



RESEARCH

# Child health and wellbeing in same-sex parent families: The evidence from Australia

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## Introduction

When making the decision to start a family, many first-time parents reasonably consider whether they can provide a healthy environment in which to raise children. For same-sex attracted parents, this question carries added weight in a society where many people promote traditional family values and two biological, married parents as the best way to raise a child. There are often questions around biological verses social parenting and whether this will cause problems. While every family is different,

and will therefore face their own challenges, it is helpful to have scientific, robust information about how children growing up in same-sex families are doing overall in terms of their health and wellbeing.

## The research

The Australian Study of Child Health in Same-Sex Families (ACHESS) provides the most recent Australian data on child health and wellbeing in families where at least one parent identifies as being same-sex attracted. It builds



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on around three decades of research on children with same-sex parents, but the ACHES provides the largest set of data to date.

The ACHES was conducted at the Melbourne School of Population and Global Health at the University of Melbourne and collected information from families across 2012 and 2013. The aim was to capture the complete physical, mental and social wellbeing of Australian children with same-sex attracted parents. In other words, we wanted to find out just how well children in same-sex families are getting on, and how they are impacted by their non-traditional family situation.

## What we did

The study was advertised across a range of community settings, with families volunteering to take part. Special efforts were made to capture a range of family types so that our sample was as representative as possible. We had families with male parents, female parents and other-gendered parents. We had children born in the current same-sex relationship, in a previous heterosexual relationship and children with single parents. We had children born through sexual intercourse, donor insemination, surrogacy, and children who were fostered and adopted. The families came from all over Australia and the children ranged in age from two months to 18 years.

Two different types of data were collected. We used a survey to gather quantifiable data so we could make statistical comparisons against average scores from the Australia general population. Both parents and adolescent children completed surveys. We also collected interview data so we could make a more interpretive assessment of how children are doing. Entire families took part in family interviews, with children as young as three contributing.

## What we found

Our findings represented 500 children from 315 families. 80 per cent of the children had a female parent or parents, while 18 per cent had a male parent or parents.

Overall, children with same-sex attracted parents scored well in all aspects of their health and wellbeing, with few differences when compared to average scores for children in the general population. When there were differences, we found that the children with same-sex attracted parents scored better than children in the general population. These results were similar when parents answered the survey and when adolescent children answered the survey. The two areas where children with same-sex parents were doing particularly well were in terms of their overall general health and on measures of how well families get along, and how this impacts on their health.

While children are doing well overall, there are reports of experiences of stigma relating to their same-sex families. When this does occur, there is an association with poorer health outcomes on a number of measures. Clearly, there is a degree of resilience being instilled in children to maintain a good picture overall, but vigilance is required by parents to ensure that societal stigma does not have an adverse impact at an individual level.

From our research, however, what does not seem to be important in how well children are doing is the gender of their parent or parents.

When talking to children in the family interviews, they described their health in rather normal terms. They didn't see their families as being particularly unusual. They often talked about the benefits of having multiple parent figures, a combination of biological parents and social parents. Friends were often described as being important and even included as part of the family. There were some descriptions of times when people directly or indirectly made negative comments about their

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families, and while this was upsetting, it rarely had long-term impacts.

## What this means

Children with same-sex attracted parents in Australia are developing well in terms of their health and wellbeing, and this supports previous international research. The way in which same-sex parents construct families, not necessarily sticking to traditional parenting roles, helps families to get along well, which in turn is good for overall health. Families are aware of stigma in society and this is related to child health, but through strong resilience-building there is little overall impact on these children. Resilience-building is key and is developed through

resilient individuals, resilient families and resilient communities. Strong supports through rainbow family groups can assist in this resilience-building, as can openness with children about where they have come from and how their family is formed.

Families come in all shapes and sizes, enjoying different successes and facing different challenges. What the ACHESSE suggests, however, is that parental sexual orientation itself does not negatively impact on child health and wellbeing and may even provide some benefits. Deciding to have children is always a big step, but same-sex attracted people should enjoy the journey knowing that their children will most likely be just fine.

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## Further reading

[www.achess.org.au](http://www.achess.org.au)

Crouch SR, McNair RP, Waters EB and Power J (2013). What makes a same-sex parented family? *Med J Aust* 199(2): 94-96

Crouch SR, Waters E, McNair R, Power J and Davis E (2012). ACHESSE – The Australian study of child health in same-sex families: background research, design and methodology. *BMC Public Health* 12:646

Crouch SR, McNair R, Waters E and Power J (2014). The health perspectives of Australian adolescents from same-sex parent families: a mixed methods study. *Child: Care, Health and Development* Epub 31 Aug

Crouch S, Waters E, McNair R, Power J and Davis E (2014). Parent-reported measures of child health and wellbeing in same-sex parent families: a cross-sectional survey. *BMC Public Health* 14:635



[jacquitolins.com](http://jacquitolins.com)

Researched and written by Jacqui Tomlins.

Also available:

## Topics

- Lesbian mums and known donors or dads
- Telling the kids: What? When? How?
- Talking about how your family was created
- Non-biological parents
- Pregnancy and antenatal classes
- Birth, midwives and nurses
- Maternal and child health nurses and new parents' groups
- Starting kinder or day care
- Rainbow families and primary school
- Mother's Day and Father's Day
- Teasing, name-calling, and bullying
- Older kids and adolescents
- Rainbow families in rural and regional areas
- Educating the community
- Rainbow families: The challenges
- Rainbow families: The rewards

## Research

- Child health and wellbeing in same-sex parent families: The evidence from Australia
- Work, love, play: Understanding resilience in same-sex parented families
- Transgender men and women and parenting
- Intersex status and parenting: Organisation Intersex International

## Case studies

- Corin: 12 years of wisdom
- Julie and Marg, Noah and Georgia: Talking with teenagers
- Fiona and Hamish: A response to teasing
- Frances and her mums: Transgender parenting