviours and roles (Diduck, 1993), and some queer theory discourses of families which describe many family forms with gender and sexuality diverse parents (Power et al., 2010), in which parents’ roles may not necessarily resemble those of different-sex parented families.

The data indicate that just over half of the participants came to their roles through explicit communication with their partners, although one participant lamented that there may be too much communication at times. There is little to no literature specifically regarding explicit communication for determining parenting roles, although Dunne (2000) describes female same-sex parents’ cooperation and negotiation when determining how they divide labour; in this way, the present findings offer limited support for previous research.
The data also suggest a natural progression to parents’ roles within some same-sex parented families, and that these roles are based on parents’ different strengths; 72 percent of participants felt that there was a natural progression to their roles, and 34 percent described how they and their partners worked to their strengths. These findings support those of previous studies, which noted that many women in same-sex families may “find [themselves] gravitating toward the role that suits [their] disposition and resonates with [their] own personal identifications,” (Crespi, 2001, p. 20) and that the division of specific parenting tasks are often based on personal proclivities and strengths (Downing & Goldberg 2011).

When considered together, the findings suggest that a combination of individual differences, personality factors, and the extent to which gendered parenting roles are internalised may contribute to participants’ parenting roles and behaviours. Over half of participants described how their own role and their partner’s role currently differ, and 69 percent described role differentiation with their partner when their children first came into their lives. This role differentiation resembled dominant discourses of mothering and fathering in that one member of the couple would be the primary parent and the other the primary earner. In some ways, in the absence of dominant discourses regarding clear differentiated roles for parents in same-sex relationships, these parents may have found themselves fulfilling the more easily accessible dominant discourse roles of mothers and fathers in different-sex parented families.

However, despite these parallels with dominant discourses of mothering and fathering, participants tended to move away from highly differentiated roles as their children grew from infants to children and beyond. Although 69 percent described such differentiated roles at the time of their children’s birth, this reduced to 50 percent for participants with pre-school or school age children, with 24 percent stressing the equality of their roles and 34 percent commenting on their similar or identical parenting roles. This is a significant point of difference between the participants and dominant discourses of mothers and fathers, which prescribe static roles and a narrow notion of what constitutes work.
The data suggest that parenting titles were significant to about a quarter of participants. Participants discussed how they decided what their children would call themselves and their partners; for some female participants, this included choosing parenting titles which differentiated themselves from their partners, but which also identified them as a mother. For two participants who were fostering their child, they also discussed how they decided what their son would call his birth parents. These findings support those of Herrmann-Green and Gehring (2007) who found that their participants also gave a great deal of thought to what their children would call themselves and their partners, with the chosen titles indicating the mother role of each parent and signalling equality in their roles. In contrast, the present findings depart from other literature, which suggests that several parents have their children call them by their first name rather than a title signalling motherhood (Dunne, 2000).

In addition to the language participants chose for their children to refer to their parents, one participant was specific regarding the language she used regarding her children’s known donor. The participant emphasised how their children’s donor was referred to as ‘the donor’, as referring to him as a ‘dad’ would erase her family. This finding supports previous literature in which same-sex parents regarded their child’s donor as more of an uncle than a father (Almack, 2006), and that these parents feel that gamete donation alone was not sufficient for a man to assume the role or title of ‘father’ (Haimes & Weiner, 2000).

These findings suggest that participants carefully consider their choices of parenting titles. This finding may give support to some feminist discourses of families and of motherhood, which emphasise the centrality of individual choice – the choice whether to be partnered, how many partners, to have children, and a host of other decisions relating to families (hooks, 2000). For participants in the present study, this element of choice extends to what children in same-sex families call their parents.

The data indicates that the time each parent spends with their children also shapes the parents’ roles. This finding supports that of previous research, which also found that the parent
who the child spends more time with is more likely to be the primary caregiver, to perform the bulk of the childcare and discipline, and for their opinion to carry more weight in decision making regarding their children (Crespi, 2001; Goldberg & Perry Jenkins, 2007).

This finding may point to the presence of dominant discourses of families and motherhood, which emphasise the primacy of the mother in different-sex parented families in the day-to-day care of the children (Park, 2013). In the absence of gendered power dynamics, the participants in the present study surmised that the parent who spends the most time with the children is likely the most familiar with the children, is most aware of their needs, and is likely to make the most informed choices when it comes to planning and decision making for their children.

However, the data also demonstrates that participants feel strongly about the egalitarian nature of their families, and that both parents contribute to the household in different but equally important ways. In this way, the findings also embody feminist discourses of families, which emphasise egalitarian parenting and that parents may have different roles but of equal value (hooks, 2000).

The findings suggest that in the absence of dominant discourses of what roles parents in same-sex relationships ‘should’ fulfil, participants tacitly integrated various discourses into their parenting. In particular, the notion that a family has a maximum of two parents was prevalent; participants tended to describe their families as containing two parents and explained why other adults in their children’s lives were not given such a status. The following section will further discuss how participants differentiated their roles.

**Most of the Time we Have Different Roles, but we Share Parenting and are a Team.** The findings indicate that over half of the participants engaged in different parenting tasks, or types of tasks, than their partner, but half of these participants stressed that while their roles were different, they were equal. This finding aligns with those of previous studies, which found that many parents in same-sex relationships engaged in different proportions of paid and unpaid work but felt that they divided work equally (Herrmann-Green & Gehring, 2007; Sullivan, 1996).
The findings also suggest about a third of the participants both engaged in all parenting tasks with little role differentiation, and that 45 percent described working as a team. This finding strongly supports those of previous studies, which also found that female parents in same-sex relationships report that household tasks are generally performed equally often by both partners (Dunne, 2000; Goldberg & Perry-Jenkins, 2007; Kurdek, 2007), and which describes participants as actively negotiating and aiming to build egalitarian parenting roles (Herrmann-Green & Gehring, 2007; Dunne, 2000).

Within these findings, whilst participants variously noted differentiated or undifferentiated parenting roles within their families, there was a strong sentiment of teamwork and of both partners engaging in equal amounts of work. These findings also indicate that participants felt that their and their partner’s roles were of equal importance, and that they and their partner work together to parent their children. These findings align with feminist discourses of parenting, which emphasise parents working together to raise their children (hooks, 2000).

**Influences on our Parenting.** The findings indicate that for 65 percent of participants, their own upbringing and families of origin shaped their parenting. This finding supports previous literature which has documented a connection between parenting practices and one’s own experiences of being parented are well documented (Conger et al., 2009; Meins, 1999; Niu et al., 2018; Pasternak, 2014), although there is little literature regarding the intergenerational transmission of parenting for parents in same-sex relationships. Despite the dearth of research in this field, the present findings provide evidence that many parents in same-sex relationships refer to their own experiences of being parented when deciding upon their own parenting practices. The data also suggests that four participants referenced their different-gender parent when discussing influences on their parenting. These findings challenge dominant discourses of motherhood and fatherhood which prescribe differentiated parenting roles for mothers and fathers (Fagan et al., 2014; Palkovitz et al., 2014), and possibly indicates a notion of parenting existing outside of gender. Future research may investigate these findings further.
The data suggests that participants’ observations of other families’ parenting practices shaped participants’ views on parenting and their own parenting behaviours. The data indicates that participants more frequently discussed parenting practices that they disliked, and that they intended to avoid or implement alternative strategies with their children (55 percent of participants), than parenting practices which they liked and aimed to emulate (48 percent of participants). However, the data also indicates that two participants felt that they had no parenting role models and came to their parenting methods in other ways. This finding supports that of previous research, which found that many parents felt that they also had no parenting role models, that is, that they did not know any other parents in same-sex relationships (Crespi, 2001; Herrmann-Green & Gehring, 2007).

The findings indicate that parenting books, parenting experts, and wider literature on the topic were helpful in establishing parenting habits and solidifying existing thoughts and feelings about parenting for twenty-seven percent of participants. These findings support previous literature in which participants in also looked to parenting self-help books (Dunne, 2000), journals and other media (Herrmann-Green & Gehring, 2007) for guidance regarding their parenting. The present study also highlights how one participant felt that there were not enough resources specifically for female parents in same-sex relationships. Despite such works existing (e.g. The Complete Lesbian and Gay Parenting Guide by Arlene Istar Lev), this finding suggests that such resources may be inaccessible and too few.

The above findings outline how observations of other parents were a significant basis for participants' parenting choices. These findings contrast with past research regarding the intergenerational transmission of parenting, as findings from the present study suggest that parents in same-sex relationships look to both of their own parents for how to parent, and not solely their parent who is of the same-sex as themselves. Participants also described books and parenting 'experts' as shaping their parenting roles, but some felt that works by these authors did not accurately reflect their families, and that there were few resources specifically for their family structure.
We may be Different to Different-Sex Couples, but That can be a Good Thing

Notions of Different-Sex Parenting, Gender Stereotypes, and how These Affect our Family.

The findings suggest that about half of the participants felt that parents in different-sex parented families have rigid roles based on their gender. The data indicates that some of these rigid roles include mothers performing the bulk, or all, of the childcare and housework, and that the fathers engage in paid employment but complete little household labour. Though participants did not use the term ‘dominant discourses’, they seemed aware of expectations surrounding mothers’ and fathers’ roles, and that these roles are thought of as separate.

The findings indicate that participants came to these conclusions through observations and reflections of the parenting practices of their own parents and other family members, and then contrasting these observations with their current same-sex parented family. In addition, two participants in the present study were in the unique position of both being in different-sex marriages prior to forming a family together. Both participants emphasised how, in their marriages, both their and their husband’s roles were highly differentiated; I noted that these experiences were closely aligned with dominant discourses of motherhood and fatherhood in Chapter 5. Whilst there is some literature concerning parents in same-sex relationships who first had children in the context of a previous different-sex relationship (Hall & Kitson, 2000; Hequembourg, 2004), the participants in these prior studies did not compare parenting roles in their previous parenting relationships with their current relationships; this topic may benefit from further investigation.

These findings support previous literature in which parents in same-sex families shared their views of different-sex parentings and families. This includes the notions that more active play with their children and engaging in less housework than their partner is ‘father-like’ (Gabb, 2005), and that fatherhood is characterised by a social relationship between men and children (Hames & Weiner, 2000). However, the present findings do not corroborate those of Hequembourg (2004), who found that mothers in same-sex families tended to emphasise similarities between their own roles and those of mothers in different-sex families. Hequembourg asserts that this is done to align
themselves with ‘essential motherhood ideologies’ (p. 753), and to overcome negative stereotypes of their families and motherhood. Whilst three participants in the present study also emphasised the similarities between their own and different-sex parented families, with two commenting that they felt that their parenting roles were identical to their counterparts in different-sex families, nearly all identified some differences between how their own family operates and how families with different-sex parents operate.

The present findings suggest that participants made a distinction between biological and social mothers. Four participants equated the social mother’s role with that of a father, although one participant felt that this was not an appropriate connection to make. This finding supports those of previous studies, which often compare birth and nonbirth mothers on a variety of measures (Biblarz & Savci, 2010), with some authors comparing the nonbirth mother’s role with that of a father in different-sex parented families (Gabb, 2005). The present data also offer support to Gabb’s (2005) findings, that female parents in same-sex relationships often likened their own parenting to a ‘father-like’ role, although the author raises the issue of what to call various parenting behaviours – if some behaviours should be called ‘mothering’ and others ‘fathering’.

These findings indicate the presence of dominant and feminist discourses of parenting. Within dominant discourses of parenting, the behaviours mothers typically engage in are collectively termed ‘mothering’, and the behaviours fathers typically engage in are called ‘fathering’ (Fagan et al., 2014; Palkovitz et al., 2014). The discussion of what to term various parenting behaviours is often found in feminist discourses surrounding parenting and families; Phoenix et al. (1991) use the terms ‘mothering’ and ‘parenting’ almost interchangeably, suggesting that these authors view motherhood and parenthood are synonymous. Although these authors position themselves as feminist and as an alternative to dominant discourses of motherhood, fatherhood, and families, this use of language seems to reinforce dominant discourses of a mother being the primary parent, who raises the children with limited input from the children’s father in different-sex parented families.
We Have More Freedom to do What we are Good at as Parents Outside of Gender Roles.

The findings demonstrate that 41 percent of participants felt that their ability to create new parenting roles was a strength of their family structure. These participants asserted that they were largely free from prescribed notions of what mothers or fathers ‘should’ do in their families, due to their family having same-sex parents. These findings corroborate previous literature, which has acknowledged this freedom for parents in same-sex parented families to create new parenting roles, or to find roles which suit themselves and their families (Baetens & Brewaeys, 2001; Calhoun, 1997) without having to default to prescribed, gendered parenting roles (Green, 2011). However, this freedom is tempered with uncertainty about what these roles may consist of and how they should be assigned (Baetens & Brewaeys, 2001).

Although parents in different-sex relationships may experience some ambiguity in their parenting roles in the absence of dominant discourses regarding these, they also emphasise their freedom to create new roles in their families. The following section will continue to discuss the strengths which participants noted that their families have.

We offer more nurturing and empathy for our children and our partners. The findings suggest that 27 percent of participants felt that they were more able to understand their partner’s behaviours and motivations as they were of the same gender. Participants felt that this understanding contributed to an awareness of their partner’s needs and were able to incorporate this knowledge into their parenting so that the couple attained an equitable share of parenting and family duties. These findings do not appear to have an equivalent in previous literature; whilst some previous research has identified the benefits that same-sex parents perceive this family structure offers for their children (Goldberg, 2010), there is little written about how these parents feel the family’s structure could benefit themselves and their partners. Whilst the present findings suggests that same-sex couples experience increased empathy and understanding within their relationship, further investigation is necessary to determine whether this finding is typical for this population.
These findings embody some dominant discourses of mothering. These discourses describe mothers as caring, nurturing, and self-sacrificing (hooks, 2000). Whilst many participants noted that they felt free to choose their own roles, participants’ adherence to the above dominant discourses of motherhood suggests at least some adherence to its prescriptions. Alternatively, participants’ adherence to some aspects of dominant discourses of motherhood, and disregard of others possibly points to the creation of new, same-sex family specific discourses of motherhood. Further research may investigate why certain aspects of dominant discourses of families are valued above others, and whether dominant discourses of families are shifting in the wider Western culture.

Our Children Have a Better Understanding of and Acceptance of Diversity and Community.
The findings suggest that twenty percent of participants felt that their children had a better understanding and acceptance of diversity than children raised in different-sex parented families. This was in part a result of being raised in a same-sex parented family, but also because in some families, the children’s appearance was different to one or both of their parents. This finding supports previous research, which also notes that many parents in such families feel that their children would be more tolerant and accepting of others due to their family structure (Ausbrooks & Russell, 2011; Goldberg, 2010), and that this may make these parents preferred candidates for transracial adoption (Ausbrooks & Russell, 2011). The following sections outline the support that participants received and places these findings in the context of relevant research.

We get Support From Many Places

Support From our Families. The data indicates that about a third of participants received support from their families, both practical and emotional. This finding is consistent with those of previous literature, which noted family of origin support for parents in same-sex relationships (Herrmann-Green & Gehring, 2007), and that parents in same-sex relationships received more familial support than same-sex attracted people without children (DeMino et al., 2007). However, some participants noted various levels of hostility from their families of origin; this finding supports
previous studies which also note a mixed response from participants’ families (Gartrell et al., 1996; Hequembourg, 2004).

This finding of a range of extended family responses to participants’ families may be linked to dominant discourses of these institutions. Within these discourses, there is the expectation that extended families support their members (Burg, 1999), but also present is the competing notion that same-sex relationships and their families are deviant and less than ideal environments for childrearing (Millbank, 2003). For participants’ extended families, the interaction of these competing aspects may determine the degree to which families support the same-sex couple and their family or display hostility towards them; this may be a topic for further investigation.

**Support From Childcare Services, Work, and Parenting Groups.** The findings highlight that almost a quarter of participants also received support from outside their families, primarily from inclusive childcare services that their children attend, and participants’ workplaces. The data also indicates that participants also valued online support and information. This finding supports those of past research, in which 94 percent of participants felt that their communities were a significant source of support (Herrmann-Green & Gehring, 2007), and that parents who accessed support groups specifically for same-sex parents found these groups to be helpful (Gartrell et al., 1996).

The data indicates that playgroups, particularly rainbow playgroups, were an invaluable source of support for two participants who were able to access such groups. This finding supports previous studies, which have found that in addition to providing an enriching learning environment for children, playgroups offer many types of support for parents (Jackson, 2011), including a sense of belonging and validation as parents (Harman et al., 2014). However, one participant was unable to access such playgroups due to work commitments and their family’s distance from where the playgroup is held. Other participants may also have faced these barriers but not commented on them or may not have been aware that such groups existed. Given how beneficial these groups were for participants who were able to access them, increasing the accessibility and visibility of these playgroups would allow them to offer support for many more families.
Other Challenges our Families Face

The findings indicate that 20 percent of participants experienced homophobia, to various degrees of severity, both online and in-person. This finding supports previous literature which suggests that the experience of homophobia is common to many gender and sexuality diverse people (Donovan, 2012). However, the present findings suggest that the homophobia participants experienced may be more accidental than malicious; participants attributed hurtful comments more to ignorance about their family and assumptions that the participants were heterosexual. These findings support those of Hunter (2015), whose review of “lesbian mommy bloggers’” posts identified a similar kind of subtle homophobia - that the participants were often assumed to be heterosexual both within the health care system and by other people generally.

The present finding that participants’ experience of homophobia was largely based on assumptions of heterosexuality may be linked to some heteronormative dominant discourses of sexuality, families, and parenting (Oswald, et al., 2011). Dominant discourses of non-heterosexual people include the notion that because their sexuality is non-normative, that they will also be non-normative in their behaviour and appearance (Blashill & Powlishta, 2009). A combination of the above dominant discourses contribute to a culture in which gender and sexuality diverse people are assumed to be readily identifiable based on their appearance and behaviour, and that individuals who present with normative forms of these are generally assumed to be heterosexual. The present findings suggest that the above assumptions of heterosexuality negatively affected participants, who described these incidents as misunderstandings and characterised them as benign, but also spoke about these situations at length and how they affected them.

The findings indicate that negative online comments regarding participants and their families had a negative impact. These findings support prior research, as research into homophobia related cyberbullying has mainly focused on its occurrence among adolescents (Lam et al., 2019) it can also affect adults (Lam et al., 2019), and there are many examples of homophobia in online spaces (Jovanović, S. M., 2018; Millbank, 2003; Pascoe & Diefendorf, 2018).
The findings also indicate that the public debate surrounding the Australian Marriage Law Postal Survey in 2017 was a major event for participants, with close to 38 percent of participants commenting on the negative impact this debate had on their families. This finding supports previous literature, which has noted that gender and sexuality diverse Australians experienced increased levels of psychological distress during and immediately after the survey period (Casey et al., 2020; Verrelli et al., 2018), and during public marriage equality ballots abroad (Copland, 2018). Whilst Copland (2018) argues that these findings must be read with caution, as there is little available research on the positive aspects of such a vote, the participants in the present study unanimously described the Australian survey as a negative experience. Participants described feeling like their private lives were under scrutiny during this time, and that they felt immense pressure to project an extreme positive image of themselves and their families to the public.

The data suggests that three participants experienced mental health challenges in addition to the challenges outlined above. This finding supports prior investigations, which found that same-sex attracted Australians are more likely to experience mood and anxiety disorders than Australians who identify as heterosexual (Verrelli et al., 2018). The difference in mental health between the two groups is often attributed to the minority stress model (Verrelli et al., 2018), which proposes that individuals from minority groups (such as sexuality and gender diverse people) experience unique, chronic stressors due to the social stigma associated with their minority group (Meyer, 2003). Although the minority stress model offers an explanation for this finding, it is critical that this knowledge is put into practice to ensure better mental health outcomes for this population.

In addition to participants’ challenges when accessing reproductive healthcare and varying levels of hostility from their families of origin, the data demonstrates that participants experienced other challenges unique to their family structure. These were largely homophobia due to heteronormativity, both in online and in physical spaces, public debate regarding the legitimacy of their families during the Australian Same-Sex Marriage Postal Survey in 2017, and mental health
issues within the families, which are more prevalent in non-heterosexual populations than in heterosexual populations.

**Queer Parenting: An Emergent Discourse**

The findings suggest a nuanced relationship with dominant discourses of motherhood, fatherhood, and parenting. Twenty percent of participants emphasised their difference to different-sex parented families, whilst 34 percent noted similarities between such families and their own. In this way, the current findings support the concept of tension between the pursuit of either a ‘queer difference or acceptable sameness’ for gender and sexuality diverse individuals (Gamson, 1998, p.13). These findings suggest that there may be an emerging discourse of queer parenting, from the combination of dominant, queer theory, and feminist discourses of families and what it means to be a parent within an Australian context in the 2010s and beyond. As discourses are contextually and historically based, these findings might not be applicable to other time periods and locales, and those who seek to utilise these findings in other contexts should use caution in their application.

The findings indicate that in the absence of a social script for the role of a parent in a same-sex family, participants likened their roles to those of parents in different-sex relationships. Dominant discourses of motherhood and fatherhood featured heavily in participants’ descriptions of their roles, often as examples of what behaviours participants sought to avoid.

The present findings strongly challenge several dominant discourses of families and parenting, specifically those which assert that families ought to have a mother and a father, that same-sex parented families are sub-optimal for children, and that there is only one ‘correct’ way to form a family and one ‘correct’ family configuration. Participants all subverted these discourses by forming their families with their same-gender partners, but many also emphasised their family’s similarities to different-sex parented families; this indicates their complex relationship with dominant discourses of families and parenting.

The findings demonstrate that participants simultaneously adhered to and challenged dominant discourses of motherhood, particularly the notions that mothers are primary parents of
their children, that mothers provide more care and nurturing than fathers, and that a family has only one mother. Female participants in particular had a nuanced relationship with dominant discourses of biological motherhood and its privileged position over other forms of parenting. Whilst the desire for biological motherhood was far from universal among female participants, the elevated social position of biological mothers over other forms of mothering was present throughout the present study. Two participants who initially aspired for biological motherhood but were unable to achieve this talked about how they had worked through their grief, and now strongly asserted the parity of both mothers in their family.

In contrast to the above challenges, the present findings uphold other dominant, queer theory and feminist discourses of families. These include the notion that a family has a maximum of two parents; that of an equitable division of labour and that parenting is work; and that there are many ways to form a family and many forms a family may take. Through variously adhering to and challenging discourses of families and parenting, the current findings suggest a new discourse of queer parenting. This discourse presents a concept of parenting in which a family may have up to two parents of any combination of genders, who may have similar or dissimilar roles but who ultimately work as a team with an equitable division of work, and who may create their family in many equally accepted ways.
Chapter 7: Conclusion

The present study investigated how parents in same-sex relationships experience parenting and how they construct their notions of parenting and parenting roles. As I have approached this topic with a postmodernist viewpoint, a singular answer for each of these topics is not possible. Rather, the findings demonstrated that there are many ways of experiencing parenting and forming the associated roles within a same-sex relationship. Participants’ experiences of their parenting journeys varied widely, but they tended to value the notion of working as a team with their partner.

I identified patterns in how various discourses of motherhood, fatherhood, and parenting interacted when determining how participants constructed their notions of parenting. Dominant, feminist and queer theory discourses of families combined and contradicted one another to form notions of families which did not necessarily require a mother and a father, but still consisted of two parents maximum. Participants acknowledged that there were important people in their children’s lives such as known donors and birth parents, but these other people were not classified as parents.

The Study’s Contribution to the Literature

This study contributed to literature in terms of findings and methodology. The findings contribute new knowledge regarding the experiences of parents in same-sex relationships in specifically Australian settings in the 2010s and demonstrate that these parents experience challenges related to their sexuality and family structure when becoming parents and throughout their parenting journeys. The findings also suggest that, in a family structure outside of the dominant model of two different-sex parents, the parents in this study tended to base their parenting roles on their strengths, interests and on their relationships with paid employment than their genders.

With regards to the study’s methodology, approaching the topic from a discursive perspective is rarely seen in this field, and the methods of analysis were tailored to my line of inquiry. The combination of a queer-theory informed version of FPDA and thematic analysis were
ideal for this study, and will also be useful for pursuing further research with this and similar populations.

**Pathways for Future Research**

In Chapter 6, I identified topics within the field of same-sex parenting families which may benefit from further scholarly attention. Generally, research involving same-sex families with male, trans, or nonbinary parents should be prioritised, as little research has been devoted to such families in comparison to those with cisgender female parents (Miller et al., 2017). Similarly, little research in this field uses a discursive approach; future investigations may involve the identification of discourses and how they interact within other family configurations.

The findings identified a link between participants’ desire for a biological link to their children and dominant discourses of motherhood being biologically based (Sosnowska-Buxton, 2014). This finding suggests that these participants may have internalised such discourses to varying degrees; future research may identify factors which lead to this internalisation.

The present findings questioned the relevance of several dominant discourses of families and motherhood for families with same-sex parents. Specifically, the notion that families contain one mother who engages in the bulk of the childrearing and housekeeping, and the notion of differentiated parenting roles for mothers and fathers, did not appear to apply to participants’ families. These findings suggest that parents in same-sex relationships regard parenting and parenthood as existing beyond gender and gendered roles; further investigation may clarify if this finding is specific to families with same-sex families or is applicable to families more generally.

This study highlighted several gaps in previous literature which may benefit from closer study. Future research may focus on parents in a same-sex relationship who had first become a parent in a previous different-sex relationship, investigate the generalisability of the finding that parents in same-sex relationships experience more empathy and understanding than those in different-sex relationships, and determine factors which influence extended families’ responses to parents forming same-sex families.
The findings suggest an emergent discourse regarding parenthood and families, which incorporates and rejects various dominant and alternative discourses of motherhood, fatherhood and families. Further research should determine the extent to which this new discourse is applicable – whether it applies to all families or solely same-sex parented families.

Implications and Practical Applications of the Present Research

This study, when considered alongside ABS data regarding same-sex parenting and various state laws regarding surrogacy, identified issues with the legality of surrogacy amongst Australian states and territories. At the time of writing, Western Australia is the only Australian state or territory in which the intended parents of a surrogacy arrangement must be a different-sex couple. Single women and men, same-sex male couples, and same-sex female couples interested in reciprocal IVF without medical indication to do so are therefore not legally permitted to access this form of ART. I strongly recommend changes to Western Australian laws regarding surrogacy which omit the gender of the intended parents, allow access for single people, and which include a special provision for female same-sex couples intending to access reciprocal IVF.

This study found numerous other ART related challenges facing same-sex couples. The findings identified the cost of ART as a challenge for some prospective parents, as they cannot claim a subsidy on these services unless they are identified as experiencing fertility issues. Female same-sex couples usually cannot demonstrate infertility without several failed cycles of IUI or IVF, which they would have had to pay the full cost of. In contrast, a different-sex couple may demonstrate infertility by their inability to conceive after several years of trying, which does not come at a financial cost. I therefore recommend that fertility services for same-sex couples are subsidised to minimise the disparity in financial costs between different- and same-sex couples hoping to become parents.

The findings found several cases of discrimination against same-sex couples hoping to become parents. In one of these instances, the couple was put lower on the waiting list for ART services than different-sex couples and had to wait considerably longer than other couples to access these
services. It is unknown if this was a singular incident, or if the issue is more widespread – I therefore recommend ART providers to review their policies and procedures with regards to same-sex couples and waiting lists, to ensure all clients are treated equitably.

The findings indicate ways in which service providers and resources used by same-sex parents may improve. Services should implement family diversity training for staff, with the aim of improving interactions with service users and their families. Service providers should also offer tailored resources for same-sex parents and families, such as pregnancy and parenting literature written specifically for this population, and which includes accurate and diverse depictions of their families. Similarly, I recommend public and private services update paperwork regarding clients’ details to become more inclusive of family diversity.

In addition to these recommendations, the findings highlight the need for more positive and accurate representation of same-sex families in a range of media. This includes a reduction in stereotypical depictions of LGBTQIA+ people and to depict a greater diversity of same-sex attracted people and their families.

**Significance of the Study**

This study identified discourses and discourse interactions present in how parents in same-sex relationships consider their parenting roles. Significantly, I identified an emergent discourse of parenting which includes and rejects various dominant and alternative discourses of motherhood and fatherhood. Although further investigation is required to identify the prevalence of this discourse in additional populations, this study provides evidence for such a discourse and may indicate shifting dominant discourses in this field.

**Concluding Remarks**

The findings demonstrate same-sex families’ complex relationships with dominant discourses of families and parenting. Whilst there is growing support and acceptance for same-sex families amongst the Australian public, same-sex parents often encounter insensitive comments and heteronormative assumptions of their families based on dominant discourses of families and
parenting. These assumptions must be challenged through more accurate and widespread
depictions of same-sex families and improved training for people who work with them. It is my
sincere hope that the present research will be used to improve services offered to same-sex parents,
and that they will be afforded the consideration and support that all families deserve.
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Appendix A

Flyer Regarding the Study

LGB PARENTS!
COME HAVE A CHAT

Invitation to participate in research
As part of my Doctor of Philosophy at Edith Cowan University, I am interested in talking to parents over the age of 18 who are in a monogamous same-sex relationship about their parenting experiences and how they come to their parenting roles.
Appendix B

Information Letter to Participants – Text Only

This research is approved by the Human Research Ethics Committee at Edith Cowan University. As part of my Doctor of Philosophy at Edith Cowan University, I am interested in talking to parents who are over the age of 18 who are in a monogamous same-sex relationship about their parenting experiences and how they come to their parenting roles. Your children do not need to live with yourself and your partner full-time in order to be eligible to participate in this study; they may live with you for part of the time. They can be your adoptive, step, foster, or biological children.

Your participation in this study will involve a one-on-one interview of between 30-45 minutes duration, which will be video recorded with your consent, at a time and place convenient to you. All information will remain confidential, and you may withdraw from the research at any time without consequence. Any information you may have already provided will not be used in any resulting publication.

The only people who will have access to the transcripts will be the researcher, supervisors and reviewers. Upon transcribing each interview, the recordings of the interviews will be destroyed. Transcripts will not contain any identifying information. Upon completion of the project, all copies of the transcripts except for one de-identified hard copy of each will be destroyed. These hard copies of the de-identified transcripts will be kept in a locked cabinet in building 30, Edith Cowan University, for a minimum of five years, after which they too will be destroyed.

Some publications which may arise from this research include a dissertation, journal articles and magazine articles. In all of these publications, no names or identifying information will be included. Please contact the researcher if you would like to receive an outline of the findings from this study upon its completion.
Some topics which will be discussed could be potentially uncomfortable. I will provide information regarding counselling services at the conclusion of the interview.

I hope that by talking to parents in same-sex relationships, I can add to knowledge in this under researched area, and give you an opportunity to gather your thoughts regarding your parenting experiences. If you would like to participate, please read and sign the Informed Consent Document provided.

If you require further information about this project, feel free to contact myself or my supervisor.

Jenine Rocca (Chief investigator) Vicki Banham (Principal Supervisor)

Independent Contact Person for Complaints and Concerns about the project – Research Ethics Advisor

Telephone: 6304 2170

Email: research.ethics@ecu.edu.au
Appendix C

Informed Consent Document – Text Only

I have been provided with a copy of the Information Letter explaining this study, and understand the information provided. I have been given the opportunity to ask questions about this study and any questions I have had have been answered to my satisfaction. I am also aware that if I have any further questions I can contact the researcher.

I understand that my participation in the study will involve a one-on-one interview with the researcher that may last up to 45 minutes. I understand and give my consent that my interview will be video recorded, and that the video will be destroyed following transcription. I understand that the transcript of the interview will not contain any identifying material, and that the researcher may contact me following my interviews to clarify points made during the interviews.

Some topics which will be discussed could be potentially uncomfortable and you will be provided with information regarding counselling services at the conclusion of the interview.

I understand that my de-identified transcript may be read by reviewers of this project for assessment purposes.

I understand that the information I give will be kept confidential, and that my identity will not be disclosed without my consent. I understand that the information I provide in the interview will only be used for the purposes of this research project.

I understand that I am free to withdraw from further participation at any time, without explanation or penalty. I freely agree to participate in this project.

______________________________                         ______________________________
Your name      Signature
Appendix D

Counselling Information Provided to Participants

Thank you for taking the time to talk with me.

Further Assistance

Sometimes when one talks about issues in one’s family, it may cause one distress or invite one to worry about certain issues. If this applies to you, you may want to talk to a trained professional about these issues. Here are some numbers you can ring if you want to talk about these issues, or anything else, further.

Lifeline

Lifeline Australia operates a national 24-hour telephone counselling service. 13 11 14


Relationships Australia 1300 364 277

http://www.wa.relationships.com.au

Parenting WA

A 24-hour support and information line for parents. 1800 654 432

Appendix E

Initial Interview Schedule

1. Can you please talk to me about what you do as a parent?

2. Can you please talk to me about what your partner does as a parent?

3. How did you come to this arrangement?

4. What kinds of ideas, things you have heard or been told have shaped how you parent? How?

5. Do you have any other thoughts about your parenting experience that you would like to share?
Appendix F

Revised Interview Schedule

- Please tell me a bit about your family
- Can you tell me about your decision to become a parent?
- How did you go about becoming a parent?
  - [prompt] How did you decide upon that?
- What was it like when you first became a parent?
  - How did you decide to separate parenting tasks with your partner? Why?
    - What ideas about parenting and parenthood went into that decision?
- What is parenting like now?
  - How do you divide tasks with your partner? Why?
  - How has your experience of parenting changed?
- How do you foresee your role changing in the future?
- What strengths/challenges do you feel there are in your being two mums/dads?
- Is there anything else about your parenting experience that you would like to add?

This interview schedule was used as a guide only for topics to be discussed. If a participant was talking about a topic, I used prompts for more information/clarification.