LGBT Parents in Ireland

Report from a study into the experiences of Lesbian, Gay, Bisexual and Transgender People in Ireland who are parents or who are planning parenthood.

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February 2013
Acknowledgements

This research has been carried out at a time of significant change in the landscape of Lesbian, Gay, Bisexual & Transgender (LGBT) rights in Ireland and in the light of greater public awareness, visibility and recognition of LGBT parents. In documenting the lives and experiences of LGBT parents and LGBT people planning parenthood, we hope that this research will provide an important evidence base for progressing the rights of, and services for, LGBT parents. We would like to sincerely thank the LGBT parents and LGBT people planning parenthood who participated in the online survey and in the detailed interviews. Their rich experiences and perspectives have been invaluable in providing the evidence base for this research report. We would also like to thank the members of the LGBT Parenthood Research Steering Group, established by LGBT Diversity, for their active involvement in steering the research and in providing many detailed suggestions for the development of the survey. Finally, we would like to thank Fionnuala Boyle for her excellent work in assisting us with the database, data analysis and the online survey.

Jane Pillinger and Paula Fagan
Preface and Acknowledgements

In November 2012, the Minister for Justice, Equality and Defence, Mr Alan Shatter, TD, in a speech where he outlined comprehensive family law reforms that he intends to implement for children being parented by LGBT couples, asserted that, ‘...it is not in the best interests of either parents or children, that we deny the reality of the complexity of the diverse family relationships that factually exist in the Ireland of 2012.’

We welcome this report as a vital contribution to our understanding of the ‘diverse family relationships’ that exist in modern Ireland. We hope and believe that it will provide policy makers and service planners, as well as groups that support parents, families and LGBT communities, with a sound basis to promote greater inclusion.

I would like to thank Jane and Paula for their exceptional work, and the many people who supported them through the Steering Group over the last few years. Thanks also go to the staff at LGBT Diversity, Berni Smyth, Hayley Fox-Roberts, Poul Walsh Olesen and Sarah O’Sullivan, as well as Vanessa Lacey at Transgender Equality Network Ireland (TENI), for promoting the survey across the country. In the final stages of the project, Sandra Irwin-Gowran at Gay & Lesbian Equality Network (GLEN), Moninne Griffiths of Marriage Equality, Ailbhe Smyth of the National Lesbian & Gay Federation (NLGF) and Margot Doherty of Treoir (The Information & Referral Service for Unmarried Parents) gave invaluable contributions and advice; particular thanks to Sandra for also drafting the key findings summary that has been published separately.

Patrick Stoakes, LGBT Diversity

1 Speech delivered by Mr Alan Shatter, TD, Minister for Justice, Equality and Defence at meeting of Fine Gael LGBT Group. http://www.justice.ie/en/JELR/Pages/SP12000321
Executive Summary

Families in Ireland, the bedrock of our society, are ever changing and evolving, and knowing the extent and nature of the shifts in family life is vital, if we are to cater for the needs of families. In the current environment of uncertainty as to the level of resources available to support families, it is even more crucial that we have accurate and comprehensive information on Irish Family life. (Michael O’Kennedy, S.C., Chairperson, Family Support Agency, in Family Figures, ESRI, 2009)

1. Introduction

Families in Ireland are increasingly diverse. LGBT-headed families are part of this evolution, and yet, Irish research that explores the experiences, needs and aspirations of LGBT parents and their children, is sparse. This LGBT Parenthood Study documents the experiences of a sample of LGBT parents and LGBT people planning parenthood, and aims to build a picture of LGBT family formation in Ireland. The study examines the legal and relationship status of LGBT parents and the support they received in parenthood and in planning parenthood. The research also explores their experiences of accessing services and of discrimination encountered. These lived experiences provide a backdrop to the legal, policy and other changes, which the study participants themselves see as urgently needed in an Irish context.

This study comes at a time of increased public awareness of LGBT rights and at the eve of a Constitutional Convention to consider comprehensive constitutional reform. The findings presented in this study, are particularly relevant to this constitutional review and to other legislative and policy reforms that are needed to give recognition to LGBT parenthood and the diversity of families in Ireland today.

The full report is divided into four parts. Part 1 provides a review of literature and policy, which gives the background and context to the study. It also sets out legal and other barriers experienced by LGBT parents in Ireland, and draws on international research on LGBT parenting. The way in which the LGBT Parenthood Study was structured, allowed for an analysis of the specific experiences of LGBT people who are already parents, as well as the experiences of LGBT people who plan to become parents. Part 2 provides a wealth of information on the experience of being an LGBT parent today, and Part 3 documents the experiences of those planning parenthood. The conclusions and recommendations, presented in Part 4, reflect on both the commonalities and uniqueness of these experiences, and highlight the changing nature of LGBT parenthood in Ireland, as well as the need for wide-ranging, legal and policy reform in order to realise equality for all LGBT families.

2. Summary profile of participants in the anonymous survey and in the in-depth interviews

LGBT Parents
• 153 LGBT parents responded to the anonymous survey, and 18 LGBT parents took part in the in-depth interviews. Nearly two thirds of respondents to the survey were lesbians, nearly one-third were bisexual, nearly one tenth were gay men, and smaller numbers were

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heterosexual, questioning / not sure or ‘something else’. The majority had a female gender identity, and had a female sex assigned at birth. A small number identified as gender queer or trans.

- The majority of respondents were in a same-sex relationship, civil partnership or same-sex marriage. Less than one-fifth of respondents were single parents.
- LGBT parents responding to the survey, tended to be in older age groups, with one-third over the age of 45 years. The majority of respondents lived in urban areas, and nearly a half of the respondents lived in the Leinster region, mainly in the greater Dublin area.
- Overall, LGBT parents responding to the survey had a high level of educational attainment; one half had completed 3rd level or postgraduate-level education. Over one half were in employment; the remainder were either unemployed, students, full-time carers or they were not working because of retirement, sickness or disability.

**LGBT People Planning to become Parents**

- 170 LGBT people planning to become parents responded to the anonymous survey, and 7 LGBT people planning parenthood took part in the in-depth interview.
- Just over a half of respondents to the survey were lesbians, just over one-fifth were gay men and just over one tenth were bisexual. Smaller numbers were heterosexual, questioning / not sure or ‘something else’. Just over two thirds of respondents had a female gender identity, and had a sex assigned at birth that was female. The sample included a small number who identified as gender queer or trans.
- Just over one half of respondents were in a same-sex relationship, and nearly one-third were single parents.
- Compared to the sample of LGBT parents, LGBT people planning parenthood were predominantly in the younger age ranges of between 20 and 34 years.
- Compared to the sample of LGBT parents, LGBT people planning parenthood had a lower level of educational attainment, with slightly lower numbers having attained 3rd level and post graduate-level study.
- As with the sample of LGBT parents, the majority of respondents lived in urban areas and in the Leinster region. As with LGBT parents, the majority were in employment.

3. LGBT Families: Findings from the Survey

**Parenting Roles and Relationships**

The study shows that existing LGBT families contain a rich tapestry of parenting roles, relationships and family life. This results in diverse family formations in some cases involving multiple parenting relationships (some involving more than two adults who may, or may not, have a biological relationship to the child / children), parenting with ex-partners and step-parenting. The practicalities of these diverse family forms include parenting taking place in more than one household, parenting on a full-time or part-time basis, and in some cases the involvement of donors in full or partial parenting roles.

**Pathways to Parenthood**

Of the sample of LGBT parents, just over a half had a child / children from a previous opposite-sex relationship. This is followed by having a child / children through assisted human reproduction (AHR). The low numbers of LGBT parents, who have become parents through fostering, adoption and surrogacy, indicate that legal barriers are a major factor limiting LGBT parents in these pathways to parenthood.

The majority of gay fathers and trans parents had their child / children from a previous opposite-sex relationship. While one half of lesbian mothers had their child / children from a previous
opposite-sex relationship, they were the largest group of parents who also became parents through AHR in a private clinic, or through a known donor.

**Living Arrangements, Legal Status and Parenting Roles**

The largest group of respondents to the anonymous survey were biological parents, and they predominantly lived with their partners. Nearly a half of the sample was either sole legal guardians or had joint guardianship, but nearly one-fifth had no legal status as parents. Those with no legal status were predominantly lesbians.

Some LGBT parents had multiple parenting roles, and thus had varying legal rights in relation to their different children. For example, a number of parents had children from previous opposite-sex relationships and also had children from their current same-sex relationships. Others also had children who were adopted or fostered in one family unit.

Although the majority of parents had their children living with them on a full-time basis, some shared parenting across two households. Over one-third of respondents to the anonymous survey parented with their partners, while nearly one-fifth parented alone or parented with an ex-partner. Smaller numbers parented with a partner and other people. While bisexual parents and lesbian mothers predominantly parented with their partners, gay men and trans parents were more likely to parent with an ex-partner.

**Parents who did Not Live with their Children**

Of the LGBT parents who did not live with their children, there were generally positive experiences of involvement as parents in decision-making and in having regular access to children. A small number of trans parents did not have involvement in the lives of their children, as a result of access being denied to them. Sexual orientation or gender identity were considered to have been factors, or possibly factors, in being denied custody for up to nine LGBT parents who responded to the anonymous survey.

**Being ‘Out’ and gaining Support as LGBT Parents**

A very positive finding of this study is that LGBT parents experienced a high level of acceptance and support, particularly from immediate family members. However, the in-depth interviews provide examples of initial negative reactions from family members, demonstrating the struggles and difficulties in gaining support and acceptance. And it is important to note, that around one in ten of all respondents, were not ‘out’ to extended family members, friends, neighbours and work colleagues.

The majority of respondents to the anonymous survey were ‘out’ in the different parts of their lives as LGBT parents. Of the categories in which LGBT people were ‘out’ as parents, the highest numbers were in relation to being ‘out’ to their children and immediate family members, followed by being ‘out’ to friends. Lower numbers were ‘out’ at work, to neighbours and in their local community.

Children’s experiences of their parents’ ‘coming out’ did - in a small number of cases - result in social stigma and in children experiencing bullying in school and negative reactions from other parents.

A low number of LGBT parents sought and received support from LGBT organisations and support groups, neighbours, local community organisations and work colleagues. In particular, the in-depth interviews show the importance of support from LGBT organisations, particularly for LGBT parents who feel isolated from the community. Trans parents were the least likely to receive support, suggesting that some trans parents experience isolation, rejection and a lack of
support from family, friends and work colleagues in their parenting roles. Overall, the general high level of acceptance of LGBT parents is a reflection of more positive societal values, recognition and acceptance of LGBT identities and visibility as parents. However, LGBT parents often struggle to gain recognition for their parenting roles at a societal level. This is most acute for trans parents, where societal rejection and transphobia in relation to their roles as parents, are a lived reality.

**Access to Services for LGBT Parents**

The anonymous survey and the interviews showed the different experiences that LGBT parents had of accessing services to support them in their roles as LGBT parents. Some of the greatest difficulties arose for lesbians in accessing AHR services and for all LGBT parents in accessing adoption and fostering services. There are particular implications for the provision of more accessible information about these services, but also in relation to extending rights to LGBT parents to foster and adopt as LGBT individuals and couples. This is also the case with regards to surrogacy, where there is a need for clearer policies and information.

LGBT parents have mixed experiences of accessing services, and overall, the experience of accessing services was more positive than negative. AHR, adoption, fostering and surrogacy services were generally rated higher when they were accessed abroad than in Ireland. There were particularly high levels of negative experiences of adoption and fostering services for LGBT parents in Ireland. The high level of discretion in the Irish adoption and fostering systems and evidence of some systemic discrimination on the grounds of sexual orientation within the assessment process, resulted in some interviewees being unsure of whether to reveal their LGBT identity for fear of reaction. The interviews with LGBT parents point to a gap in legislative and policy guidelines in the area of AHR. This represents a considerable barrier to LGBT parents, both in terms of accessing information about, and in, AHR service provision.

The survey and the interviews show that LGBT parents, who had accessed health services for themselves and their children, generally rated them as being more positive than negative. While this suggests that the attitudes and reactions of healthcare professionals are changing, interviewees did frequently encounter a lack of awareness around the existence of LGBT families, including presumptions of heterosexuality.

Overall experiences of crèche, pre-school, primary and secondary education, were more positive than negative. Interviewees described the considerable efforts they made in finding progressive schools for their children. The education system and syllabi were not seen to reflect diverse families, and this was a barrier to schools in responding to the needs of LGBT-headed families.

Overall, the high level of positive experience suggests that awareness of, and attitudes to, LGBT parents and families are changing for the better, particularly in the areas of health and education. However, the prevailing lack of legal recognition and official policies to support LGBT-headed families, means that LGBT parents continue to face legal, medical and social barriers, and remain exposed to systemic and individual prejudice and discrimination from service providers.

**LGBT Parents’ Experiences of Discrimination and Negative Attitudes**

Disclosing one’s LGBT identity was, in many cases and settings, met with acceptance and affirmation. However, the study has shown that homophobic or transphobic responses to LGBT parents were not uncommon.

Nearly a half of LGBT parents responding to the survey and all the interviewees had experienced discrimination and negative attitudes towards them in their parenting roles in the last five years.
Younger parents experienced slightly higher levels of discrimination or negative attitudes than parents in older age groups.

In the interviews, the issues of legal vulnerability and lack of parenting rights were constant concerns for LGBT parents in their daily lives. Of primary concern was the potential for interference with the custody/legal rights of a non-biological parent, if something happened to the legal parent. A further major worry was the possible implication of the lack of the ability of the non-legal parent to consent to medical treatment in the event of a medical emergency with a child.

The negative reactions and attitudes towards trans parents in particular, and the resulting isolation and stress that this brought on those parents and children, demonstrated the most extreme examples of LGBT victimisation in this study. Society’s lack of knowledge of LGBT parents and heteronormative assumptions about parenting, exacerbated feelings of invisibility and isolation.

Lack of legal rights - and the resulting legal vulnerability that this caused for LGBT parents and their children - was the greatest form of discrimination experienced. Absence of a legal framework, which recognises the diversity of LGBT families, meant that LGBT parents were denied specific legal recognition of their parenting roles, which impacted on every aspect of their family lives.

**Legal and Other Changes to Improve the Lives of LGBT Parents in Ireland**

The top-ranking, legal change that would have an impact on LGBT parents, identified in both the anonymous survey and the in-depth interviews, is access to civil marriage for same-sex couples. With the constitutional protection afforded to married families, and with the lack of legal recognition of children within civil partnership legislation, marriage rights emerged both in terms of a wider equality context and in relation to specific parenting rights, which could be accessed if civil marriage was available. This is followed by the right of a child to have a legal relationship with their parents/careers, and the right for civil partners to have guardianship and custody rights of their children.

The top-ranking, other issues that would have an impact on the lives of LGBT parents are government policies and state services that reflect the diversity of family life. This is followed by access to schools that respect the diversity of family life, and health services that respect the diversity of families.

LGBT parents who participated in the interviews, also ranked highly the need for LGBT support services for parents and for their children. Support services range from support groups for parents and peer support for children of LGBT parents to the provision of counselling for children, to support them in issues arising as a result of bullying or societal prejudice. There was also strong support for legal measures, which prioritised the best interests of children, on the basis that the sexual orientation of their parents should not determine rights to legal recognition of their relationship with their parents. Similarly, the law needed to develop in order to recognise diverse family forms, and to ensure children had a right to a relationship with the people who cared for them. This principle should be extended to the area of guardianship and custody, so that non-biological parents’ relationships to their children would be recognised in law, and that these parents and their immediate families would also have custody and access rights.

Given the mixed experiences of LGBT parents, and fears that their sexual orientation or gender identity would expose them or their children to discriminatory practices, it is not surprising that
the priority issue in the interviews also related to access to state services that reflect the diversity of family life. This highlights the need for policy-makers and key service providers, including those in health, education and information, to consider and include the specific needs of LGBT-headed families. The importance of LGBT networks and support groups was very evident in the interviewees’ accounts of how support from peers was often crucial, as only other LGBT people could completely understand their support needs.

4. LGBT People Planning Parenthood: Findings from the Survey

**LGBT People Planning Parenthood: Family Formation and Parental Status**
170 respondents to the anonymous survey were planning parenthood. The majority, principally lesbians, were planning to have a child through AHR with a known or unknown donor. Most gay male respondents were planning to become parents through adoption, and a smaller - though sizeable - number were considering surrogacy. Overall, the majority of respondents were planning to have children with their partner; thus there was less anticipated diversity of family forms and pathways to parenthood than is evident from existing LGBT family formations. This demonstrates the emergence of planned LGBT-headed families in Ireland, and is an important finding in the context of developing legislative and policy change to achieving equality for all LGBT families.

The in-depth interviews also provided some indication of the motivation and considerable decision-making involved in planning parenthood as an LGBT person, and showed that having an LGBT identity did not alter the interviewee’s desire to have children. Rather, it demonstrated their considerable commitment and motivation to have a family, given the often-difficult decisions and financial costs involved.

**Being ‘Out’ and Support in Planned Parenting Roles**
The majority of respondents in the anonymous survey and in the interviews were ‘out’ in their roles as LGBT people planning parenthood. The highest number were ‘out’ to friends, followed by immediate family members and informal and formal LGBT groups. The lowest number were ‘out’ in the local community and to neighbours. Partners and immediate family members provided the highest level of support. LGBT people planning parenthood received higher levels of support overall, compared to the levels of support received by LGBT parents.

LGBT people planning parenthood sought and received very low levels of support from LGBT support groups, and interviewees suggested that this type of support should be established within the LGBT sector. The need for structured support and information services targeted at LGBT people planning parenthood is a gap that needs to be addressed within the LGBT community and amongst information providers.

**Access to Services for LGBT People Planning Parenthood**
The survey found that LGBT people, who embark on the journey to parenthood, experience considerable challenges and obstacles in accessing clear information and services. This often leads to an ethical dilemma for people planning parenthood, of whether to reveal their LGBT identity for fear of negative consequences.

Compared to LGBT parents, LGBT people planning parenthood were much more likely to have a negative experience in relation to AHR services, adoption services, fostering services and information services. There were very low levels of positive experiences of adoption services, with nearly a half reporting a negative experience. With AHR and adoption services, respondents and interviewees reported higher levels of positive experiences when they had accessed services abroad.
Lack of information and clear guidelines, on whether AHR, adoption and fostering services were open to LGBT people, was a major barrier for planning parents. The importance of accessible information about parenting rights, AHR, adoption and fostering services, was reiterated in both the anonymous survey and the interviews.

LGBT people planning parenthood generally had positive experiences of accessing health and maternity services. Again, access to information was highlighted as an important service for them, as this was an area where negative experiences prevailed.

**LGBT People Planning Parenthood: Experiences of Discrimination and Negative Attitudes**
One half of LGBT people planning parenthood and all the interviewees had experienced some form of discrimination or negative attitudes towards them as LGBT people planning parenthood, in the last five years.

Gay men who were planning parenthood experienced slightly higher levels of discrimination or negative attitudes, compared to lesbians and bisexual people planning parenthood. Younger people planning parenthood experienced slightly higher levels of discrimination or negative attitudes than planning parents in older age groups.

As with the findings from the sample of LGBT parents, overwhelmingly, interviewees stated that discrimination or negative attitudes arose from a lack of legal status, visibility and recognition of LGBT families in legislation and government policies. Discrimination experienced by LGBT people, particularly in relation to the legal and policy barriers faced by them when trying to become parents, was a significant concern for people who participated in the interviews.

**Legal and Other Changes to Improve the Lives of People Planning to be LGBT Parents**
As with LGBT parents, the top-ranking, legal changes sought by LGBT people planning parenthood, were access to civil marriage for same-sex couples and access to the right to be eligible for assessment for joint adoption that this would bring. Interview participants viewed equal access to marriage for LGBT people as being critical in improving legal parenting rights, particularly in the area of adoption, but also in bringing about wider equality for, and acceptance of, LGBT people. The right of a child to have a legal relationship with their parents / carers followed these.

The top-ranking other change that would have an impact on the lives of LGBT parents was to have in place government policies and state services that reflect the diversity of family life. This is followed by access to schools that respect the diversity of family life, and health services that respect the diversity of families. Interview participants also ranked highly, the need for LGBT support services for those planning parenthood and for an information service to be provided by existing LGBT organisations.

5. Conclusions and Recommendations

**Conclusions**

The study findings show there is a rich diversity of parenting roles, relationships and family life amongst LGBT families in Ireland today. Becoming a parent and sustaining parenthood is not without its challenges, and those planning parenthood face risks of discrimination or negative attitudes, exclusion from legal parenting roles and risks of familial or societal rejection that opposite-sex parents do not face. The survey points to an overwhelming concern about the lack of legal recognition given to LGBT parenthood and to the difficulties arising from the consistent
failure of governments to approach the issue of LGBT families from a ‘child centred’ perspective. The study has also shown the importance of legally recognising the non-biological status of LGBT parents who are co-parents or step-parents in relation to their parental rights and protection of their children. This means starting from a ‘children first’ perspective that recognises and respects the rights of children to have their relationships with their parents, and for LGBT parents to have their parenting roles legitimated and recognised.

LGBT people are involved in complex processes in their pathways to parenthood, in negotiating personal and family relationships and in sustaining parenting relationships. This often means having to stand up against heteronormative and homophobic assumptions and having to counter potential risks of rejection by family members and societal prejudices.

In the public sphere, LGBT families are creating new family formations that are not recognised in official policies. This suggests that government policies should aim to facilitate a greater diversity of family relationships that reflect the circumstances of the lives of LGBT parents and families, rather than a single model or ideology of the family.

The study found that at a societal level, homophobia and heteronormativity continue to pervade the lives of many LGBT parents and those planning parenthood. This is evidenced from the qualitative interviews and from the fact that 46% of LGBT parents and 50% of LGBT people planning parenthood responding to the survey had experienced discrimination or negative attitudes towards them in the last five years. The survey found that this was most acute for trans parents, where significant levels of transphobia result in discrimination, isolation and rejection by family and society. However, this study also shows that, in many cases, when LGBT parents ‘come out’ to their children, families, friends and work colleagues, there is often an overwhelming acceptance of, and support for, them in their parenting roles or in their roles in planning parenthood.

These findings point to the need for a greater political recognition of the diverse family forms in Ireland today. This suggests that the reality of LGBT parenting roles, relationships and family formation, needs to be factored into public discourse, so that legislation and policies reflect more accurately modern day parents and family life.

Recommendations

1. Legal Changes for LGBT Parents

   - Legal changes include the introduction of legislation for civil marriage, the introduction of legislation to enable second-parent adoption, the right of same-sex couples to be assessed for suitability to adopt, and the right to be eligible to apply to adopt a child who is fostered.
   - Recommendations are also made for legislation on guardianship / parental responsibility to be extended to all carers who have a parental relationship with the child / children, the right for same-sex partners to be on the birth certificate of their child and the legal protection of trans parents in forthcoming legislation on gender recognition.

2. Government Policies to reflect Family Diversity

   - Government policies and strategies on the family, children, education and healthcare should reflect family diversity.
   - A government Commission on Family Diversity should be established, to take into account LGBT parents and their families.
• The inclusion of children from LGBT families should be part of a ‘child centred’ approach, in line with the National Children’s Strategy.

3. Access to Services

• Improve access to AHR services and for the full implementation of the recommendations from the Commission on Assisted Human Reproduction (2005), to ensure that AHR services are made available without discrimination.
• Implementation of inclusive school policies on family diversity, training and awareness-raising for school staff and the full implementation of the Department of Education / GLEN Guidance for Principals and School Leaders.
• Implement inclusive healthcare policies so that the needs of LGBT parents are integrated into all relevant policies and strategies of the Department of Health, the Department of Children and Youth Affairs and the Health Services Executive, through guidance from medical, health and social care professional bodies, and by means of training and practice guidelines for staff providing front-line services to families and children.
• Provide accessible legal and practical information for LGBT parents on accessing AHR, adoption, fostering and surrogacy services, support services and access to services, through a partnership between LGBT organisations and the Citizens’ Information Board.

4. Support for LGBT Parents and the Children of LGBT Parents

• Provide LGBT parent-support groups and peer support for children of LGBT parents, and provide access to existing counselling services for LGBT parents and children of LGBT parents.
• Increase visibility and awareness of LGBT parenthood in the community amongst local service providers, building on the GLEN Code of Practice for Community Development Projects, Family Resource Centres, Urban Partnerships / Integrated Development Companies.
PART 1: INTRODUCTION AND PROFILE OF PARTICIPANTS IN THE STUDY

Part 1 of the report provides the background and context to the study, and provides a profile of the respondents to the anonymous survey and the participants in the in-depth interviews.

Chapter 1: Introduction
Chapter 2: Profiles of LGBT parents participating in the study
Chapter 1: Introduction

The kids - and this is something they have said to me, it is not just something I have imagined - are very happy with a rainbow family. They feel it has enabled them to be more open and more respectful of difference, and to be more understanding of difference. They have very little truck with people that don’t. (04, gay father)

1.1 Overview

The LGBT Parenthood Study looks at the situations, experiences and needs of a sample of LGBT parents and LGBT people planning parenthood in Ireland, with a view to making recommendations for policy and service provision. The research involved an anonymous survey of 153 LGBT parents and 170 LGBT people planning parenthood, and was supplemented by twenty-five, in-depth interviews with LGBT parents and LGBT people planning parenthood. It shows the rich diversity of LGBT family formation and parenting relationships in Ireland today, and also points to the way that LGBT people are planning to parent in the future. The findings from the study show that despite much greater societal recognition of family diversity, LGBT parents and those planning parenthood experience a range of legal barriers and discrimination. As a result, the research points to the need for societal values and government policies that recognise and protect the rights of LGBT parents and their children, irrespective of the sexual orientation or gender identity of the parents. This means starting from a ‘children first’ perspective that recognises the rights of children to have their relationships with their parents recognised and respected, and for LGBT parents to have their parenting roles legitimated and recognised.

The survey has been carried out at a time of significantly increased levels of public awareness of LGBT rights and visibility, resulting in a much greater acceptance of diversity in family life, including LGBT parenthood. An opinion poll carried out on behalf of the Irish Government at the end of 2011, found that 73% of people believed that same-sex marriage should be provided for in the Irish Constitution\. All major political parties in Ireland now support the introduction of same-sex marriage, and a motion for the inclusion of this as a priority in the forthcoming Constitutional Convention, was approved at the March, 2012 Fine Gael Ard Fheis. Alongside this are advances in, and access to, assisted human reproduction (AHR), which has made it much easier for LGBT people, particularly lesbians, to have children.

Changes in family formation and an increase in family diversity are also evident across Irish society. Amongst opposite-sex families, more children are now raised in single-parent families, and in more complex family forms arising from divorce and remarriage. Findings from the 2006 Census, show that one in four of all children under 21 years of age, live in a family that does not conform to the traditional family model of a married couple in their first marriage (ESRI 2011).

The number of LGBT parents in Ireland is not known. However, it is hoped that this research will provide greater knowledge and awareness of LGBT parents and families through first-hand evidence of the experiences, realities and needs of LGBT parents and those planning parenthood in Ireland. This will be crucial for raising awareness of LGBT parenthood amongst service providers and policy makers, and for legislative and policy developments that give recognition to LGBT parenthood and the diversity of families in Ireland today.

3 http://www.breakingnews.ie/ireland/ojeyausncwcvw/
The need to address parenthood in the LGBT community is further compounded by the lack of legal recognition of LGBT parenthood and the lack of inclusion of rights of LGBT parents and their children in the 2010 Civil Partnership and Certain Rights and Obligations of Cohabitations Act (number 24/2010). LGBT parenthood is a key issue of social inclusion and equality, and the absence of legislation and policy has significant implications for LGBT parents and their children.

The study was commissioned by the LBGT Diversity Programme, which aims to support the development of sustainable LGBT communities across Ireland, and to build the capacity of the sector. The programme is overseen by a Steering Committee, made up of twelve LGBT national, regional and local organisations that have experience of working with, and advocating for, lesbian, gay, bisexual and transgender people. A Programme Director and three regional development workers based in the North West, the Midlands and the South East, implement the programme. LGBT parenthood was identified by the programme as one of several key themes for investigation and specific work.

1.2 Aim, Objectives and Focus of the LGBT Parenthood Research

The overall aim of the study was to:

- Examine the circumstances, experiences and needs of LGBT parents and those planning parenthood, with a specific focus on the needs of lesbian, gay, bisexual and transgender parents and other parenting relationships arising from AHR, adoption, fostering and surrogacy.

The objectives were to:

- Examine the specific needs of different groups of LGBT parents and of LGBT people planning parenthood.
- Identify policy gaps and gaps in services for LGBT parents and those planning parenthood.
- Identify priorities in terms of policy, service needs and measures for the inclusion of LGBT parents and those planning parenthood.

The research focus was on the following key experiences, realities and needs of LGBT parents in Ireland:

- Experiences of LGBT parents and those planning parenthood in relation to their pathways to parenthood and decisions to become parents, parenting roles and support structures with which they engage;

- Experiences and needs of LGBT parents and those planning parenthood in relation to their inclusion and perceptions of discrimination in the community in which they live, their family and extended family relationships, and access to services;

- Experiences of the take-up of services by LGBT parents, including attitudes and awareness of service providers with whom they engage and their experiences of gaps and barriers in relation to those services;

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4 BeLonGTto Youth Services, Cork Gay Project, Dundalk Outcomers, GLEN, LINC, LGBT Noise, Marriage Equality, NLGT, Outhouse, Outwest, Rainbow Support Services and TENI
Experiences of participation in informal and formal support networks, including participation in LGBT community groups and organisations;

Legal and policy issues impacting on parenting roles and relationships, including recommendations for future legislation, policy and service delivery outcomes.

1.3 Structure of the Report

- Part 1 of the report (Chapters 1 and 2) includes this chapter, which provides the background and context for the study, the research methodology, the legal and policy contexts and the literature on LGBT parents. Chapter 2 sets out the demographic profile, including the sexual orientation and gender identity of the respondents to the survey and the participants in the in-depth interviews.

- Part 2 of the report (Chapters 3-7) presents the findings from the anonymous survey and the in-depth interviews with existing LGBT parents.

- Part 3 of the report (Chapters 8-10) presents the findings of the anonymous survey and the in-depth interviews with LGBT people planning parenthood.

- Part 4 of the report (Chapter 11) sets out the conclusions and recommendations from the study.

1.4 Research Methodology

The research used a mixed methodology of quantitative and qualitative data collection, based on an anonymous survey and in-depth interviews.

- The anonymous survey went live in July 2011 and was closed at the end of October 2011. In total, 323 LGBT people completed the anonymous survey, 153 of whom were LGBT parents and 170 were LGBT people planning parenthood. Overall, there was a high level of completion of the survey. One response to the survey was excluded because it was incomplete, ten were partially completed but had sufficient data to include in the overall sample, and the remainder were fully completed. A process of cleaning the data took place at an early stage to ensure that all answers were mapped against the profiles of the respondents to the survey.

- Twenty-five, in-depth interviews were carried out between September and December, 2011, including eighteen interviews with LGBT parents and seven interviews with LGBT people planning parenthood.

A more detailed discussion of the research methodology, including the role played by the LGBT Parenthood Research Steering Committee, can be found in Appendix 1. For the anonymous survey, this describes the definitions used, the survey guide developed for the anonymous survey, the piloting and the dissemination of the survey. For the in-depth interviews, this describes the methodology used. A description is also given of the analysis of the data from the anonymous survey and the in-depth interviews.

The quantitative survey that could be completed online, by email, in a paper-based format or via a telephone interview with one of the researchers, can be found in Appendix 2.

The sample profiles of the participants in the in-depth interviews can be found in Appendix 3.
The remainder of this chapter provides an overview of the legal and policy contexts of LGBT families in Ireland and of research on LGBT parenthood.

1.5 LGBT Families in Ireland: Overview of the Legal and Policy Contexts and Literature

Families in Ireland, the bedrock of our society, are ever changing and evolving, and knowing the extent and nature of the shifts in family life is vital, if we are to cater for the needs of families. In the current environment of uncertainty as to the level of resources available to support families, it is even more crucial that we have accurate and comprehensive information on Irish family life. (Michael O’Kennedy, S.C., Chairperson, Family Support Agency, in Family Figures, ESRI, 2009)

According to the 2006 census, there were over one million families\(^5\) living in the State, with nearly three quarters of those families having one child or more. Children in Ireland are now much more likely than in previous decades to grow up in households with only one or two children, while 17.6% of children under the age of 15 years lived in one-parent families (CSO 2007).

There are no official figures on the total number of families that are headed by a lesbian, gay or bisexual (LGB) parent(s) as the census does not collect data on sexual orientation. However, the 2011 census did, for the first time, provide an opportunity for same-sex couples to record their relationship and their relationship with their children living in the same household. The 2011 census results show that 4,042 same-sex couples recorded that they were living together, 230 of whom were couples with children (CSO 2011). However, the constraints in data collection, including the lack of a specific question on sexual orientation and the reluctance of some LGB people to identify themselves in the census, mean that these numbers are likely to be a considerable under-estimate of the actual population.

It is estimated that approximately 5-7% of the population may be lesbian, gay or bisexual (LGB) (GLEN 2007). In relation to the number of LGB people who are parenting, a survey carried out by the Irish National Lesbian and Gay Federation (NLGF), found that one in five women and one in fourteen men had children (Denyer et al. 2009). From the same survey, looking at respondents over the age of 35, the figure rises to four out of every ten women and almost one in six male respondents.

The size of Ireland’s transgender population, commonly referred to as ‘trans’\(^6\), is not known. Research carried out in Ireland does give an indication of the numbers of people who identify as

\(^5\) A family is defined in the Irish census as either a husband and wife or cohabiting couple; a husband and wife or cohabiting couple with one or more children (usually resident, never married, of any age); or one parent with one or more children.

\(^6\) ‘Trans’ is commonly used shorthand for the term transgender; transgender is an umbrella term for people whose gender identity and / or gender expression differs from the sex assigned to them at birth. This term can include many gender identities such as: transsexual, transgender, cross-dresser, drag performer, androgynous, gender-queer, gender variant or differently- gendered people.
transgender. Research on older LGBT people (Visible Lives of Older LGBT People, Higgins et al. 2011) found that 7% (n=10) of the sample of older LGBT people responding to the survey, identified as transgender, while 4% of the sample of LGBT people were transgender in the Supporting LGBT Lives Study (Mayock et al. 2009). Data on the number of transsexual people in the Netherlands suggests that there are 1 in 11,900 transsexual men over 15 years of age and 1 in 30,400 transsexual women over 15 years of age (HSE 2009). However, transsexuals account for only a small percentage of the wider trans community, and many trans people will not seek formal diagnosis or medical interventions which make the size of the trans population difficult to determine. As there is no epidemiological data available, it is safe to assume that there are more transgender people than generally assumed (Higgins et al. 2011, Gires 2009).

Despite the lack of official figures on the number of LGBT parents, the past decade has seen a growing awareness about the existence of LGBT parents and the legal barriers facing LGBT parents and their children. In the NLGF’s Burning Issues Survey, lesbian and gay parenting rights were rated as one of the top priority issues for the LGBT community (Denyer et al. 2009). This chapter will examine some of the issues within national and international literature in relation to the experiences and specific needs of LGBT parents and those planning parenthood.

**Partnership Rights and Parental Rights and Responsibilities**

Since the late 1990s, a number of reports have documented the consequences of the lack of legal rights of LGBT people living in Ireland, and have listed recommendations to progress equality in order to meet the needs of LGBT people, including specific actions relating to LGBT parents (Equality Authority 1999, Mee et al. 2000, ICCL 2006 & DJELR 2006).

The Options Paper of the Working Group on Domestic Partnerships (DJELR 2006), the ‘Colley Report’, clearly outlined the consequences of the lack of legal recognition of LGBT people and their families. The report stated that this resulted in important implications for the status and standing of same-sex families and for lesbian, gay and bisexual people, and more generally, contributed to a perception that their relationships lack value and meaning and are unequal to others. The Working Group reported that the lack of legal recognition had direct consequences for same-sex families, because it excluded them from the protections and legally enforceable obligations that are available to opposite-sex families through civil marriage. It noted that these legal exclusions not only impact on the financial resources available to support family life, but could contribute to separation and loss for the individuals involved. Particularly important in this respect were the difficulties experienced by same-sex couples who were co-parenting children, and who did not have the opportunity to establish a joint legal connection with these children (DJELR 2006: 52). In the options for recognising same-sex partnerships, full civil partnership was viewed as being less vulnerable to constitutional challenge than introducing civil marriage for same-sex couples. However, in presenting the option of partnership recognition, the Working Group acknowledged that this option would fall short of full equality for same-sex couples, as it excludes such families from the protection given to the family in the constitution. The report, in considering the issue of adoption for same-sex couples, concluded that same-sex couples who are married, or in a full civil partnership, should be eligible for consideration to adopt a child who is eligible for adoption.

An earlier report that year by the ICCL (2006), provided a comprehensive review of the status of unmarried couples and other family groupings under Irish law and policy, and made a series of recommendations on constitutional reform, designed to ensure legal recognition of various interpersonal relationships. This report also highlighted the lack of recognition of same-sex couples in relation to parental rights and responsibilities, and called for a revision of Articles 41-42 of the Irish Constitution, which would guarantee all individuals respect for their family life.
The ICCL’s report also called for an express right for all persons to marry in accordance with the law, and to form a family, irrespective of gender identity or sexual orientation (ICCL 2006).

The enactment of the Civil Partnership and Certain Rights and Obligations of Cohabitants Act 2010, saw progress made in relation to the legal recognition of same-sex relationships. However, the omission from the Act of any rights and obligations relating to children, led to considerable debate both during the passage of the Bill and following its enactment (Barrington 2009, Ryan 2009, Seanad Debates 2010, Quinn 2010). This included a submission from the Ombudsman for Children, criticising the approach taken by the Government towards children in the proposed civil partnership legislation:

> It is clear that the situation of children was considered at length in the drafting of the Bill; it is unclear why that resulted in a Bill that did not prioritise the rights and interests of children. Although the situation of same-sex couples will be improved considerably by the enactment of the Civil Partnership Bill, the situation of children with same-sex parents will remain largely as it is at present (Ombudsman for Children, 2009).

More recent developments do signal a shift towards some legal recognition of the relationship between LGBT co-parents and their children. In December 2010, the Law Reform Commission’s Report on Legal Aspects of Family Relationships included a recommendation that legislation should facilitate the extension of parental responsibility7 to civil partners and step-parents. In making this recommendation, the Commission acknowledged the growing diversity of family formation and relationships in Ireland and the need to ensure that the best interests of the child are recognised within the relevant legal framework (Law Reform Commission, 2010). However, the enactment of the Finance (No.3) Act 2011, giving effect to the taxation aspect of the 2010 Civil Partnership and Certain Rights and Obligations of Cohabitations Act, does recognise in law the relationship between a non-biological, same-sex parent and their child or children, by providing for the same tax treatment of a child whose parents are in a civil partnership as that of a child of a married couple (GLEN 2011).

**Transgender Parents and Legal Obstacles**

Legislation and policy affecting transgender people have also developed in the last few years. The Gender Recognition Advisory Group (GRAG) was established by the Minister for Social Protection in May, 2010, following a High Court ruling in the Foy case that Ireland is in breach of the European Convention on Human Rights in not having a process to legally recognise the acquired gender of transsexual persons (Gender Recognition Advisory Group 2011). During the time between this ruling and the establishment of GRAG, the 2008 Passport Acts brought a further development, with the Acts allowing for transgender people to receive passports in their preferred gender (Higgins et al. 2011).

In the Equality Authority’s 2010 submission to the Gender Recognition Advisory Group, it recommended, in line with the provisions under Section 12 of the UK Gender Recognition Act, 2004, that a person’s acquired gender does not alter a person’s legal status as a parent:

> In the interests of preserving continuity and stability for children, and with a view to preserving each parent’s legal obligations towards their children, it is submitted that

7 The term ‘Parental Responsibility’ is proposed in the Law Reform Commission’s Report to replace the existing term of ‘Guardianship’. 
gender reassignment should not have the effect of altering the legal status of parents.
(Equality Authority Submission to the Gender Recognition Advisory Group, 2010, p.27)

In the GRAG Report, a proposal that a transgender person who is already married, must divorce before applying for recognition so that the relationship will not turn into a same-sex marriage, has been criticised in a number of reports as having the potential to cause hardship for families. It is argued that this provision would force transgender parents to have to choose between their marriage and the legal rights and protections which that afford to their family, and obtaining legal recognition in their new gender (CGWS 2008, FLAC 2011).

Pathways to Parenthood

Despite the positive advances in LGBT rights, LGBT people who want to parent either through assisted human reproduction, co-parenting arrangements, fostering or adoption, continue to face medical, social and legal barriers (HSE 2009).

Assisted Human Reproduction (AHR)

Several authors have argued that increased access to assisted reproductive technologies in the UK and the US, has led to a dramatic rise in the number of gay men and lesbians who have become parents after ‘coming out’, rather than in the context of a previous opposite-sex relationship (Weston 1991, Patterson 1995, Morningstar 1999). However in Ireland, a lack of clear guidelines or regulation in the area of AHR, means that there is no onus on clinics or doctors to provide treatment to same-sex couples (Irish Medical Times, 28th June 2008, HSE, 2009).

While attitudes among providers and the general public are divided on the question of to whom AHR services should be provided (DOHC 2005), the Commission on Assisted Human Reproduction (2005), recommended that services should be available without discrimination on the grounds of gender, marital status or sexual orientation, and that any relevant legislation on the provision of AHR services should reflect the general principles of the Equal Status Acts, 2000-4.

In relation to surrogacy, the Commission recommended that surrogacy should be permitted, with a majority of the Commission recommending that the child born through surrogacy, should be presumed to be that of the commissioning couple (Commission on Assisted Human Reproduction 2005). However, six years on, no legislation has emerged in relation to either surrogacy or for the wider area of AHR. Recent pressure, arising from the lack of legal status of babies born by surrogacy abroad, led the Minister for Justice to make a public commitment to publish guidelines to assist parents planning surrogacy abroad. (Irish Times, 23rd Nov 2011)

A further consequence of the lack of legislative guidelines on AHR, is the lack of clarity in the area of donors. In 2009, the Irish Supreme Court ruled that a gay man, who acted as a sperm donor for a lesbian couple, is entitled to access in respect of the couple’s child (McD. v. L. & Anor 2009, IESC 81). The Supreme Court’s ruling reversed an earlier ruling by the High Court that the lesbian couple constituted a de facto family, denying access to the donor in the best interests of the child (European Commission on Sexual Orientation Law 2009). This decision leaves a child being raised by same-sex couples in a precarious legal position, and highlights the potential for

http://www.courts.ie/Judgments.nsf/09859e7a3f34669680256ef3004a27de/f0accee6d7a4dc3780257688003f5272?OpenDocument
conflict between donors and parents which can arise in the absence of clear legislation in this area.

**Adoption and Fostering**

Despite consistent evidence from international research showing that children of same-sex parents develop in ways that are similar to those of opposite-sex parents (Tasker & Golombok 1997, Patterson 2005, Farr et al. 2010), the issue of whether lesbian and gay couples and individuals should be allowed to adopt, remains a controversial policy issue in Ireland and in many other parts of the world (Farr et al. 2010, Council of Europe 2011).

The lack of rights of unmarried couples to apply to adopt jointly and the implications of this restriction for the children being parented by same-sex couples, are well documented (Walsh & Ryan 2006, Working Group on Domestic Partnership 2006). In 2009, the Ombudsman for Children recommended lifting this restriction to ensure that the categories of persons eligible to apply to adopt should be extended to unmarried opposite-sex and same-sex couples (Ombudsman for Children 2009). However, the most recent Irish legislation on adoption left the restriction unchanged, allowing joint adoption to married couples only. Similarly, this provision was not changed under the civil partnership legislation.

There is no legal restriction from fostering by unmarried couples, making fostering a practical possibility for LGBT people in Ireland (Walsh & Ryan 2006, HSE 2009). However, conflicting State policy between the areas of adoption and long-term foster-care, means that married foster-parents may apply to adopt a child who they have fostered for at least five years, but this possibility is not open to unmarried opposite-sex or same-sex foster-carers (Ombudsman for Children 2009).

**LGBT Parenting Rights: International Progress**

Internationally, progress has been made in several countries around the world in developing legislation to provide legal recognition of same-sex parenting, including the areas of second-parent and joint adoption rights, and the availability of AHR. In the US, where census data from 2000 reported that 22% of gay male couples and 33% of lesbian couples were living with their children under 18 years of age, several States allow adoption by same-sex couples, with some States also allowing both partners in a same-sex couple to be legal parents to a child born to them through AHR (Simmons & O’Connell 2003, Farr 2010).

A number of European countries have also made progress towards legally recognising same-sex parenthood, and in many of these countries, adoption tended to be the first step in this process. However, a smaller number of countries have recently introduced legal recognition with regard to parenthood without adoption, which is a significant step forward in coming closer to the regulations for opposite-sex couples and a shift away from the established legal rules in relation to parenthood (Vonk 2010, Council of Europe 2011, ILGA Europe 2011). In the area of surrogacy, the UK’s introduction of ‘parental orders’ and the extension of eligibility to apply for

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9 The Adoption Act 2010
10 Belgium, Denmark, Finland, Germany, Iceland, the Netherlands, Norway, Spain, Sweden and the United Kingdom
11 A parental order is a court order, designed specifically for surrogacy situations, and has the effect of extinguishing the rights of the surrogate mother (and her husband / civil partner) and conferring full parental rights on the applicants instead.
such an order to same-sex couples, introduced in April, 2010, is a significant development. This provides couples with access to a ‘fast track’ legal process to apply for legal parenthood, saving same-sex couples from the lengthy adoption process, which was the only route previously available (Gamble 2010).

Social Attitudes to LGBT Parents in Europe

The importance of legal recognition and rights on changing social attitudes, is evidenced in European research, which has shown that attitudes towards legal recognition of same-sex partnerships are most positive in countries where LGBT people already receive some legal recognition (European Agency for Fundamental Human Rights 2009). Similarly, national surveys into attitudes towards whether same-sex couples should be allowed to apply to adopt, found an extreme range of views across European States, with the lowest acceptance in Poland and Malta at 7% and the highest in Sweden at 50% and in the Netherlands at 69%, where legal recognition of same-sex parenting has been in existence for a number of years (Council of Europe 2011).

The Experiences of LGBT Parents and the Desire to have Children

Levy (1970) argues that the underlying reason for studying parenthood motivation and the strength of desire to have children, is that these aspects are supposed to affect parenting and the relationship between parent and child. In their pathways to parenthood, LGBT people are often asked the question, sometimes in a critical way, about their motives to have children (Bos et al. 2003). Studies examining the pathways to parenthood by lesbian and gay parents, have found that, in most cases, the desire and motivation to become parents is similar to that of opposite-sex parents. This includes the desire for nurturing and raising children, and the happiness that this would bring, as well as the desire to achieve a sense of family life that children help to provide (Bos et al. 2003, Bergman et al. 2011).

Despite the often intrinsic desire for parenthood, on first realising their LGBT identity, people are often worried that parenthood would be impossible (Lewin 2009). This worry, coupled with intense social pressure to settle down and marry, were the reasons - frequently reported in earlier studies of gay divorced fathers - why they had married (Dunne 2001). However, even in planned same-sex-headed families, the fear of homophobia and discrimination impacted on the decision-making process. In one study of planned lesbian-headed families, lesbian biological and social mothers had spent more time thinking about the reasons for wanting to have children compared with opposite-sex parents, and, as a result, their desire to have children was stronger (Bos et al. 2003). More reflection on their motives to become a parent was due in part to the fear of homophobia and the possible negative implications of raising a child in a non-traditional family in a homophobic society, and the possible prejudice children may face outside of the family (Bos et al. 2003, Gartrell et al. 1996, Weeks et al. 2001).

With regard to the feelings of LGBT parents after having children, the 25-year US National Longitudinal Lesbian Family Study (NLLFS) which interviewed mothers before their children were born, and when their children were 2, 5, 10, and 17 years old respectively, found that with regard to the overall impact of having children, mothers expressed that having children was the most enjoyable and best thing that had ever happened to them (Gartrell et al. 2006). Similarly, in research on gay fathers, participants spoke of their sense of personal fulfilment and pride in
having children and a new sense of commonality with opposite-sex parents (Schacher et al. 2005).

**LGBT Parents: Decision-Making on the Road to Parenthood**

With a growing number of planned lesbian and gay families, the issue of choosing a known or unknown donor and the level of involvement of the donor, if this option is chosen, is one of the first practical decisions for lesbians and gay men on their pathways to parenthood. In a comparative study between Swedish and Irish lesbian mothers, the majority of participants chose to have a known donor (Ryan-Flood 2009). Interestingly, however, this study found that Swedish lesbians were far more likely to choose an involved donor. In contrast, the most common situation among Irish participants was to choose a donor whose identity remained a secret, with the prospect of losing custody of children being a major concern for Irish participants (Ryan-Flood 2009).

With a strong preference by lesbian mothers for involving gay men in their children’s lives as fathers (Dunne 1999), a subsequent study by Dunne (2001) into the experiences of gay fathers, found that many of the ‘donor- dads’ interviewed, had actively initiated the process of becoming fathers by advertising or by broaching the topic with a lesbian friend. In the same study, donor-fathers had almost always experienced an extended period of negotiation with the would-be mother/s to establish an agreement on contact, but few were unhappy about their parenting arrangements, and all but one described their relationship with the mother/s as good or excellent.

**Negative Experiences and Discrimination of LGBT Parents**

International research demonstrates that experiences of prejudice, discrimination and victimisation are frequently common amongst LGBT people (Balsam et al. 2005, Huebner et al. 2004). Studies that include the experience of Irish lesbian, gay and bisexual (LGB) parents found that awareness of homophobic attitudes and social stigma, led to a sense of vulnerability for parents and also for their children (CGWS 2008, Ryan-Flood 2009). In a study carried out by the Centre for Gender and Women’s Studies (CGWS 2008) at Trinity College Dublin, the issue of social stigma was raised by LGB parents living in Ireland in relation to their children, rather than themselves. This included fears for their children’s safety, particularly of being bullied at school because of having a gay or transgender parent. However, reassuringly, research conducted among young adults who grew up in lesbian-headed families in the UK, has found that as children, they were no more likely than children of a heterosexual mother to have been teased or bullied by peers (Tasker and Golombuk 1997, Golombuk 2000). Similar findings were also reported into the experiences of children of transgender parents, which found that no child in the study has extensive conflict with peer groups (Green 2007).

LGBT parents can also experience negative attitudes and a sense of stigma from family and friends; these negative attitudes can often be framed as concerns for the child and the negative impact their parent’s LGBT identity may have on them. For transgender people, the main trigger points for discrimination occurred most frequently at the time of transition (Whittle et al. 2007). In the CGWS study, the sense of stigma felt by transgender parents from their own families and the ‘trickle down’ effect this had on their children, had a detrimental effect on their parent and child relationship (CGWS 2008). This was also reflected in findings from Green’s (2007) study of transgender parents and their children, with many of the transgender parents interviewed reporting that they had not seen their children for years; for some, this arose because their former spouse had been adamantly opposed to contact, and the transgender parent believed that a legal fight was hopeless (Green 2007).
LGBT Parents ‘Coming Out’

Difficulties in ‘coming out’ to children, were highlighted in many early studies with gay fathers, who were primarily divorced men and who had children in the context of opposite-sex relationships (CGWS 2008, Barreth & Robinson 2000, Dunne 2001). In these studies, the issue of ‘coming out’ as gay to their children was heavily negotiated with the children’s mother, and the process of negotiation preceding the disclosure took place over a considerable amount of time. Similar to the experience of the gay parents, transgender parents often left the family home, having decided to opt for transition, and all described long periods of anxiety about ‘coming out’ to their children (Green 2007, CGWS 2008).

However, having ‘come out’ to children, these studies found that the attitudes of children to their parents’ LGBT identity, to be quite positive and encouraging. Also, in Green’s (2007) study, there were families who had stayed together, and the transsexual parent continued to live with their children and spouse during the gender transition, or had maintained frequent parenting contact, though living apart. Further positive findings documented by Dunne (2001), show a significantly high number of divorced gay fathers reporting positive relationships with their ex-wives and children, and most continued to be actively engaged in their children’s lives.

LGBT Parents’ Sources of Support

Despite evidence of negative attitudes of family and friends towards LGBT parents, there is a growing body of evidence that having a child can often enhance contact between lesbian and gay people and their family of origin (Goldberg 2006, Bergman et al. 2010). In the NLLFS study, most expectant mothers reported having strong social support from their parents and families, and having a child enhanced the lesbian mothers’ relationships with their parents and increased contact with them (Gatrell 1996 & 2006). Similarly, a study by Goldberg (2006) reported an increase in familial support from both partners’ families of origin for lesbian-headed families across the transition to parenthood. Consistent with these results, the parents and families of gay fathers were often more supportive and approving than they had initially been expecting (Mallon 2004, Schacher et al 2005). Findings from a recent study of gay men who became fathers via surrogacy, found that one of the most striking psychological findings of the study was the greater closeness that fathers reported with their families of origin (Bergman et al. 2010). However, in contrast, Oswald (2002) noted that compared to most opposite-sex couples, same-sex parents received less support from their families of origin. Therefore, while the support that gay parents receive from their families appears to increase across time, gay parents may nevertheless receive less support than opposite-sex parents.

The LGBT community can be an important source of support for LGBT parents, giving contact with other LGBT people and allowing individuals to share specific and sometimes challenging life experiences (Russell & Richards 2003, Maycock et al. 2009). However, with evidence of a shift away from socialising ‘on the scene’ as a result of becoming parents, the importance of informal or formal social networks with other LGBT parents emerged (Gartrell 2006, Mallon 2004). In Irish research studies, several participants reported having no contact with other lesbian-headed families or children with LGBT parents, and were not aware of any networks (CGWS 2008, Elliot 2010). However, the annual ‘Women’s Camp’ was an exception to this, and was a significant gathering place for lesbian parents and their children and an opportunity to meet similar families (Ryan-Flood 2009). The source of support that this gathering provides for children was evident in Elliot’s (2010) study, with the participants who attended the camp describing it as a place where they could totally relax, and through which, long-standing friendships were formed.
LGBT Parents’ Experiences of Health and Education

In an Irish context, progress has been made in improving responses to LGBT people, as evidenced in the report by the HSE National Social Inclusion Governance Group in 2009, which mapped the health care needs of LGBT people (HSE 2009). Good practice guidelines issued to social workers and nurses for working with LGBT people, are also evidence of an improved response. These guidelines are positive and supportive of LGBT people, and also deal specifically with issues facing same-sex parents. They call on health care professionals to be aware that LGBT people may be parents and also to be aware of the prejudice and negative assumptions that they may face about their parenting abilities. The guidelines highlight the importance of social workers and nurses working with gay and lesbian-parent families, and those involved in the assessment of LGBT adults as potential foster or adoptive parents, being aware of the very significant body of research evidence that demonstrates that LGBT people are just as capable of being good parents as heterosexual people, and that their children are just as likely to be healthy and well-adjusted (The Irish Institute of Mental Health Nursing 2010, The Irish Association of Social Workers 2011).

These positive initiatives are welcome, given that any difficulty experienced in health care settings was a theme arising for LGBT parents and their children in a number of Irish studies (Elliot 2010, CGWS 2008, Ryan-Flood 2009). Substantial barriers were experienced by transsexual people in accessing a range of goods and services, including health care (Collins and Sheehan 2004, Whittle et al. 2008, Equality Authority 2010). This includes gaps in the provision of services for transsexual people, low levels of expertise and awareness of health care professionals and a lack of specialist services. This was compounded by a lack of clarity and discriminatory attitudes regarding the legal status of transgender parents (Equality Authority 2010).

In Elliot’s (2010) study, the children of LGBT parents had only negative experiences of the health system, primarily due to the failure of the system and health professionals to recognise the family status of children and parents within LGBT families. Similarly, lesbian parents had difficulties with health care professionals’ attitudes in relation to their lesbian identities and family life. The recurring assumption of heterosexuality, particularly in prenatal and antenatal care contexts, served to make the participants more aware of their marginalisation, and left them feeling vulnerable in the health care setting (CGWS, 2008 & Ryan-Flood, 2009). In the UK, guidelines to nursing staff on next-of-kin issues for LGBT patients, encourage inclusive practices towards parents who do not have legal status, outlining that it is in the child’s interest that the person or persons who care for them, continue in that role, uninterrupted (Royal College of Nursing 2003).

Choosing schools also emerges as an important issue for lesbian parents in Ireland, described in terms of being a long process of concern and negotiation (CGWS 2008). With the majority of state-run schools in Ireland having a Catholic ethos12, lesbian parents expressed concern about sending their children to traditional same-sex Catholic institutions, and made special efforts to locate a multi-denominational school for their children. In comparison, Swedish participants in Ryan-Flood’s study, took for granted that their children would attend the local state-run school, as schools are run on a secular basis in Sweden (Ryan-Flood 2009). Guidance for educational professionals from the US, on the issues for LGBT parents in the school system, encourage

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12 In a 2004 Equality Authority Report, Diversity at School, 92% of all primary schools were under Roman Catholic control.
education providers to discard any traditional notions about what a family constellation should be, and instead, define a child’s parents as those people who have both the intention to be parents and who assume the responsibilities and functions of parents (Ryan and Martin, 2000). In Ireland, specific guidelines have been drawn up by the Department of Education / GLEN on Lesbian, Gay and Bisexual Students in Post-Primary Schools: Guidance for Principals and School Leaders, calling for inclusive school policies for LGBT students.

1.6 Conclusion

This chapter has provided an overview of the LGBT parenthood research study, the focus of the research, the methodology used and the role of the LGBT Parenthood Steering Group. It then went on to provide an overview of the research on LGBT parents and prospective parents. This included a review of policy and legislative developments in the area of LGBT parenting rights in Ireland, highlighting the social and legal obstacles which still exist for LGBT people who wish to become parents and the lack of legal recognition and protections for those who are already parents and for their children. While national research on the experiences of LGBT parents is very limited, the themes emerging from the small number of existing studies are consistent with findings from international literature on socio-cultural issues. LGBT people have the same motivation and desire to have children as people who are heterosexual, and having children brought great joy and happiness to their lives.

The knowledge and threat of stigma-related prejudice and discrimination, made the decision to become a parent and the transition to parenthood harder, and this continued as an ongoing concern of parents, not for themselves but for their children. The possibility of negative consequences for children was sometimes used by ex-partners, or by extended family, for their own negative attitudes and treatment of their LGBT family member. However, positive attitudes from children, LGBT parents and ex-partners, and extended family members were also common. The need to establish contact with other LGBT families, and the positive effect this had on children who had grown up with friends with LGBT parents, was also clear.

As few Irish studies exist that specifically explore the issues for LGBT parents and prospective parents, this research aims to address this gap in knowledge and understanding, by examining the circumstances, experiences and needs of LGBT parents and those planning parenthood.
Chapter 2: Profiles of LGBT Parents and LGBT People Planning Parenthood Participating in the Study

2.1 Introduction

This chapter gives an overview of the demographic and socio-economic profiles of the sample of LGBT parents and LGBT people planning parenthood, who participated in the quantitative and qualitative survey. In total, 323 self-identified LGBT parents and LGBT people planning parenthood and living in the Republic of Ireland, completed the anonymous survey. A total of 25 participants participated in in-depth interviews.

Summary Profile of Participants in the Anonymous Survey and In-Depth Interviews

- 323 LGBT people responded to the anonymous survey, of whom 153 were LGBT parents and 170 were LGBT people planning parenthood.
- Twenty-five people participated in in-depth interviews, eighteen were LGBT parents and seven were planning parenthood.

LGBT Parents: Anonymous Survey

- Sexual Orientation: 63% (n=96) were lesbians, 14% (n=22) were bisexual, 9% (n=14) were gay men, 3% (n=4) were heterosexual, 1% (n=1) was questioning / not sure and 3% (N=5) were ‘something else’. In the ‘something else’ category, two respondents identified themselves as queer and one as pansexual. 7% gave no answer.

- Sex / Gender Identity: 83.12% (n=128) had a female identity, 11.69% (n=18) had a male identity, 1.30% (n=2) identified as gender-queer, 1.30% (n=2) as trans-women, 0.65% (n=1) as a trans-man. 0.65% (n=1) was in the ‘something else’ category.

- Sex Assigned at Birth: 83% (n=127) were assigned female at birth and 12.42% (n=19) were assigned male at birth. 4.58% (n=7) gave no answer.

- Relationship Status: 63% (n=96) were in a same-sex relationship, 16.34% (n=25) were single parents, 9.80% (n=15) were in a same-sex marriage or civil partnership, and 5.23% (n=8) were in a heterosexual marriage. Smaller numbers were in a heterosexual relationship, or were separated or divorced.

- LGBT parents tended to be in older age groups, 32.86% (n=50) were 45 years and over, 23.53% (n=36) were in the 40-44 year age group, 15.03% (n=23) were in the 30-34 year age group, 10.46% (n=16) were in the 25-29 year age group and 9.08% (n=15) were in the 35-39 year age group.

- Region of Residence: 49.67% (n=76) lived in Leinster, the majority of whom were based in the greater Dublin area, 28.10% (n=43) lived in Munster, principally in Cork City, 14.38% (n=22) lived in Connaught and 2.61% (n=4) in Ulster. 5.23% (n=8) of respondents chose not to identify the region in which they lived.
- **Type of Location:** The majority of LGBT parents responding to the survey lived in a city or a city suburb - 32.03% (n=49) in a city and 18.30% (n=28) in a suburb. 18.30% (n=28) lived in a rural area and 15.69% (n=24) lived in a town of more than 5,000 inhabitants. 6.54% (n=10) lived in a town of less than 5,000 inhabitants and 4.58% (n=7) in a village. 4.58% (n=7) chose not to specify a location.

- **Highest Educational Attainment:** The majority of respondents had completed postgraduate and 3rd level education, representing 32.68% (n=50) and 22.22% (n=34) of respondents respectively. 18.30% (n=28) had completed some third-level education, 13.73% (n=21) had professional qualifications, 7.84% (n=12) had completed secondary-level school education, 3.27% (n=5) some secondary school education and 0.65% (n=1) had a technical qualification. 1.31% (n=2) chose not to specify an educational attainment.

- **Employment / Principal Status:** 60.84% (n=101) were in full-time, part-time or self-employment. 16.27% (n=27) were full-time parents / carers. 10.04% (n=17) were unemployed and 6.44% (n=11) were students. 3.31% (n=6) were not working because of sickness or disability and 0.60% (n=1) was retired. 1.81% (n=3) did not answer this question.

- **Household Incomes:** 25.49% (n=39) of respondents had household incomes of between €30,000 and €49,999, 24.18% (n=37) had household incomes of €70,000 and over, 22.88% (n=35) had household incomes of between €10,000 and €29,999, 12.42% (n=19) were between €50,000 and €69,999 and 5.88% (n=9) had household incomes of €10,000 or less. 7.19% (n=11) of respondents referred not to declare their household income and 1.96% (n=3) did not answer the question.

- **Medical Card / Health Insurance:** 47.17% (n=75) of respondents had private health insurance, 35.85% (n=57) had a medical card and 15.09% (n=24) had neither insurance nor a medical card. 1.89% (n=3) gave no answer.

**LGBT People Planning to Become Parents: Anonymous Survey**

- **Sexual Orientation:** 52.35% (n= 89) were lesbians, 21.76% (n=37) were gay men, 12.94% (n=22) were bisexual, 2.35% (n=4) were heterosexual, 1.18% (n=2) were questioning / not sure. Of the 4.71% (n=8) who completed the ‘something else’ category, five identified as pansexual, and one as gender-queer.

- **Gender Identity:** 68.42% (n=117) were female, 26.90% (n=46) were male, 2.92% (n=5) were gender-queer, 1.17% (n=2) were trans-men and 0.58% (n=1) was trans-woman.

- **Sex Assigned at Birth:** 68.24% (n=116) stated that their sex assigned at birth was female and 28.24% (n=48) stated that it was male. 3.53% (n=6) gave no answer.

- **LGBT Relationship Status:** 55.30% (n=94) were in a same-sex relationship, 26.47% (n=45) were single, 12.35% (n=5) were in a heterosexual relationship and 12.35% (n=5) were in a heterosexual marriage.

- **Age of Respondents:** Compared to LGBT parents, LGBT people planning parenthood were predominantly in the younger age ranges of between 20 and 34 years. 18.82% (n=32) were in the 20-24 year age group, 22.35% (n=38) were in the 25-29 year age group, and 19.41% (n=33) were in the 30-34 year age group.
Highest Educational Attainment: Compared to LGBT parents, LGBT people planning parenthood had a lower level of educational attainment. 28.24% (n=48) had some 3rd level education, 26.47% (n=45) had completed a postgraduate qualification, 20.58% (n=35) had completed 3rd level education, 10.59% (n=18) had a professional qualification, 8.24% (n=14) had completed secondary-level school education, 4.12% (n=7) had some secondary school education, and 1.18% (n=2) had a technical qualification. 1.31% (n=2) gave no answer.

Region and Place of Residence: 62.94% (n=107), lived in the Leinster region, the majority of whom were based in the greater Dublin area. 20.59% (n=35) lived in Munster, principally in Cork City, 6.65% (n=13) lived in Connaught and 4.71% (n=8) in Ulster. 4.12% (n=7) of respondents chose not to identify the region in which they lived.

Type of Location: The majority of LGBT people planning parenthood lived in a city or a city suburb - 34.12% (n=58) in a city and 23.53% (n=40) in a suburb. 17.06% (n=29) lived in a town of more than 5,000 inhabitants, 10% (n=17) in a rural area, 6.47% (n=11) lived in a town of less than 5,000 inhabitants and 4.71% (n=8) in a village. 4.12% (n=7) chose not to specify a location.

Employment and Principal Status: 63.52 (n=115) were in full-time, part-time or self-employment, 23.2% (n=43) were full-time or part-time students, 5.52% (n=10) were unemployed, 3.31% (n=6) were full time parents / carers and 3.31% (n=6) were not working because of sickness or disability.

Income: The largest household income group, representing 27.06% (n=46) of respondents, was in the household income range of €30,000-€49,999. 22.35% (n=38) had incomes of €70,000 and over, 17.06% (n=29) had household incomes of between €10,000 and €29,999, 11.76% (n=20) had household incomes of between €50,000 and €69,999 and 10.59% (n=18) had household incomes of €10,000 or less. 9.41% (n=16) of respondents preferred not to declare their household income and 1.76% (n=3) did not answer the question.

Private Health Insurance or Medical Card: 49.43% (n=87) of respondents had private health insurance, 25.57% (n=45) had a medical card and 23.30% (n=41) had neither insurance nor a medical card.

2.2 Profiles of Respondents to the Anonymous Survey

The demographic and socio-economic profiles of respondents presented in this section include: type of parenthood, age, region and type of place of residence, gender identity, sexual orientation and sex assigned at birth, parenthood status, educational attainment, income and health coverage (medical card / health insurance).

The anonymous survey was organised into three sections:

- Section 1: completed by LGBT parents and LGBT people planning parenthood (323 respondents).
- Section 2: completed by 153 LGBT parents (including a sample of 45 LGBT parents who completed this section in relation to their experiences as LGBT parents, who were also planning to be LGBT parents).
Section 3: completed by 170 LGBT people planning parenthood (consisting of 125 respondents who were planning parenthood for the first time and 45 LGBT parents who were planning further children and who completed this section of the survey in relation to their future parenting roles).

As a result, the 45 LGBT parents who were also planning to become parents, again completed all three sections of the survey, and this is reflected in the overall numbers for Section 2 (153 LGBT parents) and Section 3 (170 LGBT people planning parenthood).

Type of Parenthood – LGBT Parents and LGBT People Planning Parenthood

For the purposes of the demographic and socio-economic profiles of respondents, the data has been separated into the two samples: LGBT parents and LGBT people planning parenthood. This profile of LGBT parents and LGBT people planning parenthood covers the following:

- Sexual orientation
- Gender or sex identity
- Sex assigned at birth
- Relationship status
- Age of respondents
- Residence by region
- Residence by type of location
- Highest educational attainment
- Employment and principal status
- Income
- Medical card / health insurance cover

2.3 LGBT Parents: Demographic and Socio-Economic Profile

Sexual Orientation

Respondents to the anonymous survey were asked to indicate their sexual orientation. As Chart 1 shows, 63% (n=96) were lesbians, 14% (n=22) were bisexual, 9% (n=14) were gay men, 3% (n=4) were heterosexual, 1% (n=1) was questioning / not sure and 3% (N=5) were ‘something else’. In the ‘something else’ category, two respondents identified themselves as queer and one as pansexual. 7% gave no answer.

![Chart 1: Sexual orientation - LGBT parents](image)
Sex or Gender Identity
Respondents were asked to state their sex or gender identity. As Chart 2 shows, the majority, 83.12% (n=128) had a female identity, followed by 11.69% (n=18) of respondents who had a male identity. 0.65% (n=1) identified as gender-queer, 1.30% (n=2) as trans women, 0.65% (n=1) as a trans man, 0.65% (n=1) was in the ‘something else’ category. One respondent gave no answer to this question.

Sex Assigned at Birth
Respondents were also asked to indicate their sex assigned at birth. Chart 3 shows that the majority, 83% (n=127) were assigned female at birth and 12.42% (n=19) were assigned male at birth. 4.58% (n=7) gave no answer. The answers to this question also reflect the fact that the two trans-women and one trans-man underwent gender reassignment. In this question, one respondent gave two responses to the question, notably a trans-woman who also had given an identity as female.

Relationship Status
The relationship status of LGBT parents is reflected in Chart 4. This shows that the majority of LGBT parents, 63% (n=96), were in a same-sex relationship. This was followed by 16.34% (n=25) who were single parents, 9.80% (n=15) who were in a same-sex marriage or civil partnership and
5.23% (n=8) who were in a heterosexual marriage. Smaller numbers were in a heterosexual relationship, or were separated or divorced.

Age of Respondents
Chart 5 shows that the LGBT parents were predominantly in the older age groups, with 32.86% (n=50) in the 45 years-and-older age group and 23.53% (n=36) in the 40-44 year age group. The next largest age group, representing 15.03% (n=23) of respondents were in the 30-34 year age group, followed by 10.46% (n=16) in the 25-29 year age group and 9.08% (n=15) in the 35-39 year age group.

Region and Place of Residence
All of the LGBT parents responding to the anonymous survey were resident in the Republic of Ireland when they completed it. Chart 6 shows the main place of residence by region. Nearly a half of LGBT parents, 49.67% (n=76), lived in the Leinster region, the majority of whom were based in the greater Dublin area. 28.10% (n=43) of respondents lived in the Munster region, principally in Cork City. A smaller number of respondents lived in Connaught (14.38%, n=22) and Ulster (2.61%, n=4). 5.23% (n=8) of respondents chose not to identify the region in which they lived.
The type of geographic location where respondents resided when they completed the survey, can be found in Chart 7. The majority of LGBT people planning parenthood who responded to the survey, lived in a city or a city suburb, 32.03% (n=49) in a city and 18.30% (n=28) in a suburb. 18.30% (n=28) lived in a rural area and 15.69% (24) lived in a town of more than 5,000 inhabitants. 6.54% (n=10) lived in a town of less than 5,000 inhabitants and 4.58% (n=7) in a village. 4.58% (n=7) chose not to specify a location.

![Chart 6: Residence by region - LGBT parents (n=153)](chart6)

![Chart 7: Residence by type of location - LGBT parents (n=153)](chart7)

**Highest Educational Attainment**

The anonymous survey asked respondents to indicate their highest educational attainment. The majority of respondents, as shown in Chart 8, had completed postgraduate and 3rd level education, representing 32.68% (n=50) and 22.22% (n=34) of respondents respectively. A further 18.30% (n=28) had completed some third-level education, 13.73% (n=21) had professional qualifications, 7.84% (n=12) had completed secondary-level school education, 3.27% (n=5) some secondary school education and 0.65% (n=1) had a technical qualification. 1.31% (n=2) gave no answer.
Employment and Principal Status

The employment / principal status of respondents at the time that the anonymous survey was completed, can be found in Chart 9. This shows, that of those respondents who were in paid employment, 40.36% (n=67) were in full-time paid employment, 7.83% (n=13) were in part-time employment and 12.65% (n=21) were self-employed. 16.27% (n=27) were full-time parents / carers. 7.23% (n=12) were unemployed and 3.01% (n=5) were unemployed and volunteering. 5.42% (n=9) were in full-time education and 1.20% (n=2) were in part-time education. 3.31% (n=6) were not working because of sickness or disability and 0.60% (n=1) was retired. 1.81% (n=3) did not answer this question. A number of respondents, principally those who were part-time students, responded twice to the question.

Income

LGBT parents responding to the anonymous survey indicated their household incomes. Chart 10 shows that the largest household income group, representing 25.49% (n=39) of respondents, was in the €30,000-€49,999 income range. This was followed by 24.18% (n=37) in the €70,000-and-over household income range and 22.88% (n=35) in the €10,000-€29,999 household income range. 12.42% (n=19) had household incomes of between €50,000-€69,999 and 5.88% (n=9) had household incomes of €10,000 or less. 7.19% (n=11) of respondents preferred not to declare their household income, and 1.96% (n=3) did not answer the question.
Private Health Insurance or Medical Card
Chart 11 shows that 47.17% (n=75) of respondents had private health insurance, 35.85% (n=57) had a medical card and 15.09% (n=24) had neither insurance nor a medical card. 1.89% (n=3) gave no answer. Six respondents stated that they had both a medical card and private health insurance.

2.4 LGBT People Planning Parenthood: Demographic and Socio-Economic Profile

Sexual Orientation
LGBT people planning parenthood responding to the anonymous survey were asked to indicate their sexual orientation. Chart 12 that 52.35% (n= 89) of LGBT people planning parenthood were lesbians, 21.76% (n=37) were gay men, 12.94% (n=22) were bisexual, 2.35% (n=4) were heterosexual and 1.18% (n=2) were questioning / not sure. Of the 4.71% (n=8) who completed the ‘something else’ category, five identified as pansexual and one as gender-queer.
Gender Identity and Sex Assigned at Birth

Respondents were asked to indicate their gender identity. As Chart 13 shows, 68.42% (n=117) were female, 26.90% (n=46) were male, 2.92% (n=5) were gender-queer, 1.17% (n=2) were trans-women and 0.58% (n=1) was trans-man. One person identified their gender identity as female and gender-queer.

Respondents were also asked to indicate their sex assigned at birth. As Chart 14 shows, 68.24% (n=116) stated that their sex assigned at birth was female and 28.24% (n=48) stated that it was male. 3.53% (n=6) gave no answer. This data, on the sex assigned at birth, is consistent with the three respondents who made up the trans sample, and who had transitioned from one gender to another.
Relationship Status
The majority of LGBT people planning parenthood responding to the anonymous survey were in a same-sex relationship. As Chart 15 shows, 55% (n=94) were in a same-sex relationship, 27% (n=45) were single parents, 3% (n=5) were in a heterosexual relationship, 12% were in a same sex marriage or civil partnership and 3% (n=5) were in a heterosexual marriage.

Age of Respondents
Chart 16 shows that LGBT people planning parenthood were predominantly in the younger age ranges of between 20 and 34 years. This is not surprising, given that these are the age ranges when people are most likely to be planning parenthood. It is of interest to note that a significant number of LGBT people are planning parenthood in their twenties and thirties. 18.82% (n=32) were in the 20-24 year age group, 22.35% (n=38) were in the 25-29 year age group and 19.41% (n=33) were in the 30-34 year age group.
Highest Educational Attainment

The anonymous survey asked respondents to indicate their highest educational attainment. Chart 17 shows that the highest educational attainment for the majority of respondents, 28.24% (n=48), was some 3rd level education. This is followed by 26.47% (n=45) who had completed a postgraduate qualification, 20.58% (n=35) of whom had completed 3rd level education, 10.59% (n=18) who had a professional qualification, 8.24% (n=14) who had completed secondary-level school education, 4.12% (n=7) who had some secondary school education and 1.18% (n=2) who had a technical qualification. 1.31% (n=2) gave no answer.

Region and Place of Residence

All of the LGBT people planning parenthood who responded to the anonymous survey, were resident in the Republic of Ireland when they completed it. Chart 18 shows the main place of residence by region. Over a half of respondents, 62.94% (n=107), lived in the Leinster region, the majority of whom were based in the greater Dublin area. 20.59% (n=35) of respondents lived in the Munster region, principally in Cork City. A smaller number of respondents lived in Connaught (6.65%, n=13) and Ulster 4.71%, n=8). 4.12% (n=7) of respondents chose not to identify the region in which they lived.
The type of geographic location where respondents resided when they completed the survey, can be found in Chart 19. The majority lived in a city or a city suburb, 34.12% (n=58) in a city and 23.53% (n=40) in a suburb. 17.06% (n=29) lived in a town of more than 5,000 inhabitants, 10% (n=17) in a rural area, 6.47% (n=11) lived in a town of less than 5,000 inhabitants and 4.71% (n=8) in a village. 4.12% (n=7) chose not to specify a location.

Employment and Principal Status
The employment / principal status of the LGBT people planning parenthood can be found in Chart 20. This shows, that of those respondents who were in paid employment, 43.09% (n=78) were in full-time paid employment, 13.81% (n=25) were in part-time employment and 6.63% (n=12) were self-employed. A further 20.44% (n=37) were in full-time education and 2.76% (n=5) were in part-time education. 3.31% (n=6) were unemployed, 2.21% (n=4) were unemployed and volunteering, 3.31% (n=6) were full time parents / carers and 3.31% (n=6) were not working because of sickness or disability.
Income

LGBT people planning parenthood who responded to the anonymous survey, had relatively high incomes. Chart 21 shows that over a half of respondents had household incomes over €30,000 and one-fifth had incomes over €70,000. The largest household income group, representing 27.06% (n=46) of respondents, was in the household income range of €30,000-€49,999. This was followed by 22.35% (n=38) in the €70,000-and-over household income range and 17.06% (n=29) in the €10,000-€29,999 household income range. A smaller number, representing 11.76% (n=20) of respondents, were in the €50,000-€69,999 household income range, and 10.59% (n=18) of respondents had household incomes of €10,000 or less. A further 9.41% (n=16) of respondents preferred not to declare their household income, and 1.76% (n=3) did not answer the question.

Private Health Insurance or Medical Card

Chart 22 shows that 49.43% (n=87) of respondents had private health insurance, 25.57% (n=45) had a medical card and 23.30% (n=41) had neither insurance nor a medical card. 1.70% (n=3) gave no answer. Six respondents stated that they had both a medical card and private health insurance.
2.5 Profiles of Participants in the In-Depth Interviews

In total, twenty-five people participated in the in-depth qualitative interviews; this included three couples. Eighteen of the participants were LGBT parents, and seven were planning parenthood.

Age Profile
Of the interview participants, the mean age was 41.4 years, with the youngest participant aged 29 years and the oldest participant in their mid-60s.

Sexual Orientation
Six of the interview participants identified as gay, eleven identified as lesbian, six as bisexual, one as questioning and one participant preferred not to answer this question.

LGBT Parents’ Gender and Gender Assigned at Birth
Almost one-third of the interview participants were male, the remaining two thirds were female. This included six female participants who had a transgender history, and who were assigned a male gender at birth.

LGBT Parents’ Relationship Status
Just over one half of the participants were in a same-sex relationship, and of these, five were in registered civil partnerships. Three of the participants who identified as bisexual, were in opposite-sex marriages, and one participant who was a male-to-female trans woman, was in a marriage which was previously opposite-sex. One-quarter of participants were single parents, two participants were divorced and one was separated.

Annual Household Income
Just under a half of all participants had an annual household income of €70,000 or more. One participant had an income of under €10,000 per annum; two participants did not disclose their income; while approximately equal numbers of the remaining participants fell into the income brackets of between €30,000 to €49,999 and €50,000 and €69,999.

Medical Card or Private Health Insurance
One-third of participants had private health insurance and one-quarter had a medical card. The remaining ten participants did not have either a medical card or private health insurance.
**Location where Participants Live**
About two thirds of the interview participants were living in a city or a suburb of a city, with about a half of these living in Dublin. The remaining participants were living in six other counties in the Republic of Ireland. Four participants were living in a town with a population of 5,000 or more, and three participants were living in rural areas outside of a village.

**Employment Situation**
Of the 25 participants interviewed, 18 were in full-time paid employment and four were in part-time paid employment. One participant was working in the home full-time, one was a part-time student and one participant was retired.

**Educational Attainment**
Just over two thirds of all interview participants had completed 3rd level and / or had a professional qualification, and of these, seven had also completed postgraduate level. Of the remaining one-third of participants, one participant was an early-school leaver having attended second level for only a short time, while all others had completed second level.
PART 2: LGBT PARENTS

Part 2 of the report covers the situation and experiences of LGBT parents, which are detailed in Chapters 3-7.

Chapter 3: LGBT family formation and parental status
Chapter 4: Being ‘out’ and gaining support as LGBT parents
Chapter 5: Access to services for LGBT parents
Chapter 6: LGBT parents’ experiences of discrimination and negative attitudes
Chapter 7: Legal and other changes to improve the lives of LGBT parents in Ireland

This draws on the 153 responses given to the anonymous survey and from the eighteen in-depth interviews with LGBT parents.
Chapter 3: LGBT Family Formation and Parental Status

I think I didn’t really know what love was until I became a parent. Now I know what real love is both for my child and for my partner, because having a child brought us closer and having that bond and responsibility of having a family is really strong. (08, Bisexual father)

3.1 Introduction and Summary

This chapter examines the family formation and parental status of the 153 LGBT parents who responded to the anonymous survey. It looks at how LGBT parents became parents and their pathways to parenthood, their biological status, their legal status and their parental roles and relationships. The chapter also draws on the experiences of the eighteen LGBT parents, who participated in the in-depth interviews.

Summary

- LGBT parents had a range of different pathways to becoming parents. Over one half of the sample of LGBT parents had a child / children from a previous opposite-sex relationship. This is followed by a child / children through assisted human reproduction (AHR) in a private clinic, by AHR from a known donor and a child / children from an LGBT parent’s relationship that was previously opposite-sex. Smaller numbers of the sample had a child / children from an LGBT parent’s relationship that was previously opposite-sex, and also had a child / children through adoption, fostering and surrogacy.

- The largest group of respondents to the anonymous survey were biological parents, and they predominantly lived with a partner. Nearly one half of the sample were either a sole legal guardian or had joint guardianship, and nearly one-fifth had no legal status as parents. Those with no legal status were predominantly lesbians.

- Some LGBT parents had multiple parenting roles including children from previous opposite relationships, children from LGBT parents’ same-sex relationships and children who were adopted or fostered in one family unit. Although the majority of parents had their children living with them on a full-time basis, some shared parenting across two households.

- Over one-third of respondents to the anonymous survey parented with their partners, nearly one-fifth parented alone or parented with an ex-partner. Smaller numbers parented with a partner and other people.

- Many of the parents who participated in the in-depth interviews, spoke about their strong desire to become parents from early adulthood. For some of the interviewees, their LGBT identity was initially a barrier to parenting, as they did not know of any other LGBT parents, and several spoke of the loss that they felt at the prospect of not having children.

- Of the LGBT parents who did not live with their children, there were generally positive experiences of involvement as parents in decision-making and in having regular access to children. A small number of trans parents did not have involvement in the lives of their children, as a result of access being denied to them.

- Sexual orientation or gender identity was considered to have been a factor - or possibly a factor - in being denied custody for up to nine LGBT parents who responded to the anonymous survey.
3.2 Biological Status of LGBT Parents

a) Anonymous Survey

The majority of the LGBT parents responding to the survey were biological parents. As Chart 23 shows, of the 153 LGBT parents, 60% (n=92) were biological parents, 16% (n=25) were non-biological parents and 8% (n=12) were both biological and non-biological parents. A further 16% of respondents (n=24) did not identify if they were biological or non-biological parents.

Overall, non-biological parents tended to be more represented in younger age groups than biological parents, and there were no significant differences by region in which the respondent parent lived.

When this is looked at by sexual orientation, it is found that gay fathers and bisexual parents - responding to the anonymous survey - were more likely to be biological parents than was the case with lesbian mothers:

- 78.57% (n=11) of gay fathers were biological parents and 21.4% were non-biological parents.
- 63.64% (n=14) of bisexual parents were biological parents, 9.09% (n=2) were non-biological parents and 4.55% (n=1) were biological and non-biological parents. 22.73% (n=5) gave no answer.
- Just over a half (58.33%, n=56) of lesbian mothers were biological parents, 15.63% (n=15) were non-biological parents and 10.42% were biological and non-biological parents. 15.63% (n=15) gave no answer.
- 100% (n=3) of heterosexual parents were biological parents, as was also the case of the one person in the questioning / not sure category.
- In the ‘something else’ category, 33.33% (n=2) were biological parents, 33.33% (n=2) were non-biological parents and 16.67% (n=1) was a biological and non-biological parent. 16.67% (n=1) did not answer the question.
3.3 Pathways to Parenthood

a) Anonymous Survey

LGBT parents responding to the survey had multiple pathways into parenthood. Chart 24 shows that the most common pathway into parenthood for LGBT parents was a child / children from a previous opposite-sex relationship. This is followed by a child / children from AHR in a private clinic or known donor. Small numbers had become parents from adoption, fostering and surrogacy.

Child / Children from a Previous Opposite-Sex Relationship
Just over one half (52.94%, n=81) of LGBT parents had their child / children through previous opposite-sex relationships. This was most common amongst the sample of gay fathers (representing 64.29%, n=9 of gay fathers), and was the case for all trans parents in the sample (n=4) and one gender-queer person. A further 51.04% (n=49) of lesbian mothers and 50% (n=11) of bisexual parents, had their children from a previous opposite-sex relationship.

Child / Children through Assisted Human Reproduction (AHR)
One-fifth (n=31) of LGBT parents had their child through AHR in a clinic and 15% (n=23) by AHR through a private known-donor arrangement. Lesbians were the largest group of parents who had their children through AHR in a clinic, representing 23.96% (n=23) of all lesbian mothers, compared to just two bisexual parents and one gay father. This was also the case with AHR through a private known-donor arrangement, where 14.58% (n=14) of respondents were lesbian mothers, compared to one bisexual parent and two gay fathers.

Partner of a Parent with Child / Children from a Previous Relationship
13.75% (n=21) of LGBT parents were partners of parents who had a child / children from a previous relationship, which, in the majority of cases, was a previous same-sex relationship. This included 10% of lesbian mothers (n=10), 40% (n=4) of respondents in the ‘something else’ category, one bisexual parent and one gay father.

Child / Children from an LGBT Parent’s Relationship that was Previously Opposite-Sex
7.87% (n=12) of respondents had a child from a relationship that was previously opposite-sex. This included 18.18% (n=4) of bisexual parents, one gay father, two lesbian mothers and two trans parents.
Child / Children through Fostering

7.19% (n=11) of LGBT parents were foster-parents, of whom three were gay fathers, three were lesbian mothers and four were in the ‘something else’ category and one did not respond.

Child / Children through Adoption

The numbers who became parents through adoption were very low, and this reflects the legal barriers to national and international adoption for LGBT parents. Just 6.54% (n=10) of LGBT parents had adopted a child. This included 9.09% (n=2) of bisexual parents, 14.29% (n=2) of gay fathers, 2.08% (n=2) of lesbian mothers and a further 20% (n=2) of those in the ‘something else’ category.

Child / Children through Surrogacy

A small number - 4.58% (n=7) - of LGBT parents, had a child through surrogacy, comprising two gay fathers, one lesbian mother and two in the ‘something else’ category.

b) In-Depth Interviews

The rich tapestry of parenting roles and the diversity of ways by which LGBT people become parents, were evident in the interviews. Just over one half of the participants were in a same-sex relationship, and of these, five were in registered civil partnerships. Three of the participants who identified as bisexual, were in opposite-sex marriages, and one participant, who was a male-to-female trans woman, was in a marriage which was previously opposite-sex. One-quarter of participants were single parents, two participants were divorced, and one was separated. Six of the interviewees had children within a same-sex relationship, and had conceived their children through AHR from a known donor, AHR in a fertility clinic either from a known or anonymous donor, or by fostering. Two parents had children through a combination of pathways.

This lesbian mother’s parenting situation is an example of the diversity of parenting relationships and parenting roles:

My partner has five children from a previous heterosexual relationship, two of the children live with us part-time, and we have one child aged two that we had together. (11, Lesbian parent)

LGBT Identity Perceived as a Barrier to Parenting

Many of the LGBT interviewees who had children within a previous opposite-sex relationship, spoke of their internal struggle with their sexuality or trans identity, and how they initially convinced themselves that they could make a go of living a ‘straight’ life. The absence of LGBT role models meant that for one lesbian parent, marriage presented her with the best chance of having a ‘normal’ life, particularly in relation to having children:

I did actually plan on becoming a parent, even though I was only 18. I wanted a family, and, although I did think I might be gay, I didn’t think it was a possibility, as I didn’t know one other gay person in the whole world. So I didn’t think it was possible. I thought that it was all in my head, so I thought I will go ahead and have a child. (2, lesbian parent)

A trans parent also expressed her desire to be a parent and to live a ‘normal’ life:

I remember very strongly the day that I felt I would love to have a child. My best friend had had a child, and I was holding his son in my arms . . . and I thought, God I would love a child! And that was the first time I consciously thought I would love a child. But I was still planning to transition, until I met my wife and I fell in love, and then I put all the
evidence together. I had fallen in love with a woman. I am a man, maybe I am meant to be a man, God made me a man. I will do the man thing, then maybe we can have kids, because I would like that too. (19, trans parent)

Decisions about Parental Roles and who will be the Biological Parent or Legal Parent
The majority of lesbian interviewees stated that the decision around biological parentage was easily made, often because one of the partners did not have a strong desire to be a birth parent. This can be seen in the comment from a bisexual mother

My partner doesn’t have the urge to physically have babies and I love it [being pregnant]. (20, bisexual mother)

Irish adoption law restricts joint adoption to married, opposite-sex couples only; thus the interviewees who adopted had to decide which partner would go forward as the sole applicant, and therefore would be the legal parent if they were successful. Ultimately, this decision was based on practical considerations in terms of which partner had the best prospect of success in the assessment process. As one lesbian parent stated

We could apply to adopt as a single applicant and be assessed as a couple similar to cohabiting opposite-sex couples . . . So we decided that my partner would go forward as a single applicant, because I was divorced and so we thought that might go against us. (18, lesbian parent)

Choosing a Donor
Four of the female interviewees had become parents using AHR. Three of the parents had considered using a known donor and two conceived through this pathway. Both parents who conceived using a known donor reasoned that, despite the emotional and practical complexities of having a known donor, that this would be the best thing for the child.

We talked about finding a known donor in Ireland, it would be nice that my child could - when she was older - find him, and put a name and face to him. (11, lesbian mother)

I always thought about having a known donor as my ideal . . . at least like an uncle, that they could refer to, and that they know, and they would have full knowledge of their background. (20, bisexual mother)

The other parent who had considered this option, explained that having a third person involved in the child’s life, with the prospect that the donor might want increased contact or could fight for custody, felt like too great a risk to their family’s stability, and therefore, she and her partner opted for an anonymous donor in the end.

3.4 Legal Status of LGBT Parents

a) Anonymous Survey
LGBT parents had a legal status only if they were biological parents. All parents were asked to identify their legal status. Of the 117 LGBT parents who responded to the question:

- Nearly one-third, 33.17% (n=48) of LGBT parents had a parental status of sole legal guardian.
- 18.30% (n=28) were joint legal guardians.
- 9.80% (n=15) had joint custody with either a biological parent or an adoptive parent.
- 15.69% (n=24) had no legal status as parents, despite all of them having active parenting roles.
The legal status of LGBT parents by the sexual orientation of respondents shows that:

- Bisexual parents were predominantly either joint legal guardians or sole legal guardians (36.36%, n=8 and 22.73%, n=5 respectively).
- Gay fathers predominantly had joint custody with a biological or adoptive parent (36.36%, n=8) or joint legal guardianship (22.73%, n=5).
- Lesbian mothers were predominantly sole legal guardians (38.54% n=37), while a sizeable number had no legal status (17.71%, n=71), even though they were actively parenting. 13.54% (n=13) were joint legal guardians with the father of a child as a result of a previous opposite-sex relationship.
- The small sample of LGBT parents in the ‘something else’ category, included three LGBT parents who had sole legal guardianship and two who had no legal status as a parent. In this category, trans parents responding to the question, had a legal status as either a joint legal guardian (n=1) or joint custody (n=1).

b) In-Depth Interviews

The majority of lesbian parents interviewed, were the biological parents of their children and were the sole legal guardians. One lesbian parent had joint guardianship of her two children born in a previous opposite-sex relationship, but had no legal relationship to her other two children from a lesbian relationship, while one lesbian parent had no legal status as a non-biological parent.

Of the three gay fathers, two had their children from previous opposite-sex marriages. They had joint legal guardianship, and since their marriages had ended, had shared custody of their children. The third gay father, who had a child through donating sperm to a lesbian couple, had no legal status as a parent, and was not named on the child’s birth certificate, although he had been given the option by the birth parent to be named on the birth certificate, if he had chosen to do so.

The six trans parents interviewed, had children from a previous opposite-sex marriage and were joint legal guardians. Five of the trans parents interviewed were separated from their spouses, and had various levels of custody and access arrangements. Three had full or shared custody of one or more of their children. Two parents had no access to their children. One had been denied access by the courts, while the second had a court-ordered access arrangement, but was prevented from seeing her children by her ex-partner, and was waiting for a further court hearing to challenge this breach of the access order.

Three of the bisexual parents interviewed were in opposite-sex marriages, and had joint legal guardianship of their children. The bisexual participant in a same-sex relationship, was the biological parent of her children, and had sole legal guardianship.

3.5 LGBT Parents: Parental Roles and Relationships

a) Anonymous Survey

The diversity of LGBT parental roles and relationships is reflected in Chart 25. LGBT parents were asked in the anonymous survey to identify with whom they parented.
- Just over one-third, 37.9% (n=58), of LGBT parents, parented with their partner.
- 17.65% (n=27) parented alone.
- 17.65% (n=27) parented with an ex-partner.
- 2.61% (n=4) parented with an ex-partner and others.
- 5.23% (n=8) parented with a partner and other people.
- Just one LGBT parent was a parent with another person/people who was not their partner or ex-partner.

When looked at by the sexual orientation of LGBT parents:

- Bisexual parents predominantly parented with their partner (45.45%, n=10).
- Gay fathers were more likely to parent with an ex-partner, representing 35.71% (n=5) of gay fathers answering this question. This is followed by 28.57% (n=4) of gay fathers who parented with their partner. Two gay fathers parented with others.
- Lesbian mothers predominantly parented with their partners, representing 35.42% (n=34) of lesbians answering this question. This is followed by 19.79% (n=19) who parented alone, and 18.75% (n=18) who parented with an ex-partner.
- One trans parent parented with their partner, and one parented with their ex-partner.
- Gender-queer parents predominantly parented with their partner (n=3).

### 3.6 Living Arrangements of LGBT Parents

#### a) Anonymous Survey

The survey sought to identify the different living arrangements of LGBT parents. These are categorised into four different types: (1) living with partner and children; (2) living alone with partner and children; (3) living with partner, alone and/or others and parenting part-time; and (4) no parenting role/children grown up and left home.

#### Living with Partner and Children

The majority, 41.18% (n=63), of LGBT parents, lived with their partner and children. When looked at by the sexual orientation of LGBT parents, 45.45% (n=10) of bisexual parents lived with their partner and child/children, followed by 43.75% (n=4) of lesbian parents, 66.67% (n=2) of heterosexual parents, and 33.3% (n=2) of those answering in the ‘something else’ category.
Living Alone with Children
One-fifth (20.26%, n=31) of LGBT parents lived alone with their children. This included 23.96% (n=23) of lesbian mothers, 18.18% (n=4) of bisexual parents, one heterosexual parent, no gay fathers, and a further two in the ‘something else’ category.

Living Alone, with a Partner or Others, and Parenting on a Part-Time Basis
A smaller number of LGBT parents parented on a part-time basis by sharing childcare with others that they did not live with. This included nine LGBT parents who lived alone and parented part-time, seven LGBT parents who lived with their partner and parented part-time, and two parents who lived with other people and parented part-time.

Parenting but Not Living with Children / Children Grown Up and Left Home
A further ten parents had grown-up children who had left home, and eight parents, who did not live with their children, had a parenting role.

b) In-Depth Interviews
Exactly a half (n=9) of the interviewees lived with their partner and children full-time. Of the remaining nine LGBT parents, three lived with a new partner, and had shared custody of their child / children. Three were single parents, but had one or more children living with them full-time or part-time. One LGBT parent lived with his new partner and saw his children regularly, although they did not live with him. Two parents lived alone, and had no contact with their children.

3.7 Number and Ages of Children

a) Anonymous Survey
As Chart 26 shows, the majority of LGBT parents responding to the survey, had one child (40.52%, n=62). 29.41% (n=45) had two children, 11.76% (n=18) had three children, 5.88% (n=9) had four children, and one respondent had five children (this is based on a total of 135 parents who responded to this question).

Gay men and heterosexual parents were likely to have one child; lesbian parents were more likely to have one or two children; while bisexual parents were most likely to have two or more children.

The ages of children parented by LGBT parents were as follows: thirty-five children were under the age of three years, thirty-nine were between the ages of three and five years, eighty-two children were between the ages of five and twelve years, fifty-one were between the ages of twelve and eighteen years, and sixty-five were over the age of eighteen years (this was based on 137 responses regarding 272 children).
b) In-Depth Interviews

The majority of LGBT parents interviewed, had between one and three children, with three interviewees having four or more children. The children’s ages ranged from six weeks to adult children. However, the majority of children were under 18 years of age.

3.8 LGBT Parents who do not live with their Children

a) Anonymous Survey

Parents not living with their children, had a diversity of roles and relationships with them. The questions for this group, asked respondents about their involvement and participation in decision-making about their child/children, and about their parenting relationships in relation to legal custody, access and contact with their child/children, contact with the child/children’s immediate family, and whether maintenance and financial support were provided.

As Chart 27 shows, of the seventeen LGBT parents responding to this question, the majority, 70.59% (n=12) had regular access, and just over a half, 53.33% (n=8), had legal custody/access. 60% (n=9) had regular contact with the child’s immediate family, and 47.06% (n=8) provided maintenance and financial support for the children. Four respondents (23.53%) stated that they did not have regular contact with their child/children.
Overall, there were higher numbers of positive experiences of parenting relationships expressed by parents not living with children, than negative experiences. Nearly a half, 43.48% (n=10), had a positive experience of participation in decision-making in areas such as the child’s welfare and schooling. A smaller number, 17.39% (n=4), had some positive / some negative experiences, while 17.39% (n=4) had negative experiences of participation in decision-making. Just over a half, 52.17% (n=12) had a positive experience of their relationship with their child / children, and nearly a half 47.83% (n=11) had a positive relationship with the child / children’s immediate family. Three respondents stated that they no longer had a direct parenting role, because their child / children were grown up and had left home. In the case of one trans parent, there was no cooperation with a former partner.

Overall, it is interesting to note that LGBT people in older age groups were more likely to have no regular contact with their children, than was the case with younger LGBT parents.

Of twenty-seven responses to the question about whether their sexual orientation and / or gender identity had influenced a custody decision made against them, five respondents stated that this was the case. Seventeen respondents did not believe this to be the case. A further four did not know, and one stated that it was a possibility. Of those who believed that their sexual orientation / gender identity had influenced a custody decision, four were lesbians and one was a gay man.

### 3.9 Conclusion

This chapter has shown that a significant number of parents responding to the anonymous survey and participating in interviews, experience difficulties and challenges in their parenting roles. This arises because of a lack of legal rights afforded to 17% (n=26) of respondents to the survey. In some cases, LGBT parents have both a biological and a non-biological status to their parenthood, and so - as documented in one of the interviews - parents may have legal rights to some of their children and not to others.

The anonymous survey found that the majority of LGBT parents, and particularly gay fathers and trans parents, had their child / children from a previous opposite-sex relationship. While a half of lesbian mothers had their child / children from a previous opposite-sex relationship, they were the largest group of parents who also became parents through AHR in a private clinic or through a known donor. There was a smaller number (16%, n=25), of non-biological parents
responding to the survey, and it is of interest to note, that 13.75% (n=21) of respondents were the partners of a parent with a child/children from a previous relationship. The low numbers of LGBT parents who have become parents through fostering, adoption and surrogacy, indicate that legal barriers are a major factor limiting LGBT parents in these pathways to parenthood.

Although the majority of respondents to the survey and in the interviews, parented with their partners, the survey gives evidence of different types of parenting relationships, including parenting with an ex-partner, and parenting with a partner and others. While bisexual parents and lesbian mothers predominantly parented with their partners, gay men and trans parents were more likely to parent with an ex-partner. This is also the case with the living arrangements of LGBT parents, where a larger number of bisexual parents and lesbian mothers lived with their partners and children, or lived alone with their children, than was the case for gay fathers and trans parents.

The survey found that those not living with their children, had developed good relationships with their children, and had positive experiences of participation in their lives. However, in the cases of one trans parent in the survey and one who was interviewed, there was no cooperation with a former partner, and access had been denied.

Family formation amongst LGBT parents, results in a rich tapestry of parenting roles, relationships and family life in Ireland today. The findings suggest that there are three different types of overlapping parental relationships in LGBT families:

- LGBT parents who have had children in a previous opposite-sex relationship that ended after one or both parents had ‘come out’. In the case of a parent who has assumed a new gender identity, or identified as having a transgender status, parenting roles often continue either within the existing relationship, in a new relationship or as a separated parent. In the case of a lesbian mother, gay father or bisexual parent who has a child from a former opposite-sex relationship, joint parenting often continues to take place with an ex-partner.

- LGBT parents who had children as an LGBT person. In an Irish context, legal rights are only afforded to the biological parent, or in the case of a named father who has acted as a donor and takes on a parenting role, although not necessarily living with the biological mother.

- Non-biological LGBT parents whose parental relationships are affected by a lack of legal rights, and include the co-parent in a couple where a child has been jointly planned and a step-parent takes on a new parental role in a new relationship.

The resulting complex and diverse family formations and multiple parenting relationships, include parenting relationships involving more than two adults who may, or may not, have a biological relationship to the child/children, parenting with ex-partners and step-parenting with new partners who have children from previous relationships, parenting taking place in more than one household, parenting on a full-time or part-time basis and donor parents who have full, partial or no parenting roles.

The next chapter looks at being ‘out’ as an LGBT parent and the types and levels of support that LGBT parents receive in their parenting roles.
Chapter 4: Being ‘Out’ and Gaining Support as LGBT Parents

...it is fantastic to see my children grow up, it is fantastic for me to be at ease with myself for the first time ever, and to see such wonderful things. It can’t be any more positive and they are my inspiration. They kept me going; they kept me alive; they keep me living; and I am just overwhelmed with happiness that they are in my life. (17, trans parent)

4.1 Introduction

This chapter looks at the evidence from the anonymous survey and the in-depth interviews of LGBT parents’ experiences of being ‘out’ as LGBT parents. It goes on to discuss the findings on the types and levels of support that LGBT parents receive in their parenting roles. Levels of support provided to LGBT parents were closely related as to whether or not an LGBT parent is ‘out’.

- The majority of respondents to the anonymous survey were ‘out’ in the different parts of their lives as LGBT parents. Of the categories in which LGBT people were ‘out’ as parents, the highest numbers were in relation to being ‘out’ to immediate family members, followed by being ‘out’ to friends. Being ‘out’ to neighbours and friends were the categories where respondents were least likely to be ‘out’.

- All interviewees were ‘out’ to their children and immediate family members. ‘Coming out’ was not without its difficulties, and the difficulties trans parents had in ‘coming out’ to children and family members, were the most severe. When looked at across eleven categories of support, a lot of support was received by 20% (n=22) of respondents, 28% (n=29) received some support, 30% (n=32) received no support, and it was not relevant for 22% (n=23) of respondents.

- A high proportion of LGBT parents experienced acceptance by their children, and the interviewees showed how care was taken in ‘coming out’ to their children. However, children’s experiences of their parents’ ‘coming out’, did sometimes result in social stigma and children experiencing bullying in school and negative reactions from other parents.

- A low number of LGBT parents received support from LGBT organisations and support groups, neighbours, local community organisations and work colleagues. In particular, the in-depth interviews show the importance of support from LGBT organisations, particularly in supporting LGBT parents who feel isolated from the community.

- Trans parents were the least likely to receive support, suggesting that some trans parents experience isolation, rejection and a lack of support from family, friends and work colleagues in their parenting roles.

4.2 Being ‘Out’ to Children, Family Friends, Local Community and Work Colleagues

a) Anonymous Survey

The anonymous survey asked respondents to indicate who they are ‘out’ to, and revealed that a high proportion were ‘out’ as LGBT people in different parts of their social and public lives as parents. This is reflected in Chart 28.
The majority of respondents were much more likely to be ‘out’ to their children, family, partner’s family, friends, local community and work colleagues, than not. These are listed below under each category, starting with the highest numbers who were ‘out’ and finishing with the lowest numbers.

**‘Out’ to Immediate Family Members**
- 82.35% (n=126) were ‘out’ to immediate family members, 5.23% (n=6) were ‘out’ to some immediate family members, and 7.84% (n=12) were not ‘out’ to immediate family members. This was not relevant for 3.27% (n=5) of respondents, and 1.31% (n=2) did not answer.

**‘Out’ to Friends**
- 76.47% (n=117) were ‘out’ to friends, 15.03% (n=23) were ‘out’ to some, and 1.31% (n=2) were not ‘out’ at all. This was not relevant for 1.96% (n=3) of respondents, and 5.23% (n=8) did not answer.

**‘Out’ to Children**
- 72.55% (n=111) of LGBT parents were ‘out’ to their child / children, 4.58% (n=7) were ‘out’ to some of their child / children, and 11.76% (n=18) were not ‘out’ to their child / children. This was not relevant for 9.15% (n=14) of respondents, and 1.96% (n=15) did not answer.

**‘Out’ to Informal and Formal LGBT Groups**
- 71.90% (n=110) were ‘out’ to informal and formal LGBT groups, 5.88% (n=9) were ‘out’ to some, and 6.54% (n=10) were not ‘out’. This was not relevant for 9.15% (n=14) of respondents, and 6.54% (n=10) did not answer.

**‘Out’ to Partner’s Immediate Family Members**
- 66.67% (n=102) were ‘out’ to their partner’s immediate family members, 3.92% (n=6) were ‘out’ to some, and 9.15% (n=14) were not ‘out’. This was not relevant for 15.03% (n=23) of respondents, and 5.23% (n=8) did not answer.

**‘Out’ to Some or All of Extended Family Members**
- 61.44% (n=94) were ‘out’ to some or all of their extended family members, 15.69% (n=24) were ‘out’ to some, and 15.03% (n=23) were not ‘out’. This was not relevant for 5.88% (n=9) of respondents, and 1.96% (n=3) did not answer.
‘Out’ to Work Colleagues
• 59.48% (n=91) were ‘out’ to their work colleagues, 15.03% (n=23) were ‘out’ to some, and 11.76% (n=18) were not ‘out’. This was not relevant for 7.84% (n=12) of respondents, and 5.88% (n=9) did not answer.

‘Out’ to Some or All of their Partner’s Extended Family Members
• 54.90% (n=84) were ‘out’ to some or all of their extended family members, 7.19% (n=11) were ‘out’ to some, and 16.99% (n=26) were not ‘out’. This was not relevant for 16.99% (n=26) of respondents, and 3.92% (n=6) did not answer.

‘Out’ to Neighbours
• 53.59% (n=82) were ‘out’ to their neighbours, 18.30% (n=28) were ‘out’ to some, and 17.65% (n=27) were not ‘out’ to their neighbours. This was not relevant for 5.86% (n=9) of respondents, and 4.58% (n=7) did not answer.

‘Out’ in the Local Community
• 51.63% (n=79) were ‘out’ in their local community, 16.34% (n=25) were ‘out’ to some, and 16.99% (n=26) were not ‘out’ to people in the locality. This was not relevant for 10.46% (n=16) of respondents, and 4.58% (n=7) did not answer.

Trans Parents and their Relationships with their Children
The anonymous survey addressed the particular circumstances of trans parents and their relationships with their children. Four trans parents responded. All four were ‘out’ to their child / children. Three stated that they were accepted by their child / children, and one stated that she was somewhat accepted. Although the child’s other family members were aware that all four were trans, only one trans parent was accepted as trans by the child’s other family members, compared to three who were not. Two trans parents stated that they had hidden their trans identity from their children in the past. The other two had not. In one case, a trans parent had had conditions put in place for being with her child.

b) In-Depth Interviews
Similar to the findings of the anonymous survey, a high proportion of interviewees were ‘out’ in different parts of their social and public lives. In the majority of cases, LGB parents experienced no significant difficulties in being ‘out’, whereas some trans parents experienced some profoundly distressing experiences resulting from transphobia.

As one lesbian parent stated, she was ‘out’, and had experienced no bad reactions

I am ‘out’ to everyone in the world, I have always been crap at being in the closet. Everyone knows that I am gay, and I have never had a bad reaction to the fact that I am gay. (012, lesbian mother)

The issue of ‘coming out’, and the subsequent acceptance or rejection by their families, dominated the interview discussions with those parents who had a transgender history. All of the interviewees were male-to-female trans women, and all had had their children in previous opposite-sex marriages.

Being ‘Out’ to Children
For those parents who had children from LGBT parents or previous opposite-sex relationships, ‘coming out’ to their children about their LGBT sexuality was something that they had struggled with and had given a lot of thought to, before telling their children. As one gay father stated:

*It is not a day you will forget, and again, I am lucky, as I have knowledge and a background in this type of thing. But even then, it isn’t easy when it is about you. In a way, you put more pressure on yourself because you think you should be able to do this because you have a background in it.* (04, gay father)

All the interviewees reported having very positive relationships with their children following ‘coming out’ to them, but described how their children’s ages and own personalities influenced how well they coped initially with the news. One lesbian parent talked about the positive reaction from her child:

*I told him maybe four years ago, and he was brilliant about it. He said, ‘Mammy, I don’t care what you are. I love you.’* (02, lesbian mother)

Another gay father spoke about the acceptance of his children:

*My daughter was always completely okay with it from the word go, but the boys took a bit of time. It’s not that they weren’t okay with it in the family setting. They were completely fine, but in a public space it took a bit longer. Perhaps they were 17 or 18 before they were completely okay. But it has always been about the outside world dealing with it and not about the family dynamics.* (04, gay father)

A small number of interviewees described how, while their children’s initial acceptance was very positive, the societal stigma associated with being LGBT or actual experiences of bullying, had caused some children to have a backlash against their parents. As one lesbian parent said:

*My partner had loads of trouble. She told her daughter when she was about five, but then when she was a teenager, she got loads of trouble in the neighbourhood, even though my partner didn’t go around telling everyone for that reason. Even so, some neighbours’ kids started bullying her daughter, and then her daughter really gave her mother a hard time because of everything.* (02, lesbian mother)

For the three bisexual interviewees who were parenting in opposite-sex relationships, their sexuality was not as obvious as for those parents in same-sex relationships. However, two had ‘come out’ to their children, and the third participant intended to once his child was old enough to understand. As one bisexual parent stated:

*The kids know that I am bisexual, and as they grow that changes for them. So what sexuality means to you when you are four changes when you are ten, and we talk about it in terms of romantic feelings rather than sexual encounters.* (03, bisexual father)

The majority of trans interviewees had held back on their decisions to live as female for many years, because of wanting to protect their children or keep their family together for as long as possible. All of the interviewees described long periods of anxiety over ‘coming out’ to their children, and the majority described fears of rejection and the problems that could arise for the children from having a trans parent. As two interviewees stated, the fear and anxiety that this posed for them as trans parents were overwhelming:
I was absolutely terrified telling them why it [trans identity] was going to be the end of my relationship with my sons. Okay, it was scary. (19, trans parent)

I needed to do this and sort this out the best way I know how. I was thinking about them [the children] 24 hours a day. I was thinking about nothing else, because I couldn’t think about anything else. (15, trans parent)

Interestingly, despite not being able to ‘come out’ to their children, these interviewees felt that the children already had a good sense of their parents’ trans identity. As two trans parents stated:

The smaller ones - amazingly enough - were quicker than any of them, because [youngest child] would say, ‘Oh! I would love to comb your hair and I would love to call you [a girl’s name], would that be ok?’ (15, trans parent)

In terms of the kids, they knew exactly what was going on. I think that old people and young people might say, ‘Oh! Don’t tell them, they wouldn’t understand’. I think often they are the ones that completely understand, they are not judgemental. (14, trans parent)

In the case of another trans parent:

Our eldest child came up with it. He had figured it all out, which I thought was incredibly understanding of him at the time, that I was his Dad. I was always going to be his Dad, but I was going to be a woman. Very matter of fact... (19, trans parent)

Despite the anxiety about ‘coming out’, or the difficult circumstances around disclosure, all of the interviewees who had continued access to their children had a positive and supportive relationship with them. Some of the children’s initial reactions though, were not so positive, and they took some time to come to terms with their parents’ new gender identity, as was the case for the following three trans interviewees:

I only told her about myself [trans identity] five years ago, and since then, the relationship has developed very positively... I won’t say that there haven’t been issues, or there haven’t been problems when I initially told her about myself. You know her first question was, ‘Well, who is going to walk me down the aisle?’ Now that was a difficult one, and there were tears and she was very quiet for a long time. She used to hide her head in a book. She wouldn’t discuss the issue, and she wasn’t comfortable with me being who I am. (13, trans parent)

So anyway, I told the two of them, and they reacted pretty awkwardly, I suppose. They were still pretty young at that stage, only in early teens. (16, trans parent)

I went down and met my two oldest sons and I told them. One of them asked, ‘Why didn’t you do something about this long ago?’ And I said, ‘Jesus, I don’t know what to say,’ and they said, ‘Where are you [staying], you’re not moving away are you?’ (15, trans parent)

Similar to the experiences of LGB parents in ‘coming out’ to their children, the younger the children were when told about their parents’ trans identity, the easier it was for them to accept it. Several trans interviewees spoke of their children’s acceptance, and of how their relationship
and role as a parent pretty much carried on the same as before in a social context, after they had transitioned. As one participant said:

They love me even though I am a woman. They have to deal with the issues around me being a woman on a day-to-day basis, and they do, and they have no problem with it. I go to all their football matches, I was told by so many people that I would never be able to go to football matches and I wouldn’t be able to do x, y, z. I have done everything that any Dad is able to do. (19, trans parent)

However, interviewees described how their children had been selective in informing peers of the trans identity of their parent. They told those that they could trust, and those who they thought would not spread it around indiscriminately. There were very positive examples of the peer support received by the children, and all of the interviewees who see their children regularly, described their children as being well adjusted, with good friends and social lives. This is exemplified from the accounts of the following three interviewees, which show the remarkable resilience children had of their parents’ new gender identity:

. . . there was this movie that I recommended, and a week or so later my eldest son was at the movies with his pals but the movie they wanted to see was booked out. My son said to his friend, ‘Dad said this movie was pretty good’, to which his friend replied, ‘Your Dad is a woman, what the feck would she know?’ [laughter]. (19, trans parent)

. . . as the years passed, she became more comfortable with me, and with me being who I am. She still has issues, although relatively minor, and I have met her friends. However, we don’t advertise the fact, so we do keep it fairly low key around her friend. (13, trans parent)

He [my son] seems very happy in his life; he has a new girlfriend; he has just done State exams and got great results. (17, trans parent)

Children’s natural openness and lack of socialisation to the prejudice, which exist towards trans people, were evident in a number of accounts of how accepting their own children and their peers had been. As the following trans participant said:

All of the kids are like that, not just mine. Any of their friends who have anything to do with me, none of them gives a hoot, because everything is new to a child. That is what I have figured out, so the fact that my kids’ Dad is trans, is just another new thing. Everything else in life is new too. (19, trans parent)

‘Out’ to Immediate Family Members
All of the interviewees were ‘out’ to their immediate families, and, in general, their families had accepted them and were supportive of them as LGBT parents. Some described their families as being initially shocked, when they first heard that they were to become parents. As one gay father who donated sperm to a lesbian couple recalled:

I was ‘out’ to my family for years. After about a year of trying to have a baby, she did get pregnant but then she had a miscarriage. So I did tell my Mam and Dad about that pregnancy, so they knew I was trying and it didn’t come then as a huge shock when the baby came along. But they were shocked initially when I told them about the first pregnancy, but then it was good. (06, gay father)
One bisexual parent described how despite being ‘out’ for many years in a same-sex relationship, his family prefers to view him as heterosexual rather than bisexual, since he entered an opposite-sex relationship:

Well, because I was in a long-term, same-sex relationship, most people know that I am bisexual because I am now with a female partner. So my family and my friends know. But there is a bit of a sense that, ‘Oh! Now you are sorted,’ as in now you are heterosexual, because I am with a woman and we have a child. (8, bisexual father)

All of the trans interviewees had fully transitioned and were living as female. All were ‘out’ to their immediate and extended families. A small number had strong support from some family members, and had experienced acceptance over time of their gender identity, as was the case from the following two interviewees:

And then my sister is amazing, she is very like me and very like my best friend as well, so I listen to her. (16, trans parent)

My wife’s family have surprised me, her sisters are positive to very positive . . . But one of her brothers is married to a woman from Eastern Europe and we thought, ‘Oh no! Very Catholic, seriously Catholic, and very conservative.’ But they were the opposite. I had my surgery in the UK and they came in to see me. I was just so astounded and delighted by their response and the genuine interest and concern for me. (13, trans parent)

‘Out’ to Ex-Partners
For all the trans interviewees, their spouses were the first person that they told of their trans identity. The majority had ‘come out’ to their partners, either before or during their marriage, and their spouses had allowed some expression of their trans identity in private. The majority of spouses had also eventually encouraged their partners to seek medical advice or treatment, although for most, this also signalled the end of their marriages. As two of the interviewees said:

. . . not long into the marriage, I told her that I felt differently. I told her about feeling in the wrong body, and she thought it was a phase. But we spoke about it, and, at that stage, she allowed me to dress up, now that is going back about 20 years. (15, trans parent)

She knew for over four years before we separated. We kind of worked our way through it, and eventually, it was she who said, ‘Look, you are not going to be able to handle this, because I was trying to handle it . . . (16, trans parent)

‘Out’ in the Local Community
Several interviewees described how being a parent made their LGBT identity more invisible, primarily due to heteronormative assumptions about parenting. This meant having to ‘come out’ constantly in certain settings, and was particularly mentioned in relation to schools. As a bisexual parent and a lesbian parent described:

We are in the school now so we have to establish that we are a lesbian family and [my daughter] has to as well. People just presume we are a heterosexual family, because even though one of us drops and the other collects, other parents do the same so they don’t see both of us. So you have to ‘come out’ several times a day sometimes when you go there. (20, bisexual mother)
As two women with children, you have to ‘come out’ every day, because we are not allowing each other to be denied. We can’t in front of the children, so there is no question about it. (21, lesbian mother)

Their children’s school was, for a small number of interviewees, the only place that they were not openly ‘out’, as they felt that this might lessen the risk of their children being bullied. ‘Coming out’ was not an option for one lesbian participant, who wanted to protect her child in school:

The only people I didn’t tell I suppose were in the school. I didn’t go in and proclaim it there and then, but I don’t feel a need to. And [my son] is sensible enough, he wouldn’t go shouting around the playground - you know - because children can be cruel, unfortunately. (02, lesbian mother)

The discussion around the knowledge and acceptance of trans interviewees in the wider community, centred on schools and the parents of their children’s school friends. Without exception, the participants all reported very good experiences with schools, regardless of the ethos of the school, and in the majority, their children had gone to Catholic-run schools. In the case of two interviewees:

. . . it was a Christian brother, and he was very good. We sat down and had a chat, and said we would work together on it and how important this was for the child. So yes, they were excellent. As was the school my eldest went to, as I had to ring when I was taking him out of school, and explain to the principal who was great. (17, trans parent)

Oh! The boy’s school has been great . . . when some boy was trying to bully him. He was having problems with him and we were letting them sort it out between them. But he sent a picture of a scissors around the classroom, as the scissors that cut [eldest son] Dad’s penis off . . . So I rang the principal, who said that that was completely unacceptable. . . And he was a great principal. He jumped on it immediately, called the parents in, and that was the end of it. (19 trans parent)

4.3 Support for LGBT Parents

The survey aimed to find out how much support LGBT parents received in their parenting roles. This included support from partners and ex-partners, immediate and extended family members, the immediate and extended family of the partner of LGBT parents, friends, LGBT community groups, the local community, neighbours and work colleagues. The highest numbers receiving a lot of support were in the categories of the parent’s partner, followed by the parent’s immediate family and friends. The lowest were in relation to LGBT support groups, local community networks and work colleagues.

Across all categories of support, Chart 29 shows the respondents who indicated whether they received a lot of support, some support, no support, or if this was not relevant to them. A lot of support was received by 20% (n=22) of respondents, 28% (n=29) received some support, 30% (n=32) received no support, and this was not relevant for 22% (n=23) of respondents. The chart does not include the 48 respondents who did not answer the question.
Support from Partners and Ex-Partners

a) Anonymous Survey

The highest level of support for LGBT parents was received from the partner of LGBT parents. In some cases, ex-partners also provided support to an LGBT parent.

Nearly one half of LGBT parents stated that they received a lot of support from their partner (45.10%, n=69), 8.50% received some support (n=13), and 3.27% received no support (n=5). This was not relevant to 16.34% of respondents (n=25), and a further 26.80% (n=41) gave no answer.

b) In-Depth Interviews

The lesbian and gay parents who had children within an LGBT parents’ or previous opposite-sex relationship, had to ‘come out’ to their partners and to their partners’ families. Two gay men had ‘come out’ to their spouses while they were still married, and while both marriages ended, their spouses had been supportive. They have maintained good relationships with their ex-partners. In the case of one gay father:

*With my ex-wife, quite the opposite in fact. We have a very good relationship, even around ‘coming out’ and with our respective partners. She gets on very well with mine and mine with hers, and it has all been like one extended family. So that has all been really good.* (04, gay father)

However, two interviewees stated that the families of their ex-partners were much more negative towards them after they ‘came out’, as shown from the following gay father and lesbian mother:

* . . . I have had a few examples of people not speaking to me and speaking to the children and not to me. Or when we have had a family event at their mum’s house - coming to that but not speaking to me, or speaking to me and not my partner.* (04, gay father)

*No one has ever really said anything to me except my ex’s family. They did all right . . . but they were the only ones to give a negative response.* (02, lesbian mother)

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**Chart 29: Support received by LGBT parents (n=106)**

- **A lot of support**: 22%
- **Some support**: 20%
- **No support**: 30%
- **Not relevant**: 28%
Half of the trans interviewees had maintained very good relationships with their partners, and, although two were separated, they had frequent parenting contact while living apart from their children. As one participant said:

*My youngest son basically lives with me and I don’t see my eldest son that much. I see him on Sundays, when (youngest son) and I go out for lunch. We have a Sunday roast with their Mam, and we have a good relationship going. It is just nice to go out and catch up and have a chat, with (eldest son) as well, so that is lovely.* (17, trans parent)

Three trans interviewees were supported by their spouses when in the process of ‘coming out’ to their children, and while only one participant is still with their spouse, the others have maintained a good relationship with their ex partners. In preparing to tell the children, their support was crucial, and together, they agreed the best approach. Two of the trans interviewees also sought advice from a child psychologist before telling their children:

*I wanted to take things very slowly, with the minimum amount of hurt or inconvenience or upset to anyone else, and that is why we actually decided to go to a child psychologist. One of my friends had actually been to this child psychologist as well, and she found it very good in dealing with her three kids. We had two appointments with her, and we were happy that we were going to tell our daughter very soon afterwards.* (13, trans parent)

*So we went to the child psychologist. We were really worried about how the break-up would affect the children, and also then throwing in a transsexual dad on top. So we were really worried about bullying and all of the rest.* (19, trans parent)

Another trans interviewee did not have the support of her spouse, who was opposed to telling their children. This made ‘coming out’ to their children particularly problematic, and in all cases, the interviewees felt that when and how their children were eventually told, could have been handled much better. As this trans parent stated:

*If I had to have my choice- yeah, they would have been told very early on . . . but in a way, especially from the kids’ point or view, it was always dealt with in a way that had somebody else’s finger prints on it, if you know what I mean.* (16, trans parent)

Three trans interviewees had no support from their ex-partners, two of whom were adamantly opposed to contact between the interviewees and their children. One of the interviewees had been physically assaulted by her ex-partner, following her transition. Her ex-partner continued to block access to their children, despite a court order allowing the participant to have regular contact:

*. . . she came up to my house and broke two windows. Then she came up again with [family member] and they attacked me, beat me up and accused me of all sorts. They told me if I didn’t leave the area that they would get me beaten up again . . . and they found themselves justified and I ended up leaving. Again, I was homeless.* (15, trans parent)

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**Support from LGBT Parents’ Immediate and Extended Family Members**
a) Anonymous Survey

In addition to support from partners, the survey asked respondents to state the levels of support they received from their immediate and extended families.

**Support from Immediate Family**

- Nearly one-third (n=48) of LGBT parents received a lot of support from their immediate family, nearly one-third (n=46) had some support, and a further 7.84% (n=12) received no support. This was not relevant to 5.88% (n=9) of respondents, and nearly a quarter (n=38) of respondents gave no answer.

**Support from Extended Family**

- Levels of support from extended family members tended to be much lower. 7.84% (n=12) of LGBT parents received a lot of support, 24.85% (n=38) received some support, and 26.80% (n=41) received no support. This was not relevant to 10.46% (n=16) of respondents, and 30.07% (n=55) gave no answer.

b) In-Depth Interviews

In many cases, immediate families were a strong source of support to interviewees. High levels of support were received from their own parents and their partners’ parents, and a particular feature noted by interviewees was the strong bond between the children and their grandparents. The following gay father, for example, spoke about the high level of acceptance from his parents:

> I would be relatively close to my mother and father. She is the youngest grandchild, and they do dote on her. (06, gay father)

Often, families were more supportive and approving than the interviewees had initially expected, and this was described as being particular to them as parents, rather than because of a wider acceptance of LGBT identities. As one bisexual parent stated:

> Only positive, both families, all of the time, again there are quite a few that are conservative but they feel we are different. So, for example, when civil partnership was introduced in the North of Ireland, and the two women were on the TV kissing, they [partner’s sisters] were like, ‘Do they have to do that . . . ?’ So they have all that, but they are supportive of us. (20, bisexual mother)

**Support from the Immediate and Extended Family of the Partner of LGBT Parents**

a) Anonymous Survey

Slightly lower levels of support were received from the immediate and extended families of the partners of LGBT parents.

**Immediate Family of the Partner of LGBT Parents**

- The number of LGBT parents receiving support from the immediate family of partners was lower compared to the immediate family of the LGBT parent, with only 14.38% (n=22) receiving a lot of support, 20.26% (n=31) receiving some support, and 16.34% (n=25) receiving no support from their partner’s immediate family. This was not relevant to 18.30% (n=28) of respondents, and 30.72% (n=47) gave no answer.

**Extended Family of the Partner of LGBT Parents**
• Just 4.58% of LGBT parents received support from their partner’s extended family (n=7), 13.07% received some support (n=20), and 27.45% received no support (n=42). This represents a lower level of support than is evident from the extended family members of the LGBT parent. This was not relevant to 21.57% (n=33) of respondents, and 33.33% (n=51) gave no answer.

Support from Friends

a) Anonymous Survey
Support from friends was the next highest category of support received by LGBT parents. One-quarter of LGBT parents, stated that they received a lot of support from their friends (n=39), one-third received some support from friends (n=51), and a further 8.50% stated that they received no support from friends (n=13). This was not relevant to a further 6.54% (n=10) of respondents, and was not answered by a further 25.14% (n=40) of respondents.

b) In-Depth Interviews
Both ‘straight’ friends and LGBT friends were considerable sources of support for interviewees who were LGBT parents. A significant number of interviewees stated that heterosexual friends, particularly those with children, had been very supportive. Other LGBT parents with children were also an important source of guidance and support. As one lesbian mother stated

Friends have been very positive about the whole process, she has a network of people who are looking out for her . . . we have a fairly good community. (11, lesbian mother)

Support from LGBT Support Groups

a) Anonymous Survey
A small number of LGBT parents sought and received support from LGBT support groups. Only 3.92% (n=6) of LGBT parents stated that they received a lot of support, 14.38% (n=22) received some support, and 31.37% (n=48) received no support. This was not relevant to 18.30% (n=28) of respondents, and 32.03% (n=49) gave no answer.

b) In-Depth Interviews
In the interviews, almost all of the LGBT parents stated that they would like to get involved in an LGBT parent-support group, so that they could meet other LGBT parents and also because their children would know LGBT families. Very few interviewees however, had access to this type of support. In response to this, two support groups had been started up in Dublin and one in Waterford.

Due to the lack of support groups in Ireland, several interviewees had accessed support through groups and organisations in the UK, as exemplified by this bisexual mother:

We did go to a bi[sexual] conference in the UK recently and brought our child along. It was very family friendly, as a lot of other people there had children and there was children’s entertainment, etc. So that is something, perhaps, that we can do with them in the future. (08, bisexual mother)

One lesbian mother pointed out that there has always been a lack of traditional forms of support for LGBT people, but that this has made LGBT people more resourceful in organising their own support:
I think LGBT people make themselves very self-sufficient because they are used to not having support. So when I talk about supports, they are either ones that my close friends, or we, have set up ourselves. But outside of that, not really, no. We personally have quite a lot of support, because that is the way that we have structured our lives. But in terms of existing support, I would say no. (21, lesbian mother)

Support from Local Community Networks

a) Anonymous Survey

LGBT parents sought and received a similar low level of support from local community networks.

- Only 3.92% of LGBT parents stated that they received a lot of support from local community networks (n=6), with 10.46% receiving some support (n=16), and 32.03% receiving no support (n=49). This was not relevant for 19.61% (n=30) of respondents, and 33.99% (n=52) gave no answer.

Support from Neighbours

a) Anonymous Survey

Support for LGBT parents from neighbours was also at a low level. One half of LGBT parents stated that they received no support from neighbours (n=20), while only 4.58% received a lot of support (n=7), 18.95% received some support (n=29). This was not relevant for 13.07% (n=20) of respondents, and the question was not answered by nearly one-third (n=47) of respondents.

Support from Work Colleagues

a) Anonymous Survey

The lowest level of support was received from work colleagues, suggesting that generally, LGBT parents do not receive their support from work colleagues, even when they are ‘out’ to them.

A small number, representing only 3.92% of LGBT parents (n=6), received a lot of support from their work colleagues, whereas 16.99% (n=26) received some support, and a higher number 27.45% (n=42) received no support. This was not relevant to 16.99% (n=26) of respondents, and 34.64% (n=53) gave no answer.

b) In-Depth Interviews

Several of the interviewees described their work environment as being very supportive of them as LGBT parents, but noted that they were lucky in this regard, and felt that this was probably not the case for all LGBT parents. As one bisexual mother stated:

And in work it is great . . . but I have a very progressive work environment, which wouldn’t be the norm for everyone. (20, bisexual mother)

A number of other parents described how having children increased their communication with their ‘straight’ work colleagues, particularly those who had children. As one gay father stated:

Yes, it has all been really positive. In fact, I think it actually makes it easier for [straight] people, say in work and that, it means that they have something in common with you, because we are both parents. It gives us something to talk about. (06, gay father)
4.4 Conclusion

This chapter has shown that large numbers of LGBT people who are parents, are ‘out’ in their personal, family and social lives. Being ‘out’ - as an LGBT person who parents - often takes place with care and consideration to children and immediate family members. LGBT parents also experienced high levels of acceptance and support, particularly from immediate family members. The accounts given by LGBT parents of their experiences of the support they received, demonstrate the struggles and difficulties in gaining support and acceptance, while also showing remarkable stories of family resilience, acceptance and support. However, it is important to note, that around one in ten of all respondents, was not ‘out’ to extended family members, friends, neighbours and work colleagues.

Children were often the most accepting of their parent’s LGBT identity. Although this is a result of a deep attachment that children have to their parents, there is evidence that LGBT parents took great care in supporting their children to understand their sexual orientation or gender identity. This can also be explained by the fact that children were often brought up in families that were open to accepting difference, and consequently, were not exposed to heteronormative and homophobic societal attitudes. Children’s resilience and acceptance of their parent’s LGBT identity are particularly evident from some of the trans parents who participated in the interviews, and who had developed positive and supportive relationships with their children.

This shows that substantial numbers of LGBT parents have experienced positive relationships, and have established and maintained close family and kinship ties that have strengthened their parenting roles. In some instances, this brought them closer to their families than would otherwise have been the case if they had not been parents. Lesbians, gay men and bisexual parents generally received high levels of acceptance of their parenting roles, while trans parents experienced some of the greatest difficulties in gaining acceptance.

Overall, the general high level of acceptance is a reflection of more positive societal values, recognition and acceptance of LGBT identities and visibility as parents. However, LGBT parents often struggle to gain recognition for their parenting roles at a societal level. This is most acute for trans parents, where societal rejection and transphobia in relation to their roles as parents, are often a reality.
Chapter 5: Access to Services for LGBT Parents

5.1 Introduction

This chapter looks at the experiences of LGBT parents in accessing services that support them in their parenthood roles. It includes positive and negative experiences of access to AHR, adoption, fostering and surrogacy services, as well as access to pre-school and education for children, health services, maternity services and other state services that support LGBT parents and their families.

**Summary**

- LGBT parents have mixed experiences of accessing services, but overall experiences of accessing services tend to be more positive than negative.

- AHR, adoption, fostering and surrogacy services are generally rated higher when they are accessed abroad than in Ireland. There are particularly high levels of negative experiences of adoption and fostering services for LGBT parents in Ireland.

- The interviews with LGBT parents point to a gap in legislative and policy guidelines in the area of AHR. This represents a considerable barrier to LGBT parents, both in terms of accessing information and in service provision. While AHR clinics are used by lesbians in Ireland, they do not clearly promote this fact, and LGBT people are reliant on information from friends and acquaintances on which clinics are accessible to them.

- The high level of discretion in the Irish adoption and fostering system and evidence of some systemic discrimination on the grounds of sexual orientation within the assessment process, resulted in some interviewees being unsure of whether to reveal their LGBT identity for fear of reaction.

- The anonymous survey and the interviews, show that LGBT parents who accessed health services for themselves and their children, were generally rated as being more positive than negative. While this suggests that the attitudes and reactions of healthcare professionals are changing, interviewees did frequently encounter a lack of awareness around the existence of LGBT families, and, in one instance, an interviewee noted that a healthcare professional had made a presumption of heterosexuality about one of the parents.

- Overall experiences of crèche, pre-school, primary and secondary education were more positive than negative. Interviewees described the considerable efforts they made in finding progressive schools for their children. The education system and syllabi were not seen to reflect diverse families, and this was a barrier to schools in responding to the needs of LGBT-headed families.

5.2 Positive and Negative Experiences of Accessing Services

The anonymous survey and the interviews sought to find out, whether LGBT people had positive or negative experiences in accessing a range of services to support them in their parenting roles in the last five years. This is categorised into the following services:
5.3 Access to AHR, Adoption, Fostering and Surrogacy Services

The anonymous survey asked respondents about their experiences of accessing services relating to AHR, adoption, fostering and surrogacy in Ireland and abroad, and to rate their experiences as either very good, good, neither good nor bad, poor and very bad. Overall, there was a more positive experience of accessing these services abroad, compared to accessing the services in Ireland. This is an important finding, as many LGBT parents responding to the question had faced difficulties in becoming parents in Ireland. There are also lessons to be learned from analysing the more positive approaches to LGBT parenthood in other countries in facilitating parenthood.

Assisted Human Reproduction (AHR)

a) Anonymous Survey

Of the respondents who answered the question about positive and negative experiences of accessing AHR services in either a private clinic or from a known donor, 62% (n=18) had a positive experience, 34.48% (n=10) had some positive / some negative experiences, and 3.44% (n=1) had a negative experience.

Access to AHR Services in a Private Clinic

- Thirty respondents answered the question about how they rated the AHR service they accessed in a private clinic in Ireland. Access to AHR services was rated as very good in the majority of cases. Overall, 40% (n=12) stated that these services were very good, 13.33% (n=4) stated that the service was good, 16.67% (n=5) stated that the service was neither good nor bad, 13.33% (n=4) stated that the service was poor, and 16.67% (n=5) stated that the service was very bad.

- Experiences of accessing AHR services abroad were slightly more positive, with nearly a half (n=9) of 19 LGBT parents who had accessed AHR services abroad, stating that the service was very good. 21.05% (n=4) stated that the service was good, 21.05% (n=4) that the service was neither good nor bad, and 10.53% (n=2) that the service was very bad.

Access to Known-Donor Services

- Of the fifteen respondents who had accessed AHR through a known-donor arrangement in Ireland, a lower proportion of LGBT parents rated this service as very good, with an equal proportion stating that the service was poor. Overall, 33.33% (n=5) stated that it was neither good nor bad, 26.67% (n=4) stated that it was very good, 26.67% (n=4) stated that it was poor, one parent stated that it was good, and one that it was very bad.

- Of those who accessed known-donor services abroad, 40% (n=4) stated that this was neither good nor bad, 30% (n=3) stated that it was good, 20% (n=2) stated that it was very good, and 10% (n=1) stated that it was very bad.

b) In-Depth Interviews

Similar to the results of the anonymous survey, there was a more positive experience of accessing AHR services abroad, compared to accessing the services in Ireland. The more positive approaches to LGBT parenthood in other countries generally, resulted in greater availability to
AHR services for LGBT people and in more progressive attitudes and mindsets of the staff working in these services.

Several lesbian couples had successfully negotiated relationships with donor fathers and their partners, which were described in different ways as ‘at-a-distance parenting’ or an ‘uncle relationship’, with a commitment to maintain contact with donors to enable them to have contact with the child, or if the child would want this in the future. Regardless of whether AHR was sourced from a known donor through a private arrangement, or from an anonymous donor through a fertility clinic, the experience was often stressful, particularly if it took a parent a substantial amount of time to conceive. However, those who had accessed AHR services, showed resolve and commitment to becoming parents, which often took months, sometimes years to realise, and, in some cases, involved repeated attendance at fertility clinics and travel abroad.

In the small number of clinics in Ireland that did provide AHR services to lesbian couples, the attitudes presented further difficulties, with a number of interviewees describing the staff as, at best, uncomfortable, and at worst, homophobic. In the case of one lesbian parent:

There were only two places [clinics] that would treat lesbian couples, and so we went to one of them. It was a very odd experience. We did declare [being lesbian], because it was very important that we, or I, would not be left out of the process. It was very, very stressful. We were made to feel quite unwelcome, and yet, we were paying enormous amounts of money. (21, lesbian parent)

Four of the interviewees who had accessed AHR services in Ireland, went on to access services abroad, and this provided a useful insight into the inclusiveness of services abroad. The following reflects the positive experience of the lesbian parents interviewed:

They need to take their lead from other countries that are doing it right . . . they just need to treat people equally, that is all they need to do . . . but there [in overseas clinic], I was looked at and he [consultant] spoke to us as a couple. When my partner was brought in for the procedure, I just assumed that I would not be allowed in, but the nurse came out, called me in, and asked me did I want to be with my partner. And it went on like that. (21, lesbian parent)

Lack of information and legislative guidelines in the area of AHR on the treatment of same-sex couples, extend to those individuals who are willing to be known donors. The interviewee who was a known donor, recounted having to pose as ‘straight’, in order to access treatment:

We went to a specialist. I went and had a sperm count, and that was all fine. So, we had to meet with the specialist and pretend to be ‘straight’. It was funny though. (06, gay father)

Access to Adoption Services

a) Anonymous Survey

A lack of legal rights for LGBT parents to adopt continues to be a major barrier to parenthood for LGBT parents in Ireland. As a result, it is not surprising that experiences have been more negative than positive.
• Of the nine LGBT parents who responded to the question about positive and negative experiences of adoption services, three had a positive experience, five had some positive / some negative experiences, and one had a negative experience.

• Of the seventeen LGBT parents who responded to the question about their experience of whether the adoption service in Ireland had been either very good, good, neither good nor bad, poor or very bad, none stated that it was very good. 41.18% (n=7) stated that it was neither good nor bad, 41.18% (n=7) that it was very bad, and 11.76% (n=2) that it was poor.

• A higher proportion of respondents had received a better service abroad. One-third (n=4) stated that the service abroad was very good, one-third (n=4) that it was neither good nor bad, 16.67% (n=2) that it was good, one stated that it was poor, and one stated that it was very bad.

b) In-Depth Interviews

A lack of legal rights for LGBT parents to adopt continues to be a major barrier to parenthood for them in Ireland. As a result, it is not surprising that the experiences of interviewees who had tried to adopt, have been very negative.

Two lesbian parents had been or were going through the adoption process. One had applied with her same-sex partner to adopt their foster-child, and was still going through the process. Despite the fact that the participant and her partner had been raising the child for many years, and that the child’s mother wanted the couple to adopt the child, the process had been extremely problematic and was still ongoing. The following account highlights her belief that the couple's sexuality has had a negative impact on the assessment:

'I do think that now. I used not think it, but given what happened at the last minute, and I know another [same-sex] couple who had a problem at the last minute. I think that someone on the Adoption Board had a problem with same-sex parents. (18, lesbian parent)

One lesbian parent, who had been successfully assessed, described how the lack of clarity around the HSE policy on the issue, had convinced her not to disclose her same-sex relationship:

...it took me five years in all to get my declaration . . . I did make a conscious decision at a certain point not to declare that [new same-sex relationship] for a number of reasons. First, the process had been so long already, and we would be put back to the beginning . . . but that was a smaller part of it. A larger part of it was that I didn’t believe the HSE when they said how open they were, and I also knew factually, that countries wouldn’t accept an adoption to a lesbian couple. The only country that I understood at the time . . . was potentially South Africa. (21, lesbian mother)

Access to Fostering Services

a) Anonymous Survey

• Of the five LGBT parents who answered the question about their experiences of accessing a fostering service, two stated that the experience was positive while three said that there were some positive and some negative experiences.

• Eleven LGBT parents answered the question about whether the service in Ireland was good or bad. Just over one-third (n=4), stated that the service was neither good nor bad, three
stated that the service was good, two that the service was poor, one that the service was very good, and one that it was very bad.

- Eight LGBT parents answered the question about the service abroad. Two stated that the service was very good, two that it was good, two that it was neither good nor bad, and two that it was very bad.

b) In-Depth Interviews

Lack of information and clear policy guidelines on whether LGBT people would be accepted by foster-services, arose in the interviews with those parents who fostered children.

Two parents had direct experience of the foster-care system, and both considered the assessment process to be additionally burdensome for LGBT applicants. The extra assessment criteria put in place for LGBT people, were deemed to be inherently homophobic. One lesbian foster-parent, described how she felt about the assessment process:

*I was in a relationship when I applied. When I was assessed . . . and being honest, I think it would have been easier if I had been single, because at the time they said the process was exactly the same as it was for a heterosexual couple, but it wasn’t . . . Throughout the whole process, we were - and I am now - much more closely scrutinised than a ‘straight’ foster-carer would be. (12, lesbian parent)*

The level of discretion and power resting with individual social workers was also a concern for the interviewees. This left them very vulnerable if the social worker they were assigned to was homophobic. This lesbian foster-parent described her experience:

*So you might get a really good social worker who is not at all homophobic, or you might be unlucky, and end up with someone who is. I have been lucky. My own social worker is very, very inclusive. He is great, but his team leader is a different kettle of fish. She is an older woman, and still has great difficulty even saying the word gay. (12, lesbian parent)*

Access to Surrogacy Services

a) Anonymous Survey

- Of the six LGBT parents who had accessed a surrogacy service In Ireland, one half stated that the service was very bad (n=3), two stated that the service was neither good nor bad, and one that it was poor.
- Of the six LGBT parents who had accessed a surrogacy service abroad, the experiences of the service were slightly more positive, with two stating that it was neither a good nor a bad service, one who found the service to be very good, one good, one very bad and one non response.

Accessibility of AHR, Adoption, Fostering or Surrogacy Services

Of the LGBT parents who had accessed AHR, adoption, fostering or surrogacy services, fifty-one responded to the question about the accessibility of the service to them. 37.25% (n=19) stated that the services were not accessible to them, 37.25% (n=19) stated that they were somewhat accessible, and a further 25.50% (n=13) stated that the services were accessible.
When looked at by the respondents’ sexual orientations, of the thirty-four lesbians who responded, 32.35% (n=11) stated that they did not find the services accessible to them, 13.54% (n=13) found the services to be somewhat accessible, and only 10.42% (n=10) stated that the service was accessible. Four bisexual parents did not find the service accessible to them. Only two gay fathers had accessed a service, and both stated that this was not accessible to them.

Fifty LGBT parents responded to the question about how these services were funded. One half (n=25) of the respondents financed the services from savings, 20% (n=10) from a loan, 14% (n=7) had assistance from family and friends and 8% (n=4) from health insurance. A further 8% (n=4) had funding from other sources, which were not specified. Bisexual parents and lesbian mothers were more likely to have funded the services from a loan and savings.

The approximate cost of accessing AHR, adoption, fostering or surrogacy services is prohibitive for many LGBT parents. The response to the question about the cost of accessing these services, shows that the cost for a parent’s most recent child can stretch to over €30,000. Of the twenty-six respondents to this question, twenty-one were lesbians. Eight respondents stated that the cost was less than €10,000, four stated that the costs were between €10,000 and €19,000, eight said that the cost was between €20,000 and €29,000, and three had costs of over €30,000. Three respondents had not paid for the service.

The twenty-one lesbian mothers responding to this question, spent higher amounts - principally in accessing AHR services - than other groups. Eight had spent less than €10,000, two had spent between €10,000 and €19,000, six had spent between €20,000 and €29,000, and two had spent more than €30,000. Two had not paid for the service.

5.4 Health and Maternity Services

a) Anonymous Survey

Health and maternity services recorded the highest levels of positive experiences of services accessed by LGBT parents, although a significant number did experience some positive / some negative and negative experiences of these services.

- Of 95 respondents, 72.63% (n=69) had a positive experience of accessing health services for their children, 25.26% (n=24) stated that they had some positive / some negative experiences, and just two stated that their experience had been negative.
- Of 88 respondents, 69.32% (n=61) had a positive experience of accessing health services for themselves, with 27.27% (n=24) stating that they had some positive / some negative experiences, and just 3.41% (n=3) stating that they had a negative experience.
- Overall experiences of maternity services were more positive than negative. Of 42 respondents, 71.15% (n=37) of parents stated that they had a positive experience in relation to maternity services, with a further 25% (n=13) stating that they had some positive / some negative experiences, while just two respondents stated that the experience had been negative.

b) In-Depth Interviews

Interviewees had very positive experiences of maternity services. Several of these positive experiences resulted from lesbians actively seeking out maternity care and consultants where it was known that there was a positive attitude to lesbian parents. Within the public setting of the delivery ward, experiences had been positive, as this lesbian, non-biological parent, describes:
That [birth] was fantastic. We had a fantastic consultant, and the two anaesthetists came out to me afterwards to congratulate me, as they would to any father. And the hospital was fantastic. We were a bit of a circus act for the time we were there, in that a lot of nurses came in to have a look, but we could live with that as we were treated very well. (21, lesbian parent)

There were mixed experiences of other general health services with some interviewees experiencing very negative attitudes from individual staff. One lesbian parent described her experience when bringing her child to an accident and emergency service:

. . . . she [doctor] wanted to know who the mother was, and we did our thing of explaining that I was their other mother, and she absolutely decided not to accept it or understand it. She asked my partner on a number of occasions, ‘Who is that other woman?’ (21, lesbian parent)

5.5 Crèche, Pre-School, Primary and Secondary Education

a) Anonymous Survey

Overall experiences of crèche, pre-school, primary and secondary education were more positive than negative:

- Of 57 respondents, 86% had a positive experience in relation to crèche or pre-school education for their children, 12.28% (n=7) stated that they had some positive / some negative experiences, and just one respondent stated that they had a negative experience.
- Of 66 respondents, 65.15% (n=43) had positive experiences of primary and secondary education, 21.21% (n=14) had some positive / some negative experiences, and 13.63% (n=9) had a negative experience.

Thirty-six respondents to the anonymous survey, provided comments in text boxes on their experiences of schools. In two cases, one of a gay father parenting with his partner, and one of a lesbian parent parenting with her partner, negative reactions from school principals led the LGBT parents to move their children to another school. As the gay father said, ‘The principal of the local Catholic school was hostile to the idea of two equal fathers, and kept on asking who the actual father was’; while the lesbian mother stated that, ‘The primary school kept referring to my husband as if that was the polite thing to do’. In another case, the non-biological parent of a lesbian couple was ‘not allowed to pick up children from school or sign sick notes when they were younger’. One lesbian parent commented on the failure of the school to address homophobic bullying, while some experienced negative responses from the parents of other children. The lack of ‘discussion in schools about different sorts of families and an assumption that kids always had ‘straight’ parents’, was raised by one lesbian parent. In one case, the school ‘restricted numbers who could attend events, so my partner was excluded from seeing the kids in shows, etc.’

b) In-Depth Interviews

Choosing a suitable school for their children to attend emerged as a significant issue for LGBT families. It is not surprising, given that the majority of schools in Ireland have a Catholic ethos, that interviewees described their considerable efforts to locate a multi-denominational school, or any school that had a greater awareness of family diversity. One bisexual parent describes how important finding this type of school was for her:
It was very clear to me that I would have left the country, if my daughter hadn’t got into a multidenominational school. (20, bisexual mother)

Even with schools whose ethos embraced diversity, interviewees felt that more needed to be done to improve the syllabi, and also to make forms and official school documents more inclusive. Several parents described getting letters back addressed to ‘Mr and Mrs’, or forms that only referred to mum and dad, despite the fact that they were openly a same-sex-headed family.

The lack of representation of diverse family models within books and resource materials was a concern for parents. This was partially addressed in more progressive schools through an additional ‘ethical’ curriculum, which included representation of families other than the ‘nuclear’ family of mother, father and children.

A number of interviewees reported homophobic incidents occurring at their children’s schools, involving other students and some staff members. While the level of bullying of children reported in this study was low, three parents did report bullying incidents, two of which were resolved quickly. One gay father described one such incident:

*When she first went to school, people said to her that her dad was gay . . . and she came home crying and said she wasn’t going back to that school. So, I went up to the school, and said that my sexuality had nothing to do with anyone in that school, and, ‘You’re here to teach my daughter, and that is that’. (01, gay father)*

Another gay father describes how one staff member refused to recognise his male partner as having a parenting role, which was obviously homophobic as this was not the approach the staff member took with his ex-wife’s new opposite-sex partner:

*I have had the situation where my partner wasn’t allowed to collect them from school, and wasn’t allowed to give them a sick note. Their mother’s [opposite-sex] partner was not put in the same position, when something similar happened. (04, gay father)*

Official school and college events were also mentioned by several interviewees, and represented a concrete example of how the education system had not evolved to cater for the shift in family constellations. One gay father describes how his son’s college graduation was an example of this:

* . . . in terms of official things - for example, graduation - it is strict on the number of people who can go. So, when my older son graduates, you are only allowed two guests, and that [graduation] was important for the others who had played a significant role in getting the child to that point. So, I think that was hard, and there is still that going on. (04, gay father)*

Two trans interviewees had encountered negative reactions from some other parents. One participant discussed the reluctance, and even refusal, of some parents to allow their children to visit the participant’s home, and would only allow her children to play in their homes:

* . . . there are plenty of parents who won’t let their kids come and play in my house. There is a lot of that, and I had a few funny incidents around that. Like one woman who couldn’t quite put into words why she didn’t want her kids to come to my house. ‘Well,
you’re transsexual, you understand,’ and I am supposed to go, ‘Oh yeah!’ (19, trans parent)

5.6 Other Services: Social Welfare, Landlords or Social Housing and Information-Providers

a) Anonymous Survey

The ratio of positive to negative experiences was much narrower in relation to social welfare, landlords or social housing and information-providers, with a higher number of negative experiences in these services, compared to health and education:

- Of 49 respondents, 46.94% (n=23) had a positive experience, while 32.65% (n=16) had some positive / some negative experiences, and 20.41% (n=10) had a negative experience.
- Of 27 respondents, 48.64% (n=18) had a positive experience of information-providers, while 35.13% (n=13) had some positive / some negative experiences, and 16.22% (n=6) had a negative experience.
- Of 37 respondents, 44.44% (n=16) had a positive experience in relation to landlords or social housing, 33.33% (n=12) had some positive / some negative experiences, and 22.22% (n=8) had a negative experience.

5.7 Conclusion

The anonymous survey and the interviews showed the different experiences that LGBT parents had of accessing services to support them in their roles as LGBT parents. Some of the greatest difficulties arose for lesbians in accessing AHR services, and for all LGBT parents in accessing adoption and fostering services. There are particular implications for the provision of more accessible information about these services, but also in relation to extending rights to LGBT parents to foster and adopt as LGBT individuals and couples. This is also the case with regards to surrogacy, where there is a need for clearer policies and information.

The anonymous survey and the interviews revealed both the challenges and the experiences of accessing other services in the areas of health and maternity services, crèche, pre-school, schools and information. An important finding from the anonymous survey and from the interviews is that a large number of LGBT parents had positive experiences of accessing health and maternity services. However, problems arose for non-biological parents whose lack of legal status did not give them parental rights in relation to decisions about their child / children’s health care or education. LGBT parents also highlighted the need for a greater awareness of the needs of children of LGBT families in the classroom and in relation to inclusive school policies. This was particularly important in ensuring that children of LGBT parents did not experience bullying in the classroom, and could participate in an educational setting that recognised and validated family diversity.

The different treatment of LGBT-headed families, vis-à-vis heterosexual families, is a feature of the adoption and fostering systems. Although the interviews showed that there were some individuals within the system who were very supportive of LGBT parents, system-wide change appears slow, and there is a lack of willingness to accept evidence that LGBT people are capable of being suitable adoptive-parents and foster-parents.

Experiences of the school system were very mixed, with some very positive experiences with individual schools and teaching staff and their recognition and support of LGBT-headed families, but also some very negative experiences. This reveals the need for greater training and
awareness for education professionals on the existence of LGBT-headed families and the adaptation of the educational system to respond to their specific needs.

The high level of positive experience suggests that awareness of, and attitudes to, LGBT parents and their families, are changing for the better, particularly in the areas of health and education. However, the prevailing lack of legal recognition and official policies to support LGBT-headed families means that LGBT parents continue to face legal, medical and social barriers, and remain exposed to systemic and individual prejudice and discrimination from service-providers.
Chapter 6: LGBT Parents’ Experiences of Discrimination and Negative Attitudes

\[ It \text{ is pure and simple; you get to spend your day playing with kids. [laughter] But it is more than that. I have got nieces and I have friends that have kids . . . but with those children, you never have that closeness that you have with a child that you have lived with. } (12, \text{ lesbian parent}) \]

6.1 Introduction

This chapter documents LGBT parents’ experiences of discrimination and negative attitudes in the last five years.

Summary

- Nearly a half of LGBT parents had experienced discrimination or negative attitudes in relation to their roles as parents in the last five years.
- Younger parents experienced slightly higher levels of discrimination or negative attitudes than parents in older age groups.
- In the interviews, the issue of legal vulnerability and a lack of parenting rights was a constant concern for LGBT parents in their daily lives. Of primary concern, was the potential for interference with the custody rights of a non-biological parent, if something happened to the legal parent. A further major worry was the possible implication of the lack of the ability of the non-legal parent, to consent to medical treatment in the event of a medical emergency with a child.
- The sense of vulnerability, and being beholden to other people to recognise the relationship between non-legal parents and their children, rather than having their relationship recognised in law, was a recurring theme.
- Within the interviews, trans parents reported very high levels of transphobia and negative experiences from family members.
- Society’s lack of knowledge of LGBT parents and heteronormative assumptions about parenting, exacerbated feelings of invisibility and isolation.

6.2 Experiences of Discrimination and Negative Attitudes

a) Anonymous Survey

A slightly lower proportion of LGBT parents had experienced discrimination or negative attitudes in the last five years, compared to those who had not experienced discrimination or negative attitudes. Chart 30 shows, that of the 122 parents who answered this question, 45.90% (n=56) stated that they had experienced discrimination or negative attitudes as an LGBT parent at some stage during the last five years. 54.10% (n=66) stated that they had not experienced discrimination or negative attitudes.
There are some differences regarding the experience of discrimination or negative attitudes when looked at by age of respondent, gender identity and sexual orientation.

- Younger parents had experienced higher levels of discrimination or negative attitudes in the last five years than older parents. One half (n=8) of those in the 25-29 year age group stated that they had experienced discrimination or negative attitudes. In comparison, more than a half - 68.42% (n=13) - of respondents in the 30-34 age group, 55% (n=16) in the 40-44 age group and 52.5% (n=21) in the 45-and-over age groups stated that they had not experienced discrimination or negative attitudes.

- When looked at by sex / gender identity, higher levels of discrimination or negative attitudes were experienced by parents who identified themselves as female compared to male. Overall, 44.44% (n=42) of female and 31.25% (n=5) of male-identified respondents, experienced discrimination or negative attitudes. One trans-man, two trans-women and two gender-queer people, also stated that they had experienced discrimination and negative attitudes towards them as parents.

- There are also some differences in LGBT parents’ experiences of discrimination or negative attitudes, according to sexual orientation. 37% (n=45) of LGBT parents who identified as bisexual, lesbian and gay man and three heterosexual people, stated that they experienced discrimination or negative attitudes. Of the sample in the ‘something else’ category, 70% (n=10), experienced discrimination or negative attitudes. Overall, a slightly higher proportion of gay fathers stated that they did not experience discrimination or negative attitudes, compared to lesbian and bisexual parents.

- When looked at by region, 75% (n=3) of respondents from Ulster experienced discrimination and negative attitudes, followed by 53.33% (n=8) from Connaught, 43.33% (n=26) from Leinster and 38.89% (n=14) from Munster.

a) In-Depth Interviews

All of the interviewees had experienced some form of discrimination or negative attitudes to them as LGBT parents. Lack of legal rights and recognition, lack of visibility and awareness of LGBT identities which led to negative attitudes and social stigma, and which also led to both rejection by, and negative attitudes of, family members, were the main areas of discrimination highlighted by LGBT parents.
Legal Vulnerability
The issue of legal vulnerability was one that saturated the interview discussions, particularly for those parenting in a same-sex relationship. The lack of legal recognition of the relationship between children and their ‘other’ parent, whether they were their non-biological parent in the case of children conceived through AHR, or non-legal parent in the case of children who were adopted, fostered or who were being parented in a step-parenting role, was a constant concern for the interviewees and their families.

As one lesbian foster-parent explained, legal inequality is framed by the Irish Constitution, as it does not protect the rights of the child to their non-biological parents, and only protects the rights of married parents over and above the rights of the child:

Parents have rights but children don’t have. I have been in situations where children have not wanted to see parents, and they have been pushed to see parents because the parents wanted it. You know situations where children have been beaten nearly to death by their parents. But the way the constitution works in this country, the children would nearly have to be drawing their last breath before the children would be moved from the house. So, I think it follows that children need to have rights, and that children have the right to two loving parents, if they have equal parenting responsibilities to the child. (12, lesbian parent)

Primary Concerns for Parents as a result of the Lack of Legal Recognition
The impact of the legal vulnerability of LGBT families was a constant presence within the interviewees’ everyday family lives, but was discussed in terms of a hierarchy of potential implications. The first primary concern was that custody could be disputed if something happened to the legal parent. The majority of interviewees had made legal provision for their partners to have testamentary guardianship; however, as one lesbian biological parent said, this still remained a concern:

The worry of it is, is that if something happened to me that my parents will not respect my wishes. (11, lesbian parent)

Several interviewees also expressed a major concern about the implication of the lack of legal rights in a medical emergency with a child, and whether the non-legal parent would be able to consent to medical treatment. This lesbian parent’s experience reflected the anxiety described by many:

We have gone into hospital with the children, and thankfully, my partner was there. I don’t know what I would have done if she had been away, but we went in together when one of them [children] was very sick. (21, lesbian parent)

Daily Life Implications as a result of the Lack of Official Legal Status
Alongside these major concerns, the lack of legal recognition and its impact on daily family life was an ongoing issue. Not being able to consent to school trips, to vaccinations or to apply for a passport, were all examples of this. Many interviewees remarked on how vulnerable they felt having to rely on people’s goodwill to recognise them as the parent of their children, rather than having their relationship recognised as a legal right, as this bisexual father describes:

. . . that would give the security that we don’t rely on people’s whims, or on the luck of the draw, regarding the recognition of her relationship with the children. (20, bisexual father)
Dealing with official forms was a reminder of this, and caused distress to a number of interviewees, as it reinforced the lack of legal recognition of them as their children’s parents. One lesbian parent describes this in relation to the national census form:

. . . forms are really hideous for a non-biological parent. There is no place for you to fill out. Even the census was a problem, like I put myself down as the children’s mother, so let them figure that out. So, even in the census, there is no official place for you, you are invisible, and that is quite particular. (21, lesbian parent)

One interviewee also mentioned the financial implications of the lack of legal recognition of her relationship to two of her children:

I can’t apply for anything for them, like a medical card. So, even though my ex-partner may not be entitled to a medical card for the children, we are paying for things separately now, so I am entitled to a medical card. If they were my children legally, I could apply for a medical card on their behalf. That is really difficult, because my income has reduced, but I have the same costs with the children. (18, lesbian parent)

Reliance on the ‘Goodwill’ of Others to Respect the Parent-and-Child Relationship
Several LGBT parents stated that they were very dependent on the willingness of other people to accept their parental status. For example, there was evidence from at least two non-biological parents, that they had been able to have their surnames officially recorded so that their children could carry their names. However, this remains a discretionary practice, and does not extend to a non-biological parent having their name on their child’s birth certificate. As one lesbian non-biological parent explained:

Again, it’s down to the kindness of people and it shouldn’t be down to the kindness of people. So the Registrar of Births, Deaths & Marriages place said that once we could prove we were a couple, and that it was an anonymous donor, and that there was no other person involved, it was straightforward enough. But we had to go to quite a lot of bother to enable my children to have my surname. But I am nowhere on the birth certificate, and I can’t be. (21, lesbian parent)

In the case of a bisexual mother:

We went in to get the [second child’s] birth certificate. He [the donor] has to give his consent to go on the birth certificate and he had signed it. He was no longer in Dublin by the time we went to register. And there was a little mistake on the form, and it had to be redone, but then, he wasn’t around to sign it. The receptionist, a fantastic woman, asked, ‘Why can’t you sign it?’ to my partner. She was wondering had things changed with civil partnership and we said no. (20, bisexual mother)

This sense of vulnerability, and being reliant on the discretion of other people, was also mentioned by the gay parent who was a known donor in the context of the child’s legal parent allowing him to maintain access. Although he could seek legal guardianship through the courts, he was not willing to take this step, but without this legal relationship, he described his sense of vulnerability:

I would also say from my experience, if anyone is thinking of doing it the way that I did it, then sort out the legalities as much as you can first. And even though it was the
toughest thing I ever had to do, the rewards are immense, you can’t quantify the benefits. My policy was always to say yes to everything [to the birth mother] because I was afraid that the consequences of upsetting the mother were huge. But myself and [my child] now have a relationship of our own, and that makes things feel more secure. (06, gay father)

One bisexual mother spoke about her experience of societal recognition of her known donor as father. Despite the fact that he had an agreed-donor status, this account emphasised the lack of societal recognition and acceptance of her partner’s parenting role:

Society clapped him on the back nevertheless, like you are now one of us, whereas my partner doesn’t get that same recognition . . . There was a phase when he got a bit emotionally carried away with the societal praise of his role, and he always said - like at work - that ‘I am a donor-dad,’ but the other men in particular in his work didn’t understand, and so they took him into the rounds and he was ‘one-of-them’ type of thing. (20, bisexual mother)

Lack of Visibility, Awareness and Social Stigma
Society’s lack of knowledge of LGBT parents and of LGBT identities generally, along with heteronormative assumptions about parenting, exacerbated feelings of invisibility and isolation. This bisexual parent described the main negative aspect of being bisexual and other people’s constant assumptions of her heterosexuality:

Because it can feel very suffocating whenever your sexual orientation is assumed that you are one thing when you are not . . . and being a parent can make you more invisible, and really, even in 2011 . . . and it makes me want to scream. (03, bisexual mother)

Social stigma towards LGBT parents was attributed in part to a lack of legal recognition and a lack of positive visibility and awareness. This gay parent recalled a number of incidents when he and his partner and children were subjected to verbal abuse by strangers:

We have had a couple of incidents when we were walking along with the children. We have had people shout at us...Once, when we had the kids with us, we had an unpleasant situation when a group of lads were saying things about us . . . And they weren’t people we knew, and we weren’t holding hands or anything. But it is why the whole marriage equality thing is so important, as it gives people the rights and protections and the backup, to say that you can’t actually treat me differently to anyone else. (04, gay father)

Negative Experiences of Attitudes from Family Members
Although bisexual people, lesbians and gay men did experience negative attitudes from family members, this was most prevalent for trans parents. A striking theme of the experience of trans parents was reflected in the lack of acceptance, the hostile reactions and the sustained negative attitudes that they experienced from some or all of their family members. Almost all of the interviewees described being excluded from family events, which left them extremely isolated, and this exclusion had a considerable impact both on themselves and on their children. As two interviewees stated:

I am not considered part of the family, so I get no invitations to family events. It is a funny thing also as I get old, I get old on my own, whereas other people get old in relation to their families. It is hard to explain, but you don’t have that reference, you say
to yourself who are those old people and they are your siblings or your cousins, it is fairly brutal now, psychologically. (14, trans parent)

... but I am banned from all of their houses except my Mum’s. But she had me banned from two weddings, and my children are not allowed to go to christenings or communions, for fear that I would come... it is just bullshit. (19, trans parent)

The majority of trans interviewees expressed how their families’ negative attitudes had been their greatest experience of discrimination and prejudice as trans parents, as seen in the following interviewees’ experiences:

Well, I think that any negative experiences that I have had, have been totally through family. I didn’t have any bad experiences through school. I didn’t have a bad experience when I was getting a passport for the kids... and so, the only bad experience I have had was totally through family, unfortunately. It is a pity. And that comes up time and time again with other trans people that I know, the negativity is from family. (17, trans parent)

For one parent, who had suffered significant levels of hostility and abuse by her ex-partner and some family members, being denied access to her children seemed like the final straw, and she recounted this as a motive behind a failed suicide attempt:

And even though I love my kids and it is an awful thing to do to them, I don’t know if I can keep going... I miss my kids. I haven’t seen them now for a year and a half and I might not see them this Christmas again... and I just can’t accept that. I would just not rather be here living then, to feel like this. (15, trans parent)

These negative attitudes by family members were often framed as concern for the children of the trans parent, although ironically, the children seemed to experience more support from peers than they did from their extended families, as was the case of the following participant:

At the time when I ‘came out’, my family were saying, ‘Oh! (eldest son) will be beaten up. He will have black eyes, and this will happen to him and that will happen to him.’ But nothing like that ever happened to him... But there was no support from any of the family regarding the situation. It is totally incredible really, just to see that there was no support, and actually, it gives the kids anxiety if another family member and I are in the same place. My youngest son would actually start to panic a bit, and he would be worried about what might be said. (17, trans parent)

6.3 Conclusion

This chapter has shown that disclosing one’s LGBT identity was, in many cases and settings, met with acceptance and affirmation. However, this chapter has highlighted that, in some cases, the revelation or realisation of being LGBT was met with extremely homophobic or transphobic responses. The negative reactions and attitudes, towards trans parents in particular, and the resulting isolation and stress that these brought on those parents and children, demonstrated the most extreme examples of LGBT victimisation in this study. The concern expressed for the children of LGBT parents, as a justification for this treatment, was shown to be unfounded and hypocritical, as wider societal discrimination of children with LGBT parents was, in general, less of an issue than the stigma imposed within families. Verbal insults, threats of physical violence and actual physical assaults, were also experienced by some LGBT parents, and were particularly distressing, but in general, incidents of this type of victimisation were low.
The fact that just nearly a half, 45.9% (n=56) of respondents to the anonymous survey and all of the interviewees had experienced discrimination and negative attitudes towards them in their parenting roles should be a concern of public policy. Furthermore, the significantly higher levels of discrimination and negative attitudes experienced by trans parents warrant urgent attention.

Lack of legal rights - and the resulting legal vulnerability that this caused for LGBT parents and their children - was the greatest form of discrimination experienced. Absence of a legal framework that recognises the diversity of LGBT families meant that parents were denied specific legal recognition of their parenting roles, which impacted on every aspect of their family lives. The potential implications that this had in situations of illness, or death, within a family, caused particular anxiety and stress. However, other events such as, for example, signing school sick notes, were a constant reminder of the lack of recognition. Goodwill towards LGBT parents and acceptance of their parental status were evident, both in society generally and in institutional context, with many examples of individuals within the systems being very supportive towards ‘non’ legal parents. However, this reliance on the discretion of others, left LGBT parents feeling vulnerable, and did not lessen the level of stress experienced by LGBT parents that the lack of legal recognition of their parental relationship imposed.
Chapter 7: Legal and Other Changes to Improve the Lives of LGBT Parents in Ireland

I find everything more positive because I am who I want to be now, and I have come through so much. We are both very hands-on parents really and both into parenting. She [partner] has taught me so much about raising my child. (2 LF P)

7.1 Introduction

This chapter looks at the legal and other changes that respondents to the anonymous survey and the interviewees, believed would improve the lives of LGBT parents in Ireland. The impact of the lack of legal rights is an overriding concern for LGBT parents, and as a result, it is not surprising to find that a significant finding from the study is the need for legal changes to enable LGBT parents to claim the same parenthood rights as opposite-sex couples.

Summary

- The top-ranking legal change that would have an impact on LGBT parents, identified in both the anonymous survey and the in-depth interviews, is civil marriage. This is followed by the right of a child to have a legal relationship with their parents / carers, and the right for civil partners to have guardianship and custody rights of their children.

- The top-ranking other issues that would have an impact on the lives of LGBT parents, are government policies and state services that reflect the diversity of family life. This is followed by access to schools that respect the diversity of family life, and health services that respect the diversity of families.

- Interviewees also ranked highly the need for LGBT support services for parents and for their children. Support services range from support groups for parents and peer support for children of LGBT parents, and also include the provision of counselling for children to support them in issues arising as a result of bullying or societal prejudice.

7.2 Top-Ranking Legal Changes for LGBT Parents

a) Anonymous Survey

The eleven top-ranking legal changes, identified by LGBT parents responding to the anonymous survey, are reflected in Chart 31.
The top-ranking legal change for LGBT parents was civil marriage for same-sex couples (ranked top by 48 LGBT parents), followed by the right of a child to have the right to access, maintenance and succession in relation to their non-biological parent (ranked second by 43 LGBT parents), and then for a child to have a legal relationship with their non-biological parent who is their carer (ranked third by 41 LGBT parents). The next top-ranking issues were to allow civil partners to gain guardianship and custody rights, the right to apply for joint adoption of their partner’s biological child, to have both names on the birth certificate, to have the same rights to parental benefits as opposite-sex couples, for parents to be eligible to be considered as adoptive-parents, to have accessible and affordable AHR services, to seek guardianship of a parent’s child / children, and to gain legal access to a child.

The anonymous survey also gave respondents an opportunity to write comments in a comment box on this issue. A total of 52 comments were made by LGBT parents. When these are ranked by priority, the top four issues are as follows: (1) the child should have the legal right to a relationship with the parent who cares for them, (2) allow civil partners to gain guardianship and custody rights, (3) to be eligible to be considered as adoptive-parents, and (4) civil marriage for same-sex couples. Nearly three quarters of comments were made by lesbians (71.2%), followed by bisexual parents (12%), gay men (10%), and 5.38% who defined themselves as ‘something else’.

b) In-Depth Interviews

The two most important legal changes raised by interviewees, were the same two top-ranked issues for respondents in the anonymous survey:

- First, the right for same-sex couples to have their parenting roles legally recognised. Marriage was seen as giving a widespread protection to both LGBT parents and their children, including adoption rights for non-biological parents (44% ranked this as the top issue).
- Second, for the child to have the right to a legal relationship with the parents who care for them (28% ranked this as the top issue).

The remainder of the top-ranking legal changes included legal rights for transgender parents, having adoption rights for non-biological parents, a legal framework governing known-donor
situations, the need for constitutional protections for LGBT parents and their children, and access to affordable and accessible AHR services.

Right for Same-Sex Couples to Access Civil Marriage
The right for same-sex couples to marry, and to have the same rights to parenthood as opposite-sex married couples, were the most frequently cited legal changes identified in the interviews. This lesbian parent describes her desire to marry her partner, even though it will not be recognised as marriage in Ireland:

The whole civil union thing is ridiculous. So, we got engaged in February and we decided that we would go abroad to get married in order to make it a proper marriage. And I know our children still won’t have rights, but at least we are married properly. (02, lesbian mother)

This was also stressed as being important by a trans parent, who reiterated the importance of gender-recognition legislation:

The ones that stick out for me are full marriage rights and gender-recognition legislation. I think the two of them go hand in hand, and I think it is time that we brought in full marriage rights for people. That, for me, is the most important thing. (17, trans parent)

A lesbian, non-biological parent also stated the importance of access to civil marriage:

For us as a couple, marriage would solve a lot. I know that there are other things that need to happen, but it would mean that I could adopt them [the children], and I would be absolutely legally bound to them. (21, lesbian mother)

For another bisexual parent and a gay father, gaining full recognition for non-biological parents was the most important issue:

Full recognition of the non-biological parent is the ideal case. You would do that on the say-so of the couple, without having to do an adoption. (20, bisexual parent)

I think that the non-biological parents should be recognised in law, that is the biggest deal I think. (06, gay parent)

Child to have the Right to Full Legal Protection from the Parent who Cares for them
The second top-ranking issue highlighted in the interviews, was for children to have the right to full legal protection from the parent who cares for them. As one lesbian parent said, this should be framed around the rights of children more than the rights of their parents:

It is more for the children rather than me, because the children should have full legal access to the person who is rearing them, so that in every instance, I can legally represent them. (21, lesbian parent)

This is reiterated by a lesbian mother and a bisexual father who stated that:

I think that children should be entitled to a legal relationship with the people who parent them on a daily basis, regardless of marital status or relationship. And that the child should legally have the right to demand that, and the parents should be legally entitled to have that. (18, lesbian parent)
I think legal recognition is important so that the child’s parents are recognised (even if there are two or three parents who are caring for the child). (08 BM P)

**Legal Rights for Transgender Parents**

The recommendations outlined in the recent report from the Gender Recognition Advisory Group (GRAG), framed the discussion around the most important legal changes for the interviewees. While all were anxious to see gender recognition laws introduced, several strongly disagreed with many of the recommendations in the report, and particularly resented the proposed requirement to divorce before a person could be issued with a birth certificate in their new gender. As one participant said:

> There is no way that I can divorce. My wife and I are happily married, we are not going to live apart for 4 or 5 years, or whatever the requirement is for divorce, and then to have a civil partnership that gives us much less than marriage. So we are simply not going to do that. I am never going to get a birth cert in my LGBT parent’s name. (13, trans parent)

A further concern was the complication of rowing back of rights that the proposed new legislation might cause, given the fact that all of the interviewees had other legal documents in their new gender. This was reflected in the following interviewee’s concern:

> I don’t want to change my birth cert. It’s not that I don’t agree with where I am or where I was when I was born, but that was the moment in time when I was identified by my mum and my dad, and that birth cert identifies me as my kids’ father . . . but the way it is looking like now, is that if I don’t get my birth cert changed, then they can refuse to give me a passport, and they will refuse me my driving licence. (16, trans parent)

**Access to AHR and Legal Framework governing Known Donors**

Lesbian parents raised the issue of access to AHR services and the affordability of AHR services. Regarding a legal framework for known donors, one lesbian mother stated:

> I think that when it comes to children born through donor situations, it should be the commissioning parents who have the legal relationship with the children, and the commissioning parents who have the duty to that child. And I think that we should be able to register as our children’s parents, if we have them through AHR. (18, lesbian mother)

**7.3 Other Changes that could Improve the Lives of LGBT Parents**

**a) Anonymous Survey**

The anonymous survey also asked LGBT parents to rank other changes that could improve the lives of LGBT parents. Chart 32 shows the top-ranking issues for LGBT parents.
The top-ranking other change identified by LGBT parents, was to have government policies and state services in place to reflect the diversity of family life (ranked top by 71 LGBT parents), followed by access to schools that respect the diversity of family life (ranked second by 48 LGBT parents), and having access to support groups for children in LGBT families (ranked third by 41 LGBT parents). Next was to have access to support groups for LGBT parents and families (ranked fourth by 38 LGBT parents), followed by access to health services that respect the diversity of families (ranked fifth by 37 LGBT parents), and then to have more contact with the person’s child / children (ranked sixth by 15 LGBT parents).

b) In-Depth Interviews

The three main issues raised in the in-depth interviews in relation to other issues that could improve the lives of LGBT parents and their families, are as follows:

- Access to information on legal rights and access to services, including adoption, fostering and fertility treatment.
- The need for LGBT-support groups for parents and children, including the provision of counselling for children whose parents were in previous opposite-sex relationships.
- Awareness-raising and training for service-providers, including schools.

Access to Information on Legal Rights and Access to Services, including Adoption, Fostering and Fertility Treatment

Many interviewees highlighted the importance of information about the law governing LGBT parents, including access to information about adoption, fostering, and parental rights for themselves, but also for service-providers that engage with LGBT parents.

The following gay father sums up the sentiment of many of the respondents about the need for accessible information about legal and parenting rights:

*More resources for parents, for example, written information on what your legal rights are. I have friends who have ‘come out’ and have had awful experiences. They were basically cut off from their children with the support of the state, in terms of access and custody.* (04, gay father)
LGBT Support Groups for Parents and Children, including the Provision of Counselling for Children whose Parents were in Previous Opposite-Sex Relationships

Support groups for parents and children were seen as vitally important, as many LGBT parents experience isolation and a lack of information. As this gay father stated:

“There weren’t that many people I had known face to face, so it would have been good to have access to people in similar situations. Often, guys I would have met, were in worse situations, so yes, it would have been helpful to have some more support to call on.” (04, gay father)

A lesbian parent also highlighted the importance of supportive networks for both parents and their children:

“I do think there was a big gap for lesbian and gay parents to hang out with their kids, as I think it is important for the kids to know other kids in similar situations. And for the parents as well, as you can feel very isolated as a lesbian parent.” (12, lesbian mother)

All of the trans parents who participated in interviews, had accessed information and support from other trans parents and trans support groups. Trans parents stressed the importance of formal and informal information with regard to support and guidance, informally from other trans friends and formally through organised support groups. As two interviewees said, information and support are vitally important:

“Definitely information, you know information is everything. Isn’t it? It is a little easier now with the internet, but we need someone to talk to, someone that has been through it, so peer support . . .” (13, trans parent)

“I think only for the support group that runs here . . . I knew that I could always pick up the phone and ring [outreach worker in TENI] and talk to her. And I think that only for the friends down here and the support group . . . I wouldn’t have survived. Because there is no one else who understands.” (15, trans parent)

While support groups exist for trans people, there is a gap in support services for children of trans parents. A number of interviewees felt very strongly that the service of child psychologists was extremely beneficial for their own children, and should be made more widely accessible. Peer-support groups for children were also recommended. As one participant said:

“. . . even mentioning the word transgender . . . he was terrified. Even mentioning my name had him up in a heap. He couldn’t answer the male name and he couldn’t answer my name, so he would be very anxious if a teacher asked him his parents’ names in class . . . so basically, I thought through peer support for him, with people that are like-minded to him, so that he could express that his Dad is transgender. But there is nothing there for him, there is no counselling available for him, unless we pay for it. I would love to be able to afford it, but unfortunately I can’t, so there is nothing there for him.” (17, trans parent)

Awareness-Raising for Service-Providers

During the interviews, LGBT parents highlighted the importance of service-providers having more awareness of the needs and circumstances of LGBT parents. Many of these comments related to the school setting and health care setting.
One lesbian parent was clear that while the awareness and training of service-providers were important, the absence of legal rights remained paramount:

*I think that all services should have special training around this. But the problem with special training is that the law still treats us as second class. You can have all the training in the world, but if they follow the law they would be treating us as second class.* (21, lesbian mother)

In one case, a gay father raised the importance of having access to training and counselling for children who are bullied, because they have LGBT parents:

*I would like training or counselling . . . if a child comes home from school and has been bullied because their parent is gay. That is hard on the child and the parents. So somewhere for the child to go with their parent . . . and maybe counselling for their child.* (01, gay father)

For trans parents, the lack of information and societal understanding of transgender issues were seen as the greatest barriers to change. Two interviewees felt that awareness-raising and information-sharing were vital to improve their own and their children’s lived experiences:

*I think it is never going to be one individual thing that is going to change. It is going to be about schools and the educational process, doctors and the health system, and the general public being aware of the issue. That [awareness] has got to be the first step.* (16, trans parent)

*Funding to raise awareness, awareness targeted at everybody, the public, health care professionals and the education sector.* (17, trans parent)

### 7.4 Conclusion

With the constitutional protection afforded to married families and the lack of legal recognition of children within civil partnership legislation, marriage rights emerged as a priority both in terms of a wider equality context and in relation to the specific parenting rights, which could be accessed if civil marriage were available. In discussions with interviewees, equal access to marriage for LGBT people was seen as critical in improving legal parenting rights, particularly in the area of adoption, but also in bringing about wider equality for, and acceptance of, LGBT people. For the trans interviewees, the recent proposals to require divorce prior to the legal recognition of a person’s preferred identity had galvanised their view that equal access to marriage was a key issue for them.

There was also strong support for legal measures which prioritised the best interests of children, and that their parents’ sexuality should not determine their rights to legal recognition of their relationship with their parents. The law needed to develop in order to recognise diverse family forms, and to ensure children had a right to the relationship between them and the people who cared for them. This principle should be extended to the area of guardianship and custody, so that non-biological parents’ relationships to their children can be recognised in law, and that these parents and their immediate families have custody and access rights, also.

Given the mixed experiences of LGBT parents, and fears that their sexual orientation or gender identity would expose them or their children to discriminatory practices, it is not surprising that another important issue relates to access to state services that reflect the diversity of family life.
This highlights the need for policy makers and key people involved in providing services, including health, education and information, to consider and include the specific needs of LGBT-headed families. The importance of networks and support groups was very evident in the interviewees’ accounts of how support from peers was often crucial, as only other LGBT people could completely understand their support needs.
PART 3: LGBT PEOPLE PLANNING PARENTHOOD

Part 3 of the report covers the situations and experiences of LGBT people planning parenthood, which are detailed in Chapters 8-12.

Chapter 8: Planned LGBT family formation and parental status
Chapter 9: Being ‘out’ and support in planned parenting roles
Chapter 10: Access to services for LGBT people planning parenthood
Chapter 11: LGBT people planning parenthood - experiences of discrimination and negative attitudes
Chapter 12: Legal and other changes to improve the lives of people planning to be LGBT parents
Chapter 8: Planned LGBT Family Formation and Parental Status

8.1 Introduction

This chapter looks at the anticipated parental status, roles and experiences of LGBT people who are planning to become parents. This chapter presents the findings from the anonymous survey and from the in-depth interviews.

Summary

- Of the 170 respondents to the anonymous survey planning parenthood, the majority of respondents, who were principally lesbians, were planning to have a child through AHR with a known or unknown donor. The majority of gay male respondents were planning to become parents through adoption, and a smaller - but sizeable - number were considering surrogacy.

- The majority of respondents were planning to have children with their partner and to live with their partner and children in planned LGBT-headed families. Thus, there was less anticipated diversity of family forms with LGBT people planning parenthood, than is evident from existing LGBT family formations.

8.2 Planned Pathways to Parenthood

a) Findings from Anonymous Survey

Chart 33 shows the anticipated pathways to parenthood identified by LGBT people planning parenthood. AHR through a clinic, adoption, and AHR through a known-donor arrangement, were the three most commonly anticipated pathways to parenthood.

![Chart 33: Planned pathways to parenthood - LGBT people planning parenthood (%)](chart)

Child / Children through Assisted Human Reproduction (AHR)

44.71% (n=76) of LGBT people planning parenthood planned to have a child through AHR in a clinic, and 28.82% (n=49) planned to have a child through a private known-donor arrangement. Of those planning to access AHR services, 60.20% (n=62) stated that they planned to access AHR services in Ireland, and 39.80% (n=41) overseas. Lesbians were the largest group planning to
have children through AHR, with 61.80% (n=55) of lesbians planning to access AHR through a private clinic, and 37.08% (n=33) through a known-donor arrangement.

**Child / Children through Adoption**

38.82% (n=66) of LGBT people planned to have a child through adoption. Gay men were proportionately the highest group planning adoption (67.57%, n=25), followed by 28.09% (n=25) of lesbians and 22.73% (n=5) of bisexual parents. A further 66.67% (n=6) in the ‘something else’ category and two LGBT people who identified as questioning / not sure, also planned to adopt.

**Child / Children through Fostering**

17.65% (n=30) planned to foster a child. Again, this was proportionally the highest amongst gay men and lesbians. This represents 27.03% of gay men (n=11), 12.36% (n=11) of lesbians and 4.55% (n=1) of bisexual parents. 44.44% (n=4) in the ‘something else’ category also planned to foster a child. One LGBT person identified as questioning / not sure and three LGBT people identified as heterosexual, also planned to foster.

**Child / Children through Surrogacy**

14.12% (n=24) were planning to have a child through surrogacy. Proportionately highest were gay men (45.95%, n=17), followed by 21.43% (n=3) in the ‘something else’ category and just 3.37% (n=3) of lesbians.

**Child from an Opposite-Sex Relationship**

10.59% (n=18) planned to have a child through an opposite-sex relationship. The majority, 45.5% (n=10) were bisexual, followed by 35.71% (n=5) of those in the ‘something else’ category and 3.37% (n=3) of lesbians.

**b) Findings from In-Depth Interviews**

Of seven interviewees who were planning parenthood, all were planning to have children within a same-sex relationship, or as a single LGBT person. These participants were planning conception by AHR in a fertility clinic - either from a known or anonymous donor - or through adoption or fostering.

**The Desire to become a Parent**

The qualitative interviews provided an opportunity to explore the participants’ motivation and strength of desire to become parents. Similar to findings in international research studies into the experiences of LGBT parents (Bos et al. 2003, Bergman et al. 2011), some of the participants in this study described having always wanted to have children, and that their motivation to have a family was for the happiness they believed having children would bring to their lives, as well as the desire to achieve a sense of family that children help to provide.

This is exemplified from the comments below from two interviewees

*I always wanted kids. I think that is why I am in the profession that I am in. I think from the youngest day ever . . . everyone would always say, 'Ah! You were born to be a dad '. I have a million nieces and nephews, and I love them all to bits. It is just ingrained in me.* (05, gay man planning parenthood)

*From an early age, even as a little girl, I wanted to be a mummy. And even in my late teens and early twenties, it was something that was always on my mind.* (10, lesbian planning parenthood)
LGBT Identity Perceived as a Barrier to Parenting

Three interviewees had initially seen their sexual orientation as a potential barrier to becoming a parent. As one gay man stated:

I remember when I first realised I was gay. Within a couple of weeks, it dawned on me that that might be an issue that would mean I would never have a family. I was 17 at that time, so it was obviously not something that I was immediately considering. But it did feel like a loss or a grief at the time, and that it might be something that I might miss out on. (23, gay man planning parenthood)

Decision-Making and Planning for LGBT Families

All four female interviewees planned to have children within their same-sex relationship, and planned to do so through assisted human reproduction (AHR). The three male interviewees were planning to become parents through adoption or fostering.

Although interviewees referred to substantial amounts of time taken in negotiating, planning and making decisions about parenthood, the decision around biological parentage was easily agreed in three cases. Two lesbian planning parents explained why:

I personally would very much like to be a parent, and do the job, but in no way, shape or form, would I want to do the physical side of things [become pregnant]. I don’t feel the need. If it arises that I have to, so well and good, but at the moment, we do have another option. (24, lesbian planning parenthood)

I always knew that I wanted to have children, but I was always quite happy for my partner to have them, so in that way, it worked out well. (25, lesbian planning parenthood)

However, for one interviewee, this decision was a painful one, as she describes how - despite her strong desire to be a biological parent even after a number of years of unsuccessful fertility treatment - she agreed that her partner should try to conceive. Her experience of other lesbian families supported her in making this decision:

It was very important to me that I would be the biological mum, that I would have the experience of giving birth. But that [being the non-biological parent] has developed over time for me, mainly from knowing other lesbian mums and seeing the bond that both parents have with the kids, and how for the kids that it makes no difference. (22, lesbian planning parenthood)

Choosing a Donor

All of the female interviewees were planning to become parents using AHR, and were planning to use unknown-donor sperm through a clinic. Two of the participants had strongly considered using a known donor, but had decided against this option. One lesbian planning parenthood explained her resistance to using a known donor:

Well, I think ideally as two women, if you can set up your family as a unit, and have a minimal amount of knowledge about the donor . . . I think it can work with a known donor, but that is an incredibly special relationship, and it can be incredibly complex and difficult to negotiate. (10, lesbian planning parenthood)
The preferred option of these interviewees was to use sperm through a donor-release programme, which left the option open for their children to learn the identity of their donor if they were to choose to do so in the future. However, the interviewees knew of only one fertility clinic in Ireland which facilitated the use of sperm through this type of programme, so this option was not possible for the participants who did not attend this clinic.

One interviewee described how her own very positive family experience had a strong influence on her decision to go for an unknown donor:

"I was adopted and I was brought up in a family where there is not a genetic connection. But there is a massive emotional connection because of the nurturing, which from my perspective, is 90% of the job... I would go for an anonymous donor." (23, lesbian planning parenthood)

### 8.3 Anticipated Legal Status of LGBT People Planning Parenthood

#### a) Anonymous Survey

LGBT people planning parenthood responding to the anonymous survey were not always able to identify their anticipated legal status as parents. Overall, 43.53% (n=74) stated that they did not know what their legal status would be. One-third (n=51) planned to be a joint legal guardian, 18.82% (n=32) planned to be a joint adoptive-parent, while 14.12% (n=24) planned to be a sole legal guardian.

- Bisexual people planning parenthood stated that they planned to be joint legal guardians or have joint custody with the biological or adoptive-parent (31.82% and 27.27% respectively). Nearly one-third (n=7) did not know what their future legal status would be.
- Gay men planning parenthood predominantly anticipated having a joint legal guardian status (43.24%, n=16), or the status of a joint adoptive-parent (35.14%, n=13). Just over a half did not know what their legal status would be (n=19).
- Lesbians planning parenthood anticipated that they would be joint legal guardians in just over one-quarter of cases (n=27), or the sole legal guardian in 16.85% (n=15) of cases. Nearly a half (n=38) did not know what their future legal status would be.
- Of the people planning parenthood in the ‘something else’ category, 44.44% (n=4) planned to be a joint adoptive-parent, 33.33% (n=3) planned to be a joint foster-parent, 22.22% (n=2) a joint legal guardian, and 22.22% (n=2) planned to have joint custody with a biological or adoptive-parent. Over one half (55.56%, n=5) did not know what their legal status would be.

#### b) Findings from In-Depth Interviews

For the four lesbians planning parenthood, their biological status would ultimately determine their future legal status, with two planning to be biological parents and two planning to be non-biological parents. The three gay men planning parenthood were hoping to either foster or adopt children, so their potential future legal status would either be as sole legal guardians as adoptive-parents, or they would have no legal relationship as foster-parents.

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13 A donor-release programme allows donor-conceived children over 18 years of age to learn the identity of their donor.
8.4 Anticipated LGBT Parental Roles and Relationships

a) Anonymous Survey

The survey asked those planning to become parents, ‘Who they planned to parent with?’. The majority of the 155 respondents to this question, planned to parent with their partner:

- 79.41% (n=135) planned to parent with their partners.
- 4.71% (n=8) planned to parent alone.
- 4.21% (n=7) planned to parent with another person / people.
- 2.94% (n=5) planned to parent with a partner and other people.

When looked at by the sexual orientation of LGBT people planning parenthood:

- Bisexual people planning parenthood predominantly planned to parent with their partners, representing 63.64% (n=14) of bisexual people, while 13.64% (n=3) of bisexuals planned to parent with their partner and another person / people.
- Gay men predominantly planned to parent with their partners, representing 83.78% (n=31) of the gay fathers who answered this question.
- Lesbians were predominantly planning to parent with their partners, representing 85.39% (n=76) of those surveyed. Only 2.25% (n=2) planned to parent alone.
- Of the fourteen LGBT people planning to be parents in the ‘something else’ category, 64.29% (n=9) planned to parent with their partner and another person / people.

8.5 Anticipated Living Arrangements of LGBT People Planning Parenthood

a) Anonymous Survey

The survey sought to find out about the anticipated living arrangements of people planning parenthood. This is categorised into three different types of anticipated living arrangements: (1) living with partner and children, (2) living alone with children, and (3) parenting part-time.

Planning to Live with Partner and Children

The majority, 83.53% (n=142), of respondents planned to live with their partner and child / children. Regarding the sexual orientation of respondents who planned to live with their partner and child / children, 92.86% (n=13) of those in the ‘something else’ category planned to live with their partner and children, followed by 85.39% (n=76) of lesbian mothers, 83.78% (n=31) of gay fathers and 77.27% (n=17) of bisexual parents.

Planning to Live Alone with Children

3.53% (n=6) planned to live alone with their child / children. When looked at by sexual orientation, no lesbians, two bisexual people, one gay man, and one person in the ‘something else’ category who identified as gender-queer, planned to live alone with their children.

Planning to Parent on a Part-Time Basis

Only three LGBT people planning parenthood planned to live with their partner and parent on a part-time basis, and one LGBT parent living alone planned to parent on a part-time basis.

b) In-Depth Interviews

The majority of the LGBT people planning parenthood planned to live with their partner and children, with one single gay man planning to live alone with his child / children.
8.6 LGBT Parents who Do Not Plan to Live with their Children

a) Anonymous Survey

Five LGBT people who were planning parenthood and who did not plan to live with their children answered the questions about their experiences in planning parenthood roles. These experiences were overwhelmingly positive, with four gay men and one lesbian stating that they had a positive experience of participation in decision-making about future parenting roles, three gay men and one lesbian had a positive relationship with the planned biological parent, and three gay men and one lesbian stated that they had a positive relationship with the planned child’s immediate family.

These parents almost exclusively planned to have regular contact with, and provide support to, their future child/children. In five cases, it was anticipated that there would be legal custody/access and that maintenance and financial support would be provided. Four anticipated having regular access to their child/children. Three anticipated having regular contact with the child’s immediate family, although this was not the case for one LGBT person planning parenthood.

8.7 Conclusion

This chapter demonstrates the emergence of LGBT-planned families in Ireland. This evidence from the anonymous survey and the interviews shows that those planning parenthood are mainly doing so in the context of living with their same-sex partner and planning children together. Despite the barriers to parenthood, including the lack of legal status facing many LGBT people planning parenthood, LGBT people are planning to access AHR services, either at home or abroad, or enter into the adoption and fostering systems.

The sample of 170 LGBT people planning parenthood and the in-depth interviews with seven people planning parenthood, give an indication of future LGBT parenthood and family formation in Ireland. Because the sample represents planned LGBT families amongst people who are LGBT, the anticipated pathways into parenthood are less diverse than is evident from LGBT parents. The majority of respondents to the anonymous survey, principally lesbians, were planning to become parents through AHR from a known or unknown donor. The majority of those planning parenthood through adoption, fostering or surrogacy were gay men, while those planning parenthood through an opposite-sex relationship were principally bisexual.

Respondents to the survey were not always able to identify their future legal status as parents, but those who were able to do so, largely planned to be a joint legal guardian. The overwhelming majority planned to parent with a partner, while smaller numbers planned to parent alone or with another person. Of the small group of four gay men and one lesbian who planned to be parents but not live with their children, there were positive experiences of involvement in planning and decision-making for their future families. Four anticipated regular access and involvement with their future children.

The in-depth interviews provided some indication of the motivation and considerable decision-making involved in planning parenthood as an LGBT person, and showed that having an LGBT identity did not alter the interviewees’ desires to have children. Rather, it demonstrated their considerable commitment and motivation to have a family, given the often difficult decisions and costs involved.
Chapter 9: Being ‘Out’ and Support in Planned Parenting Roles

9.1 Introduction

This chapter looks at the evidence from the anonymous survey and the in-depth interviews of LGBT people who are planning parenthood, in relation to their experiences of being ‘out’ as LGBT people, and in relation to the types and levels of support in their planned parenting roles.

Summary

• The majority of respondents in the anonymous survey and in the interviews were ‘out’ in their roles as LGBT people planning parenthood. The highest number were ‘out’ to friends, followed by immediate family members, and informal and formal LGBT groups. The lowest numbers were ‘out’ in the local community and to neighbours.

• Partners and immediate family members provided the highest level of support. LGBT people planning parenthood received higher levels of support overall, compared to the levels of support received by LGBT parents.

• LGBT people planning parenthood had very low levels of support from LGBT support groups, and interviewees suggested that this type of support should be established within the LGBT sector.

9.2 Being ‘Out’ to Children, Family, Friends, Local Community and Work Colleagues

a) Anonymous Survey

The anonymous survey asked respondents to indicate who they were ‘out’ to as LGBT parents. The majority were ‘out’ in different parts of their social and public lives.

As Chart 34 shows, the majority of respondents were ‘out’ as LGBT people planning parenthood. The highest numbers of LGBT people planning parenthood were ‘out’ to friends, followed by immediate family members, and informal and formal LGBT groups. The lowest numbers were ‘out’ in the local community and to neighbours.

Chart 34: Who LGBT people planning parenthood are out to (n=170)

<table>
<thead>
<tr>
<th>Category</th>
<th>No Answer</th>
<th>Not Relevant</th>
<th>Out to some</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work colleagues</td>
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</tr>
<tr>
<td>Partner’s immediate family</td>
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<tr>
<td>Partner’s extended family</td>
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<tr>
<td>Neighbours</td>
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<tr>
<td>Local community</td>
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<tr>
<td>Informal and formal LGBT support</td>
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<tr>
<td>Immediate family</td>
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<td></td>
</tr>
<tr>
<td>Friends</td>
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<tr>
<td>Extended family</td>
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<td></td>
</tr>
<tr>
<td>Ex-partner’s family</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Child/children</td>
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</tr>
</tbody>
</table>
These are listed below under each of the ten categories, starting with the highest numbers who were ‘out’, and finishing with the lowest numbers.

‘Out’ to Friends
• 81.76% (n=117) were ‘out’ to friends, 13.53% (n=23) were ‘out’ to some and 1.76% (n=3) were not ‘out’ to friends. This was not relevant for 1.76% (n=3) of respondents, and 1.18% (n=2) did not answer.

‘Out’ to Immediate Family Members
• 79.41% (n=135) were ‘out’ to immediate family members, 7.06% (n=12) were ‘out’ to some, and 10.59% (n=18) were not ‘out’ to immediate family members. This was not relevant for 3.27% (n=5) of respondents.

‘Out’ to Informal and Formal LGBT Groups
• 64.71% (n=110) were ‘out’ to informal and formal LGBT groups, 7.06% (n=12) were ‘out’ to some, and 9.41% (n=16) were not ‘out’. This was not relevant for 15.88% (n=27) of respondents, and 2.94% (n=5) did not answer.

‘Out’ to Partner’s Immediate Family Members
• 58.24% (n=99) were ‘out’ to their partner’s immediate family members, 3.53% (n=6) were ‘out’ to some, and 13.53% (n=23) were not ‘out’. This was not relevant for 23.53% (n=40) of respondents, and 1.18% (n=2) did not answer.

‘Out’ to Some or All of their Extended Family Members
• 57.65% (n=98) were ‘out’ to some or all of their extended family members, 18.82% (n=32) were ‘out’ to some, and 17.65% (n=30) were not ‘out’. This was not relevant for 4.71% (n=8) of respondents, and 1.18% (n=2) did not answer.

‘Out’ to Work Colleagues
• 55.29% (n=94) were ‘out’ to their work colleagues, 22.35% (n=38) were ‘out’ to some, and 10% (n=17) were not ‘out’ to their work colleagues. This was not relevant for 9.41% (n=16) of respondents, and 2.94% (n=5) did not answer.

‘Out’ in the Local Community
• 52.35% (n=89) were ‘out’ in their local community, 14.12% (n=24) were ‘out’ to some people, and 14.71% (n=25) were not ‘out’. This was not relevant for 14.71% (n=25) of respondents, and 4.12% (n=7) did not answer.

‘Out’ to Some or All of their Partner’s Extended Family Members
• 50.59% (n=86) were ‘out’ to some or all of their extended family members, 5.29% (n=9) were ‘out’ to some, and 17.65% (n=30) were not ‘out’. This was not relevant for 24.71% (n=42) of respondents, and 1.76% (n=3) did not answer.

‘Out’ to Neighbours
• 49.41% (n=84) were ‘out’ to their neighbours, 17.06% (n=29) were ‘out’ to some, and 21.76% (n=37) were not ‘out’. This was not relevant for 9.41% (n=16) of respondents, and 2.35% (n=4) did not answer.
‘Out’ to Children

- 18.82% (n=32) of those planning parenthood were ‘out’ to their existing child / children, 0.59% (n=1) was ‘out’ to some of their child / children, and 7.06% (n=12) were not ‘out’ to their child / children. This was not relevant for 71.18% (n=121) of respondents, and 2.35% (n=4) did not answer. Overall, forty-five of those planning parenthood were planning to be parents again.

b) Findings from In-Depth Interviews

Similar to the findings of the anonymous survey, the in-depth interviews revealed that a high number of participants were ‘out’ as LGBT people. All of the interview participants who were planning parenthood, were ‘out’ to their immediate families, and, in general, their families had accepted them and were supportive of them, in their planned parenting roles.

9.3 Support for LGBT People Planning Parenthood

The survey sought to find out what level of support people planning parenthood received. This was rated as ‘a lot of support’, ‘some support’ or ‘no support’, and covered support from partners and ex-partners, immediate and extended family members, ex-partners, immediate family, the immediate and extended family of their partner, friends, LGBT community groups, the local community, neighbours and work colleagues. The highest level of support received by LGBT people planning parenthood was from the planning parent’s partner, followed by the planning parent’s immediate family and then by the planning parent’s friends.

Chart 35 summarises the support received by LGBT people planning parenthood. Across eleven categories of support, 25% (n=33) received a lot of support, 20% (n=26) received some support, 16% (n=20) received no support, and 39% (n=51) stated that this was not relevant to them. This Chart does not include 40 respondents who did not answer the question. The eleven categories where support was provided, are discussed in more detail below.

Support from Partners and Ex-Partners

a) Anonymous Survey

The highest level of support for LGBT people planning parenthood was received from their partners. In some cases, ex-partners also provided support.
• One half - 50.41% (n=101) - of LGBT people planning parenthood received a lot of support from their partners, while 3.35% (n=6) received some support, and one LGBT parent received no support. This was not relevant to 15.88% (n=27) of LGBT people planning parenthood and a further 20.59% (n=35) did not answer this question.

Support from LGBT-Planning Parents’ Immediate and Extended Families

a) Anonymous Survey
The next highest level of support was received from the immediate family of their partner. Slightly lower levels of support were received from extended family members.

• Just under one-third, 32.94% (n=56), of LGBT people planning parenthood received a lot of support from their immediate family, one-quarter - 25.88% (n=44) - received some support, and a much lower number - representing 7.06% (n=12) of respondents - received no support. This was not relevant to 12.94% (n=22) of respondents, and was not answered by 21.18% (n=36).
• Levels of support from extended family members were much lower. 15.88% (n=27) of respondents received a lot of support, 25.29% (n=43) received some support, and 17.56% (n=30) received no support.

b) In-Depth Interviews
In many cases, immediate families provided support to participants planning parenthood, as these examples of two gay man planning parenthood show:

They would definitely be there. I know my father and mother would, as much for me as for the child. And it would be important to have them there if something comes up in my life that I have to deal with. (07, gay man planning parenthood)

Oh yes! 180% supportive. They are totally behind us... my sister, for example, would be big into it, and is always [saying] like, ‘When are you going to adopt?’ (05, gay man planning parenthood)

Support from the Immediate and Extended Families of the Partners of LGBT-Planning Parents

a) Anonymous Survey
Slightly lower levels of support were received from the immediate and extended families of the partners of LGBT people planning parenthood.

• 22.94% (n=39) of LGBT people planning parenthood received a lot of support from their partner’s family, 23.53% (n=40) received some support, and 8.24% (n=14) received some support. This was not relevant to 22.35% (n=38) of respondents, and was not answered by 22.94% (n=39).
• A smaller number of people planning parenthood received support from their ex-partners and ex-partners’ families in their planned parenting roles.

Support from Friends

a) Anonymous Survey
Support from friends was the next highest category of support received by LGBT people planning parenthood.
• Just over one-third of LGBT people planning parenthood, 37.06% (n=63), received a lot of support from friends, 24.71% (n=42) received some support, and a much lower number representing 4.12% of respondents, received no support (n=7). This was not relevant to 12.35% of respondents (n=21), and was not answered by 21.76% of respondents (n=37).

b) In-Depth Interviews
Both ‘straight’ friends and LGBT friends were a considerable source of support for people to become parents. As two lesbians planning parenthood stated:

    Yes, all my friends have been very, very supportive. There have been loads of comments since we got married, like, ‘When are the babies coming?’ Yes, so all brilliant, and from my family as well, my family have been supportive. (24, lesbian planning parenthood)

    More ‘straight’ friends . . . they have all been amazing, really supportive. (25, lesbian planning parenthood)

LGBT friends who had children, were a significant source of guidance and support. As a lesbian planning to be a parent stated:

    We have been really lucky with some friends. We have the support of other lesbian couples with children, and so we have been able to go over to other people’s houses and ask them the most intimate questions about being a parent, questions as blunt as, ‘Do you love that baby as much as your biological child?’ And they have answered honestly, and that - in some ways - is probably unusual. ‘Straight’ couples probably don’t have that support or honesty, whereas I have had lesbian mums say to me, ‘Yes, at the beginning, it is a little bit strange, but after a while, it is all the same.’ (22, lesbian planning parenthood)

Support from LGBT Support Groups

a) Anonymous Survey
Relatively low levels of support were received from LGBT support groups, with a much higher number of LGBT people planning parenthood stating that they received no support, compared to some or a lot of support. Only 10.59% (n=18) of LGBT people planning parenthood stated that they received a lot of support, while 17.65% (n=30) received some support, and 17.06% (n=29) received no support. This was not relevant to 30% (n=51) of respondents, and 24.61% (n=42) did not answer the question.

b) In-Depth Interviews
Almost all of the LGBT people planning parenthood stated that they would like to get involved in an LGBT parent-support group. As one lesbian planning to be a parent said:

    Yes, we have a good friend who has children, and so we met up with her and her children. She encouraged us to come along to a monthly meet-up of other lesbian parents. So, if we did do it here, we have good supports, and we do know of other families. (24, lesbian planning parenthood)
One gay father had accessed support and information from a UK web site:

_There is a site in the UK for gay and lesbian couples who have adopted. I was on their forum and we did shout out a few times, ‘Hey, anyone from Ireland?’ We did so because we were scrambling for any information that was around._ (05, gay man planning parenthood)

### Support from Local Community Networks

**a) Anonymous Survey**

LGBT people planning parenthood experienced a similar low level of support from local community networks.

- 7.65% (n=13) stated that they received a lot of support, 15.88% (n=27) received some support, and 15.29% (n=26) received no support. This was not relevant to over one-third - 37.06% (n=63) - of respondents, and the question was not answered by nearly one-quarter - 24.71% (n=41) - of respondents.

### Support from Neighbours

**a) Anonymous Survey**

Support for prospective LGBT parents from neighbours also tended to be at a low level:

- 5.88% (n=10) received a lot of support in their planned parenting roles from neighbours, 12.35% (n=21) received some support, and 22.35% (n=38) received no support. This was not relevant to 36.47% (n=62) of LGBT people planning parenthood, and a further 22.94% (n=39) did not answer the question.

### Support from Work Colleagues

**a) Anonymous Survey**

The lowest levels of support were received from work colleagues.

- 13.53% (n=23) of LGBT people planning parenthood received a lot of support from their work colleagues, 18.82% (n=32) received some support, and 17.06% (n=29) received no support. This was not relevant to 27.65% (n=47) of respondents, and the question was not answered by 22.94% (n=39) of respondents.

**b) In-Depth Interviews**

Several of the interviewees described their work environment as being very supportive of them in their roles in planning parenthood, and some described their work environments as progressive. As was the case in the workplace of this lesbian who was planning parenthood

_They were all great, but I do work in a very liberal environment, and so that was fine. And my boss is a gay woman. So that is great, and she is very supportive._ (25, lesbian planning parenthood)
9.4 Conclusion

This chapter has shown that a large number of LGBT people planning parenthood are ‘out’ in their social and public lives. The largest numbers were ‘out’ to friends and immediate family members. Although similar large numbers are ‘out’ to informal and formal LGBT groups, it does appear that these groups do not provide the level of support that people planning parenthood indicate that they would need.

For many LGBT people planning parenthood their main source of support was their partner, which was not surprising, given the high number of respondents planning parenthood within a relationship. Over one half of respondents also received a lot of - or some - support, from their immediate families and friends. This positive finding indicates some societal recognition and acceptance of LGBT identities, and visibility as parents. However, lower levels of support were received from LGBT organisations and support groups, neighbours, the local community and work colleagues. The low levels of support from LGBT organisations and support groups, was particularly important in relation to planned parenting roles, as there was a perceived lack of awareness and recognition of LGBT families within the LGBT community. As with LGBT parents, there was an identified need for more support from within the LGBT community, through LGBT parent-support groups and peer support for the children of LGBT families. The need for structured support and information services targeted at LGBT people planning parenthood is a current gap that needs to be addressed within the LGBT community and amongst information-providers.
Chapter 10: Access to Services for LGBT People Planning Parenthood

We haven’t entered the [adoption] system, so we haven’t encountered any prejudice yet. Although, I suppose that the prejudice that we have met, is that we can’t do it. I suppose that’s the greatest prejudice that there is. (23, gay man planning parenthood)

10.1 Introduction

This chapter looks at the experiences of prospective LGBT parents in accessing services that support them in their plans to become parents. This covers access to AHR, adoption, fostering and surrogacy services, and takes account of positive and negative experiences of accessing education for children, health services, maternity services and other state services that support LGBT parents and their families.

Summary

- Compared to LGBT parents, LGBT people planning parenthood were much more likely to have a negative experience in relation to AHR services, adoption services, fostering services and information services.
- There were very low levels of positive experiences of adoption services; only 8% of respondents reported having a positive experience while nearly 49% reported having a negative experience.
- With AHR and adoption services, respondents and interviewees reported higher levels of positive experiences when they had accessed services abroad.
- Lack of information and clear guidelines on whether AHR, adoption and fostering services were open to LGBT people, was a major barrier for planning parents.

10.2 Positive and Negative Experiences of Accessing Services

The anonymous survey and the interviews sought to find out whether LGBT people planning parenthood had positive or negative experiences of accessing a range of services to support them in their parenting roles in the last five years. This is categorised into three main groups of services:

- Access to AHR, adoption, fostering and surrogacy services
- Health and maternity services
- Information-providers

Overall, a larger proportion of the sample of LGBT people planning parenthood, compared to the sample of LGBT parents, stated that they had positive experiences of accessing services. Chart 36 shows that 36% (n=115) had positive experiences, 43% (n=139) had some positive / some negative experiences, and 21% (n=67) had negative experiences of accessing these services.
The highest proportion of positive experiences for LGBT people planning parenthood was in relation to access to health and maternity services for themselves, while negative experiences were predominant in relation to adoption services, fostering services and information services.

### 10.3 Access to AHR, Adoption, Fostering and Surrogacy Services

#### a) Anonymous Survey

103 LGBT planning parents responded to the question about access to AHR services, adoption, fostering or surrogacy services, in Ireland or overseas. Of these, 60.19% (n=62) planned to access AHR, adoption or fostering services in Ireland, and 39.81% (n=41) planned to access these services abroad. 39.41% (n=67) did not answer this question.

When looked at by sexual orientation of the respondents:

- Of the eighty-nine lesbians, 40.45% (n=36) planned to access the services, predominantly AHR services, in Ireland and 26.97% (n=24) overseas. A further 32.58% (n=29) gave no answer.
- Of the thirty-seven gay men, 32.43% (n=12) planned to access these services, predominantly adoption services, in Ireland and 32.43% (n=12) overseas. A further 35.14% (n=13) gave no answer.
- Of the twenty-two bisexual people planning parenthood, 22.73% (n=5) planned to access the services in Ireland and 18.18% (n=4) overseas. 59.9% (n=13) gave no answer.
- Of the nine responses in the ‘something else’ category, one planned to access services overseas and three in Ireland. 55.56% (n=5) gave no answer.

Respondents were also asked if they had positive or negative experiences of accessing AHR, adoption and fostering services. The responses were as follows:

**AHR Services**
- Of the 64 respondents who stated that they had accessed AHR services, 40.62% (n=26) had a positive experience, 48.44% (n=31) had some positive and some negative experiences, and 10.94% (n=7) had a negative experience.

**Adoption Services**
• Of the 37 respondents who stated that they were planning to adopt a child, just 8.10% (n=3) had a positive experience, while 43.24% (n=16) had some positive and some negative experiences, and 48.66% (n=18) had a negative experience.

**Fostering Services**
• Of the 33 respondents who stated that they were planning to foster a child, just 21.21% (n=7) had a positive experience, 51.51% (n=17) had some positive and some negative experiences, and 27.27% (n=9) had a negative experience.

**b) In-Depth Interviews**

**Experiences of Accessing AHR Services**
LGBT people planning parenthood who had accessed, or were in the process of accessing, AHR services abroad, had more positive experiences, compared to those accessing the services in Ireland. The more positive approaches to LGBT parenthood in other countries generally seemed to result in greater availability of AHR services to LGBT people and a more progressive attitude from the staff working in these services.

Regardless of whether AHR was sourced from a known donor through a private arrangement, or from an anonymous donor through a fertility clinic, interviewees described the experience as often stressful, particularly if they were experiencing difficulties trying to conceive. However, those who were planning parenthood, showed resolve and commitment in becoming parents. It involved months - and sometimes years - of accessing AHR services, and repeated attendance at fertility clinics, as well as travel abroad.

The first barrier to accessing services in Ireland was the lack of information about where to access fertility services. Clinics were not open about their policy on this issue, and participants relied on word of mouth to ascertain which service to approach for treatment. As one lesbian planning parenthood stated:

> Yes, we had heard through the lesbian grapevine that they did accept lesbian clients. This was the big thing, because we had heard from so many lesbians that they had been turned away from other clinics. (22, lesbian planning parenthood)

Another had heard about a clinic abroad that had a positive attitude to lesbians:

> I spoke to one clinic over there, and they were really, really helpful and sound. They had no problem at all with us. They were also happy to treat us whenever we could get there. Whereas, when I started looking here in Ireland, they wouldn’t even return my calls. (24, lesbian planning parenthood)

One of the interviewees who had accessed an AHR service in Ireland, went on to access a service abroad, and had a very positive experience:

> And our experience over there was just so amazing, because we saw lots of other same-sex couples there and there was no weirdness. Whereas in [Irish clinic], some of the staff were almost overly compensating, so you did feel a bit awkward. [European city] was just so different, you forgot that you were a same-sex couple in the clinic. (22, lesbian planning parenthood)
Experiences of Accessing Adoption Services
The lack of legal rights for LGBT parents in relation to adoption services meant that the experiences of interviewees who were trying to adopt, have been very negative. A lack of information and clear guidelines on whether same-sex couples would be considered for adoption, was a major barrier to this gay man planning parenthood, who described how difficult it was to access information:

*I didn’t know then where else to go for information, and it wouldn’t be something we would run into doing, in case that it screwed up our chances at a later stage.* (23, gay man planning parenthood)

The adoption services in other countries compared favourably to the adoption services here. One gay man planning parenthood, explained how he and his partner had been eligible for assessment as a couple in the UK, and how accessible information had been there:

*... the system over there. We were perfectly fine to adopt as a couple over there... so we went to a couple of adoption meetings for more information.* (23, gay man planning parenthood)

Experiences of Accessing Fostering Services
Similar issues around a lack of information and clear policy guidelines about fostering services also proved to be a barrier for the three interviewees who were considering this pathway to parenthood. One gay man planning to be a parent, who also worked in the foster-care system, stated, that in his experience, there was a lack of clear policy within the system on the issue:

*... the system itself, the HSE, the bureaucratic wheel, it is not discouraging with the equality context, but it wouldn’t be encouraging either. For example, the HSE doesn’t go out of its way to advertise in the GCN [Gay Community News], or anywhere else where it says that there might be LGBT foster-carers available.* (7, gay man planning parenthood)

A lack of targeted information and advertising to promote the inclusion of LGBT people in applying to foster, was also raised by this interviewee:

*... there is no advertising for it, there is nothing out there saying we accept you, we want LGBT parents. I get huge lists - I don’t want to say the numbers – of children who are just sitting there in residential [care] or in inappropriate situations, and I can’t be the only other gay parent who wants to foster here.* (7, gay man planning parenthood)

He also raised the issue of the extra assessment criteria put in place for LGBT people, which he deemed to be inherently homophobic:

*There is an extra piece, which is actually used for assessing homosexual applicants. It is very personal. It delves into your sex life and sexuality. You’re asked questions similar to, ‘How do you cope with being gay?’ It’s indirect homophobia at worst and, at best, blatant ignorance.* (07, gay man planning parenthood)

10.4 Health and Maternity Services

a) Anonymous Survey
The survey asked respondents to indicate whether they had positive or negative experiences in accessing health and maternity services. Overall, health and maternity services recorded the
highest levels of positive experiences of services accessed by LGBT people planning parenthood although significant numbers did have some positive / some negative, and negative experiences, of these services.

Access to Health Services
- Of 77 responses, 49.35% (n=38) of LGBT people planning parenthood had a positive experience of accessing health services for themselves, 41.56% (n=32) had some positive / some negative experiences, and only 10% (n=7) had a negative experience.

Access to Maternity Services
- Of 54 responses, 50% (n=27) had a positive experience in relation to maternity services, 33.33% (n=18) had some positive / some negative experiences, and 16.67% (n=9) had a negative experience.

b) In-Depth Interviews
GP services also emerged as an important source of support for the lesbian and gay people who were planning parenthood. One lesbian describes the practical support given by her GP, while she and her partner accessed fertility treatment abroad:

> My GP was great because I needed sick notes to take time off for travelling with [accompanying partner] for procedures, and she was great. (25, lesbian planning parenthood)

10.5 Information Services
a) Anonymous Survey
- LGBT people planning parenthood tended to have had a negative experience in relation to access to information services. 25% (n=14) had a positive experience, 44.64% (n=25) had some positive / some negative experiences, and 30.36% (n=17) had a negative experience.

10.6 Conclusion
This chapter shows that LGBT people who embark on the journey to parenthood, experience considerable challenges and obstacles in accessing clear information and services. This often leads to an ethical dilemma for people planning parenthood, of whether to reveal their LGBT identity for fear of negative consequences. This can have serious practical and emotional consequences for people planning parenthood, and is one of the key reasons why many couples choose to access services abroad. Clear policies on treatment of LGBT people, and a welcoming and inclusive approach to service-provision, resulted in much higher levels of satisfaction for LGBT planning parents who accessed services abroad.

The anonymous survey and the interviews, showed the different experiences that LGBT people planning parenthood had, in accessing services to support them in their planned parenting roles. Some of the greatest difficulties arose for lesbians planning parenthood in accessing AHR services, and this led to over one-quarter of them putting in place plans to access these services overseas, as these were perceived to be more accepting and inclusive of LGBT people. Specific problems also arose for LGBT people who planned to access adoption and fostering services. The importance of accessible information about parenting rights, AHR, adoption and fostering services, was reiterated in both the anonymous survey and the interviews. Some respondents were not aware of the legal barriers to parenthood, or where they could access services. However, it is a welcome finding that nearly a half of respondents to the anonymous survey had
positive experiences of accessing health services for themselves, and likewise, one half in relation to accessing maternity services. Existing challenges remain for service-providers, in ensuring that attitudinal and policy changes take place, so that health and maternity services are inclusive of all LGBT people planning parenthood, particularly in assisting them to make informed choices, and in providing relevant medical and other support in planning parenthood.

In the interviews, the different treatment of LGBT applicants compared with heterosexual applicants was highlighted as a disappointing feature of the adoption and fostering systems in Ireland. System-wide change appeared slow, and there was a lack of recognition of LGBT families, and a lack of acceptance that LGBT people are capable of being suitable adoptive and foster-parents. That said, it is encouraging that people planning parenthood, generally had positive experiences of accessing health and maternity services. Again, access to information was highlighted as an important service for LGBT people planning parenthood, as this was an area where negative experiences prevailed.
Chapter 11: LGBT People Planning Parenthood - Experiences of Discrimination and Negative Attitudes

11.1 Introduction

This chapter documents the experiences of LGBT people who are planning parenthood, in relation to discrimination and negative attitudes that they have experienced in the last five years.

Summary

- A half of all LGBT people planning parenthood had experienced some form of discrimination or negative attitudes towards them as LGBT people planning parenthood in the last five years.

- All of the interviewees had experienced some form of discrimination against them as LGBT people planning parenthood, principally in relation to their lack of legal rights.

- Gay men planning to be LGBT people planning parenthood experienced slightly higher levels of discrimination or negative attitudes, compared to lesbians and bisexual people planning parenthood.

- Younger people planning parenthood experienced slightly higher levels of discrimination or negative attitudes, than planning parents in older age groups.

11.2 Experience of Discrimination and Negative Attitudes

a) Anonymous Survey

The survey asked respondents if they had experienced discrimination or negative attitudes towards them, as people planning parenthood. Of the 130 people responding to this question, Chart 37 shows that 50% (n=65) of LGBT people experienced discrimination or negative attitudes, and 50% (n=65) did not experience discrimination or negative attitudes in their planned parenting roles.
There are some differences regarding the experiences of discrimination or negative attitudes, when looked at by age, gender identity, sexual orientation and region:

- There are differences amongst those planning parenthood between the younger age groups and older age groups. Overall, younger LGBT people experienced the highest levels of discrimination. 75% (n=6) of those aged 19 years and under, experienced discrimination or negative attitudes, 68.18% (n=15) between the ages of 20 and 24 years and 52.38% (n=11) of those between the ages of 35 and 39, experienced discrimination or negative attitudes.

- When looked at by gender identity, 64.62% (n=42) of female-identified respondents, 26.16% (n=17) of male-identified respondents, 4.61% (n=3) of gender-queer-identified respondents, 3.08% (n=2) of trans women respondents, and 1.53% (n=1) of trans man respondents, had experienced discrimination.

- There are also some differences in LGBT parents’ experiences of discrimination or negative attitudes, according to sexual orientation. 48.57% (n=34) of lesbian respondents to the question, had experienced discrimination or negative attitudes, followed by 48.39% (n=15) of gay men. 11.29% (n=7) of bisexual respondents, 25% (n=1) of heterosexual respondents, and both of the respondents (n=2) who were questioning / not sure, had also experienced discrimination or negative attitudes. 37.5% (n=3) of those in the ‘something else’ category, experienced discrimination or negative attitudes.

- When looked at by region, 51.62% (n=16) of respondents in Munster, 50% (n=6) in Ulster, 50% (n=41) in Leinster and 33.33% (n=3) in Connacht, stated that they experienced discrimination and negative attitudes towards them as LGBT people planning parenthood.

a) Findings from the In-Depth Interviews

All of the interview participants had experienced some form of discrimination or negative attitudes to them as LGBT people planning parenthood, principally in relation to their lack of legal rights. The lack of legal rights and recognition for LGBT parents was of the greatest concern in relation to the rights of future non-biological parents. One lesbian who was planning parenthood with her partner, describes the impact of the lack of legal rights:
The whole legal side of things is very much to the forefront, and I just wish things were different. On top of all the strains and stresses of becoming a parent and the financial and emotional stress of fertility treatment, the lack of legal recognition adds another stress. (22, lesbian planning parenthood)

The lack of legal recognition also extended to concerns about non-biological family members, including grandparents. As one lesbian, non-biological, planning parent said:

Just thinking about my own mum, too. She would have asked when my partner was pregnant, ‘What are my grandparent’s rights?’ She got very upset one evening when I told her about it. And my brother, too. Up to that point, he didn’t really think about it, but when it came to children, when he realised that we were going to have children and that I would have no rights, he couldn’t believe it. (25, lesbian planning parenthood)

The existence of parenting rights for same-sex couples in other countries, was raised by a number of interviewees as an example of how equality could be achieved, and how legal recognition was a basis for changing attitudes towards LGBT parents. One lesbian planning parenthood gave this example:

We have friends who are a same-sex couple and who live in Spain. They are married, have two children, and they said it is just so much easier. They said they would never move back here because their family is just like everyone else’s. There is no weirdness, and both their names are on the birth-cert. I think that when your rights are enshrined in legislation, then even if there is homophobia, at least people know that it is not okay. (22, lesbian planning parenthood)

Another lesbian who was planning parenthood, considered moving back to her country of origin because of the legal protections that were afforded to LGBT parents there:

I’ve also looked into the potential of it being done back home [in Australia], and from a legal point of view, as a non-biological parent, I would still be named on the birth cert. That would be really important as it is not going to happen here . . . I think Ireland is forward thinking in one way, but in the dark ages about this. (24, lesbian planning parenthood)

11.3 Conclusion

The fact that 50% (n=65) of respondents to the anonymous survey and all of the interviewees, stated that they had experienced discrimination or negative attitudes towards them as LGBT people planning parenthood, is an issue of concern and should be addressed in public policy. Gay men, female-identified and trans respondents, and younger people planning parenthood, experienced the highest levels of discrimination or negative attitudes towards them. Experiences of discrimination or negative attitudes were highest amongst the sample living in Munster, followed by Ulster and Connaught, with slightly lower levels in Leinster. As with the findings from the sample of LGBT parents, overwhelmingly, interviewees stated that discrimination or negative attitudes arose from a lack of legal status, a lack of visibility and a lack of recognition of LGBT families in legislation and government policies.

Discrimination experienced by LGBT people, particularly in relation to the legal and policy barriers faced by them when becoming parents, was a significant concern to people who participated in the interviews. As evidenced in the previous chapters, LGBT people planning parenthood often do so with the support and encouragement of their family and friends, and
accounts given in this chapter, illustrate that the impact of discrimination reached beyond those planning parenthood to their immediate family members, who also faced a lack of legal recognition of their relationship to future children.
Chapter 12: Legal and Other Changes to Improve the Lives of People Planning to be LGBT Parents

Marriage Equality, full stop. For me, that is the most important legal change . . . and having all of those equality rights that come with it . . . (05 gay man planning parenthood)

12.1 Introduction

The impact of the lack of legal rights, was an overriding concern for people planning parenthood, and particularly, because a large proportion of the sample planned to parent with their partners.

Summary

- The top-ranking, legal change for LGBT people planning parenthood was civil marriage and the access to joint adoption that this would bring. This was followed by the right of a child to have a legal relationship with their parents / carers.

- The top-ranking, other change that would have an impact on the lives of LGBT parents, is for government policies & state services to reflect the diversity of family life. This is followed by access to schools that respect the diversity of family life, and health services that respect the diversity of families.

- Within the interviews, participants also ranked highly the need for LGBT support services for those planning parenthood.

12.2 Top-Ranking Legal Changes for LGBT People Planning Parenthood

a) Anonymous Survey

The top-ranking legal changes for LGBT people planning parenthood identified from the anonymous survey are reflected in Chart 38.

Chart 38: Top ranking legal issues - LGBT people planning parenthood (n=96)

- Civil marriage for same-sex couples
- Both names on the birth cert of our child
- Gain guardianship and custody rights to... (05 gay man planning parenthood)
- Same rights to parental benefits as...
- Right to a legal relationship with the...
- Right to apply for joint adoption of the...
- Eligible to be considered as adoptive...
- Gain legal access to my child
- Seek guardianship of my child
- Right to access, maintenance and...
- Accessible and affordable AHR services
- Other

0 10 20 30 40 50 60 70 80
The top-ranking legal change was for civil marriage for same-sex partners (ranked top by 67 LGBT people planning parenthood), followed by having both names on the birth certificate (ranked second by 62 LGBT people planning parenthood), and then to have guardianship and custody rights for children (ranked third by 58 LGBT people planning parenthood). Equally ranked fourth and fifth, were for LGBT parents to have the same rights to parental benefits as opposite-sex parents, and for the same rights to access, maintenance and succession for the non-biological parent. These were followed by the right to apply for joint adoption of the child by the child’s non-biological parent; eligibility to be considered as adoptive-parents; to gain legal access to the child; seek guardianship of a child / children; and to have accessible and affordable AHR services.

The anonymous survey also gave respondents an opportunity to write comments in a comment box on this issue. A total of 57 comments were made by respondents who were planning parenthood. When these are ranked by priority, the top four issues were under the following headings: (1) civil marriage for same-sex couples, (2) allow civil partners to gain guardianship and custody rights, (3) the child should have the legal right to a relationship with the parent who cares for them, and (4) to be eligible to be considered as adoptive-parents. 50.88% (n=29) of responses were made by lesbians, 14.03% (n=8) by gay men, 10.52% by bisexual parents, and 5.26% (n=3) by those in the ‘something else’ category.

b) In-Depth Interviews

The two, most important, legal changes raised by participants in the in-depth interviews, were the same two top-ranked issues, for participants in the anonymous survey:

• First, the right for same-sex couples to have their parenting roles legally recognised. Marriage was seen as giving a widespread protection to both LGBT parents and their children, including adoption rights for non-biological parents (57%).

• Second, for the child to have the right to a legal relationship with the parents who care for them (42% ranked this as the top issue).

A number of other legal changes were raised, which included the need for constitutional protections for LGBT parents and their children, and access to affordable and accessible AHR services.

This lesbian planning parenthood, in discussing the Irish Constitution, articulated the feelings that were expressed by several other interviewees:

*It really needs to be about constitutional barriers for parents and their children. It’s almost like there are first, second and third-class children in this country, the way the law is set up.* (10, lesbian planning parenthood)

One lesbian planning parenthood, highlighted access to AHR, including the prohibitive costs of services:

*We spent over €20,000, and it is a huge thing, the burden of cost. We are very conscious that this won’t be an option for so many lesbian couples, who don’t have funds like that.* (22, lesbian planning parenthood)
12.3 Other Changes that could improve the Lives of LGBT Parents

a) Anonymous Survey

The anonymous survey also asked LGBT parents to rank other changes that could improve the lives of LGBT parents. Chart 39 shows the top-ranking issues for all parents, which are also described below.

The top-ranking other change identified by LGBT people planning parenthood was to have government policies and state services reflect the diversity of family life (ranked top by 69 LGBT people planning parenthood), followed by access to schools that respect the diversity of family life (ranked second by 60 LGBT people planning parenthood), and then to have more contact with the person’s child/children (ranked third by 52 LGBT people planning parenthood). Next was to have access to health services that respect the diversity of families, then to have access to support and groups for children in LGBT families, and followed by having more contact with the person’s child/children.

b) In-Depth Interviews

Three main issues that would improve the lives of LGBT parents, and which were raised in the interviews, were as follows:

- Information on legal rights and access to services, including adoption, fostering and fertility treatment
- The need for LGBT support groups for parents and children
- Awareness-raising and training for service-providers, particularly for education professionals

Access to Information on Legal Rights and Access to Services, including Adoption, Fostering and Fertility Treatment

Four out of seven interviewees ranked the availability of information on the legal rights of LGBT people planning parenthood, including access to information about adoption, fostering, and AHR services, as the most important other change for them as planning parents.
Two interviewees described the existing gap in information about legal and parenting rights, and suggested that LGBT organisations could play a part in providing accessible information:

. . .to make people aware of services, because without my partner, knowing where to go, etc., I would have been lost. And nobody has a clue, not GPs, nobody. I think some LGBT organisation should have this information on their web site. (25, lesbian planning parenthood)

. . .information for couples like us. For example, if you are planning to be gay parents . . . and to have all of the information that you would need, because in the UK they have all the information like that in Stonewall’s [a UK charity for lesbians, gays and bisexuals], and that is brilliant. (23, gay man planning parenthood)

**LGBT Support Groups for Parents and Children**

Arising from discussions about the need for information, came several calls for support groups to be established, as interviewees felt groups would be a great way to share information, as well as accessing support. This gay planning parenthood, describes how he felt a support group could help in his journey to parenthood:

. . .groups would be great, like to know other people who went through the process. For us you know, we are trying to find out, if there is somebody else who did it, who went down this road. We could go and talk to them, and even if we are getting nowhere, at least if there was somebody else there who has been through the same as us . . . (05, gay man planning parenthood)

**Awareness-Raising for Service-Providers**

During the interviews, planning parents highlighted the importance of service-providers having more awareness of the needs and situations of LGBT people. This was particularly discussed in relation to education and health care settings. As this lesbian planning parenthood stated:

So there needs to be awareness-raising right across the spectrum, across everyone who works in education. While you can’t stop people from being homophobic, at least they would know it is not okay . . . the same goes for the medical profession and right across the public sector. (22, lesbian planning parenthood)

**12.4 Conclusion**

The legal and other changes deemed to be necessary to improve the lives of LGBT people planning parenthood in Ireland, along with the findings from this study of LGBT parents, form the basis of the recommendations made in this report. The most important legal change, as with LGBT parents, is for prospective LGBT parents to have the same legal rights as opposite-sex couples who have entered into a civil marriage. This is not surprising, given that respondents identified a lack of legal rights to be the main cause and effect of discrimination and negative attitudes. Other high-ranking changes that LGBT people planning parenthood identified that would improve the lives of LGBT parents, also include the need for government policies, school policies, etc., to reflect the diversity of family life. Interview participants viewed equal access to marriage for LGBT people as being critical in improving legal parenting rights, particularly in the area of adoption, but also in bringing about wider equality for, and acceptance of, LGBT people.

There was also strong support for legal measures, which prioritised the best interests of children, on the basis that the sexual orientation of parents should not determine their rights to legal recognition of their relationship with their parents. The law needed to develop in order to
recognise diverse family forms, and to ensure that children had a legal right to a relationship with the people who cared for them.

Given the mixed experiences of LGBT people planning parenthood when accessing services, and fears that their sexual orientation or gender identity would expose them to discriminatory practices, it is not surprising that another important issue relates to access to state services that reflect the diversity of family life. This highlights the need for policy makers and key people involved in providing health, education and information services, to consider and include the specific needs of LGBT-headed families.

The importance of networks and support groups was mentioned throughout this research report, and given the lack of information regarding pathways to parenthood, there was significant support for an information service to be provided by existing LGBT organisations.
Chapter 13: Conclusions and Recommendations

It has been wonderful, both the experience of having a child and then of her acceptance of me. You know the relationship has changed slightly, but in a positive way. (13, trans parent)

13.1 Conclusions

a) Introduction

This study, the first of its kind in Ireland, has shown that there is a rich diversity of parenting roles, relationships and family life amongst LGBT families in Ireland today. Becoming a parent and sustaining parenthood is not without its challenges for any parent. However, LGBT parents and those planning parenthood face risks of discrimination or negative attitudes, exclusion from legal parenting roles and risks of familial or societal rejection, that opposite-sex parents do not face.

The study has shown the multiple ways by which LGBT people become parents or who are planning to become parents, and the considerable resources and commitments that are given to this. Pathways to parenthood involve planned conception through AHR from a known or anonymous donor, parenthood from a previous opposite-sex or same-sex relationship, step-parenthood, adoption, fostering and surrogacy, and a combination of one or more of these. This results in complex sets of family relationships and in many cases results in difficulties experienced by parents in forming a legal, parental relationship. The study has shown the importance of legally recognising the non-biological status of LGBT parents who are co-parents or step-parents in relation to their parental rights and protection of their children.

LGBT people are involved in complex processes in their pathways to parenthood, in negotiating personal and family relationships and in sustaining parenting relationships. This often means having to stand up against heteronormative and homophobic assumptions, having to counter potential risks of rejection by family members and societal prejudices. That LGBT parents in the study had a strong desire to be parents was evidenced from the preparedness to invest time and resources in planning parenthood and in sustaining parental relationships in the longer term. Those planning parenthood were acutely aware of the difficulties that were ahead of them on their journey, while LGBT parents had to address challenges within their family and kinship networks when they had assumed a new, sexual orientation or gender identity.

One of the interesting findings from the study is how LGBT parents share parenting responsibilities and childcare equally, and through this actively promote a different model of family life. Some LGBT parents were committed to actively promoting family diversity and advocated for the recognition of different parenting and family models, in order to counteract the impact of heteronormativity on their children. For some of the LGBT parents and LGBT people planning parenthood who were interviewed there was an overriding concern to show that they were equal parents, in order to ensure that the non-biological parent was regarded by outsiders as an equal parent.

Another key finding from the research is that LGBT families are creating new, family formations that are not recognised in official policies. This suggests that government policies should aim to facilitate a greater diversity of family relationships that would reflect the circumstances of the lives of LGBT parents and families, rather than a single model or ideology of the family. Families today are more diverse than ever before, and alternative ways of conceptualizing families are urgently needed to take account of the diversity of relationships and changes in family life. This
is essential to the development of supportive, family policies that take account of the complex web of personal, familial and kinship ties and relationships that exist amongst LGBT parental and family relationships. The dominant notion of the ‘nuclear’ family, made up of an opposite-sex, married couple with children in an economic unit, fails to take account of the diverse and varied ways in which people live and parent. This particularly affects LGBT parents and their families, who parent and form families through biological and non-biological parental roles, and often through parental relationships that are formed through step-parenting, multiple parenting roles and parenting across several households.

This should compel policy makers to reconsider what is ‘normal’ family life, away from traditional and rigid notions of family, and to reflect and take account of diverse family and parenting relationships. LGBT parenting roles, relationships and family formations, therefore, need to be factored into public discourse, so that it reflects more accurately modern-day parents and family life.

At a societal level, homophobia and heteronormativity continue to pervade the lives of many LGBT parents and those planning parenthood; this is evidenced from the qualitative interviews, and the fact that 46% of LGBT parents and 50% of LGBT people planning parenthood who responded to the survey, had experienced discrimination. This exists at an institutional level, whereby some LGBT parents have no legal role as parents, and at a societal level, whereby LGBT families are viewed as being ‘abnormal’ or potentially damaging to child welfare and family well-being. The survey found that this is most acute for trans parents, where significant levels of transphobia result in discrimination, isolation and rejection by family and society. However, this study also shows that when LGBT parents ‘come out’ to their children, families, friends and work colleagues, that there is often an overwhelming acceptance of - and support for - them in their parenting roles.

b) LGBT Parents

LGBT Family Formation and Parental Status
The 153 LGBT parents who responded to the anonymous survey and the eighteen LGBT parents who participated in in-depth interviews provide a picture of LGBT parents in Ireland today. One of the key themes running through this study is the lack of legal rights for non-biological parents. In the anonymous survey, the majority of those with no legal status were lesbians. They were predominantly the non-biological parents of children of their partners, or were step-parents after they entered a new relationship with a partner who had a child from a previous same-sex or opposite-sex relationship, often with the ex-partner still involved in parenting. Lesbians were also the group most likely to become parents through AHR from a known or unknown donor. As a result, lesbian-headed families often combine biological and non-biological parental relationships within one family unit. Bisexual parents, gay fathers and heterosexual parents, were most likely to be parents from previous opposite-sex relationships. Each of the trans parents responding to the anonymous survey had their children from a previous opposite-sex relationship. Overall, just over one half of respondents to the survey - principally gay men, lesbians and trans people - had become parents through a previous, opposite-sex relationship; a further one-fifth had become parents through a private AHR clinic; and 15% had become a parent through a private, known-donor arrangement (principally lesbians).

The survey also shows that one-third of respondents parented with their partner, one-fifth parented alone, and a smaller number parented alone with others or parented with their partner and others. A small number, principally gay fathers who did not live with their children, were either donor-parents, or parented with an ex-partner from a previous, opposite-sex
relationship. Positive parenting relationships with, and participation in the lives of their children, were highlighted in both the anonymous survey and the interviews. Trans parents experienced some of the biggest difficulties, and in one case, access had been denied. These findings point to the need for a greater political recognition of the diversity of family forms in Ireland today. This suggests that the reality of LGBT parenting roles, relationships and family formations, needs to be factored into public discourse, so that legislation and policies reflect more accurately modern-day parents and family life.

**Being ‘Out’ and Gaining Support as LGBT Parents**

Struggles for legal recognition are balanced somewhat by the acceptance of, and the support given, to LGBT families by immediate family members, children, friends and work colleagues. This is at odds with government policy that restricts rights for LGBT parents, compared to the rights granted to opposite-sex parents.

Evidence from the anonymous survey and the interviews, shows that the majority of LGBT people were ‘out’ as LGBT parents in different parts of their social and public lives. The highest numbers were ‘out’ to their immediate family members and friends, and the lowest numbers were ‘out’ to neighbours and to people in their local community. Being ‘out’ as LGBT parents often takes place with care and consideration to children and immediate family members. The accounts given by LGBT parents of their experiences of being ‘out’, and of the support they received, demonstrate the struggles and difficulties in gaining support and acceptance, while also showing remarkable stories of family resilience, acceptance and support. Trans parents, in particular, experienced the greatest resistance, or a lack of acceptance, from society, family members and former opposite-sex partners; however, a number of trans parents had maintained good relationships with their children and ex-partners.

Levels of support received by LGBT parents ranged from high levels of support sought and received from immediate family members, to lower levels of support sought and received from LGBT organisations and support groups, neighbours, the local community and work colleagues. While lesbians, bisexual parents and gay fathers reported relatively high levels of support from immediate family members and ex-partners, this was not always the case for the small sample of trans parents, who spoke in the interviews of experiences of isolation, rejection and a low level of family support. Despite this, the responses of the trans parents in the anonymous survey, showed high levels of acceptance by children; however, this was not the case in relation to the immediate family of one trans parent and the ex-partner of another.

The low level of support received by LGBT parents from LGBT organisations and support groups, is an important finding from this study. In the anonymous survey and in the interviews, LGBT parents identified the need for more support for LGBT parents in their parenting roles, including support groups for LGBT parents and peer-support for children of LGBT families.

Children are often the most accepting of their parent’s LGBT identity. Although this is a result of a deep attachment that children have to their parents and the care taken by parents in supporting children to understand their sexual orientation or gender identity, it can also be explained by the fact that children are more open to difference, and have not been exposed to heteronormative and homophobic societal attitudes. Examples of children’s resilience and acceptance of their parent’s LGBT identity are particularly evident from the responses of some of the trans parents who participated in the interviews. These trans parents had, in fact, developed positive and supportive relationships with their children.
This shows that substantial numbers of LGBT parents have experienced positive relationships, and have established and maintained close family and kinship ties that have strengthened their parenting roles. In some instances, this brought them closer to their families than would otherwise have been the case if they had not been parents. Lesbian, gay and bisexual parents, and those planning parenthood, generally received high levels of acceptance of their parenting roles, while trans parents experienced some of the greatest difficulties.

The general acceptance is reflected in positive values, recognition and acceptance of LGBT identities and visibility as parents in their immediate family, kinship and friendship networks. It demonstrates the significant levels of the resilience of LGBT parents and of family support given to LGBT parents, including, in many cases, support from former opposite-sex partners. This is a reflection of improvements in societal acceptance of LGBT identities and visibility, notwithstanding the struggles some LGBT parents have in gaining recognition of their parenting roles.

**Access to Services for LGBT Parents**

The anonymous survey and the interviews showed the different experiences LGBT parents had of accessing services to support them in their roles as LGBT parents. Evidence from the survey, shows that clear policies on the treatment of LGBT people and a welcoming and inclusive approach to service provision, resulted in much higher levels of satisfaction for LGBT planning parents who accessed services abroad.

Some of the greatest difficulties arose for lesbians in accessing AHR services in Ireland, and this highlights the need for clear policies and information in the area of AHR, as well as in relation to surrogacy. LGBT people planning parenthood also experienced considerable difficulties in accessing adoption and fostering services. The different treatment of LGBT-headed families, compared to opposite-sex families, was a disappointing feature of the adoption and fostering systems in Ireland. Although some individuals within the system were very supportive of LGBT parents, systemic change appears slow, and there is a lack of willingness to accept evidence that LGBT people are capable of being suitable adoptive and foster-parents. There are particular implications for the provision of more accessible information about these services, and also in relation to extending rights to LGBT parents to foster and adopt as LGBT individuals and couples.

Respondents to the anonymous survey and participants in the interviews, revealed both the challenges and the experiences of accessing other services in the areas of health and maternity, education (crèches, preschools and schools) and information. An important finding is that a large number of LGBT parents had positive experiences of accessing health and maternity services, suggesting that there is a greater awareness and understanding of the needs of LGBT parents and families in these areas. However, problems arose for non-biological parents who, because of a lack of legal status, did not have parental rights in relation to decisions about their child / children’s health, care or education.

Experiences of the school system were very mixed, with some very positive experiences with individual schools and teaching staff and their recognition and support of LGBT families, but also some very negative experiences. This shows the need for training and awareness strategies for education professionals regarding the existence of LGBT families and in relation to inclusive school policies. This is particularly important in ensuring that children of LGBT parents do not experience bullying in the classroom, and also in ensuring that they could participate in an educational setting that recognises and validates family diversity. The prevailing lack of legal recognition and official policies to support LGBT families, means that LGBT parents still face
legal, medical and social barriers, and remain exposed to systemic and individual prejudice and discrimination from service-providers.

**LGBT Parents’ Experiences of Discrimination and Negative Attitudes in the Last Five Years**

The fact that 45.9% (n=56) of respondents to the anonymous survey and all the interviewees stated that they had experienced discrimination or negative attitudes towards them as LGBT parents, is an issue of concern. Discrimination was highest for younger parents, gay fathers, female-identified respondents and all of the parents who identified as trans and gender-queer. It is also relevant to note, that experiences of discrimination or negative attitudes were highest amongst the small sample living in Ulster and Connaught, and were lowest in Leinster and Munster. This finding suggests that action to address discrimination and negative attitudes, needs to take place across all counties, and specifically, needs to take account of awareness of - and attitudes to - LGBT parents in Ulster and Connaught.

The interviews were an opportunity to gain an insight into the perceptions and experiences of LGBT parents in relation to discrimination or negative attitudes. Overwhelmingly, interviewees stated that discrimination or negative attitudes arose from a lack of legal status, visibility and recognition of LGBT families in legislation and government policies. Although all trans parents participating in the anonymous survey and interviews had parental rights, they highlighted negative experiences of attitudes towards them from family members, a lack of understanding of their situations and difficulties arising from a lack of societal recognition of their status.

The absence of a legal framework that recognises the diversity of LGBT families meant that parents were denied specific legal recognition of their parenting roles, and this impacted on every aspect of their family lives. The potential implications that this had in situations of illness or death within a family, caused particular anxiety and stress. Other routine events, such as signing school sick notes, were a constant reminder of this lack of recognition. Reliance on the goodwill towards LGBT parents for acceptance of their parental status, was evident both in society generally and in an institutional context, with many examples of individuals within the system being very supportive of ‘non’ legal parents. However, this reliance on the discretion of others, left LGBT parents feeling vulnerable, and did not lessen the level of stress experienced by LGBT parents resulting from the lack of legal recognition of their parental relationship.

The lack of legal rights and the resulting legal vulnerability that this caused for LGBT parents and their children were seen as the greatest forms of discrimination experienced. In some cases, being an LGBT parent was met with homophobic or transphobic responses. The negative reactions and attitudes, towards trans parents in particular, and the resulting isolation and stress that these brought on those parents and children, demonstrated the most extreme examples of LGBT victimisation in this study.

**Legal and Other Changes to Improve the Lives of LGBT Parents**

The legal and other changes deemed necessary to improve the lives of LGBT parents in Ireland, as identified by respondents to the survey and from the qualitative interviews, form the basis of the recommendations made in this report. In relation to legal status, it is not surprising that the most important legal change is for LGBT parents to have the same legal rights as opposite-sex couples who have entered into a civil marriage. Other high-ranking changes that would improve the lives of LGBT parents, include the need for government policies on health, education, etc., that would reflect the diversity of family life. In addition, the interviews also highlighted the importance of access to information about AHR, adoption and fostering rights, and awareness-raising for service-providers, including schools.
In the interviews, there was also strong support for legal measures which prioritised the best interests of children, and in this regard, there was a similar level of support for the view that their parents’ sexuality or gender identity should not determine their rights to legal recognition of their relationship with their parents. Interviewees highlighted the need for legal change, in order to recognise diverse family forms and to ensure children had a right to a relationship with the people who cared for them. This principle should be extended to the area of guardianship, so that non-biological parents’ relationship to their children can be recognised in law.

The importance of peer networks and support groups was also highlighted as being a key priority. Support from peers was often seen as crucial, as only other LGBT people, with similar experiences, could fully understand and respond to their support needs. Given the lack of information regarding pathways to parenthood, there was also significant support for an information-type service as an extension to an existing LGBT group.

c) LGBT People Planning Parenthood

LGBT Family Formation and Parental Status of LGBT People Planning Parenthood
The sample of 170 LGBT people planning parenthood and the seven in-depth interviews with people planning parenthood, gives an indication of future LGBT parenthood and family formation in Ireland. Because the sample represents planned LGBT families amongst people who are LGBT, the anticipated pathways into parenthood are less diverse than is evident from LGBT parents.

The majority of respondents to the anonymous survey, principally lesbians, were planning to be parents through AHR from a known or unknown donor, either through a private clinic or through a known-donor arrangement. The majority of those planning parenthood through adoption, fostering or surrogacy were gay men, while those planning parenthood through an opposite-sex relationship were principally bisexual. It is particularly interesting to note the high numbers of gay men overall, who were planning parenthood through adoption and / or fostering.

Respondents to the survey were not always able to identify their future legal status as parents. The overwhelming majority planned to parent with a partner, while smaller numbers planned to parent alone or with another person. The small group of four gay men and one lesbian, who planned to be parents but not to live with their children, had positive experiences of involvement in planning and decision-making for their future families. Four anticipated regular access and involvement with their future children.

Being ‘Out’ and Support in Planned Parenting Roles
The majority of LGBT people planning parenthood responding to the anonymous survey and in the interviews were ‘out’ to their friends and immediate family members. The lowest numbers were ‘out’ to neighbours and to members of their local community. Levels of support received by LGBT people planning parenthood ranged from high levels of support from partners and immediate family members to lower levels of support from LGBT organisations and support groups, neighbours, the local community and work colleagues. The low levels of support from LGBT organisations and support groups were particularly important in relation to planned parenting roles, as there was a perceived lack of awareness and recognition of LGBT families within the LGBT community. As with LGBT parents, there was an identified need for more support from within the LGBT community through LGBT parent-support groups and peer support for the children of LGBT families.
Access to Services for LGBT People Planning Parenthood

LGBT people who embark on the journey to parenthood experience considerable challenges and obstacles in accessing clear information on accessing services, e.g. in relation to AHR, adoption and fostering. People planning parenthood are often faced with an ethical dilemma of whether to reveal their LGBT identity when trying to access services, for fear of negative consequences. This can have serious practical and emotional consequences for LGBT people who are planning to be parents, and is one reason why many choose to access services abroad.

Some of the greatest difficulties arose for lesbians planning parenthood in accessing AHR services. This led to over one-quarter of them putting in place plans to access these services overseas, as these were perceived to be more accepting and inclusive of LGBT people and providing a better quality and range of services at a lower cost. Specific problems also arose for LGBT people who planned to access adoption and fostering services. The importance of accessible information about parenting rights, AHR, adoption and fostering services was reiterated in both the anonymous survey and the interviews. Some respondents were not aware of the legal barriers to parenthood, or where they could access services.

However, it is a welcome finding that nearly a half of respondents to the anonymous survey, had positive experiences of accessing health services for themselves, and one half had positive experiences in relation to maternity services. Challenges remain for service-providers in ensuring that attitudinal and policy changes take place, so that health and maternity services are inclusive of all LGBT people planning parenthood, and particularly so, in assisting them to make informed choices and in providing relevant medical and other supports in planning parenthood.

LGBT People Planning Parenthood: Experiences of Discrimination or Negative Attitudes in the Last Five Years

The fact that 50% (n=65) of respondents to the anonymous survey and all the interviewees, stated that they had experienced discrimination or negative attitudes towards them as LGBT people planning parenthood, is of concern. Gay men, female-identified respondents, trans respondents and younger people planning parenthood, experienced the highest levels of discrimination or negative attitudes towards them. Experiences of discrimination or negative attitudes were highest amongst the sample living in Munster, followed by Ulster and Connaught, with slightly lower levels in Leinster. As with the findings from the sample of LGBT parents, overwhelmingly, interviewees stated that discrimination or negative attitudes arose from a lack of legal status, visibility and recognition of LGBT families in legislation and government policies.

Legal and Other Changes Identified by People Planning Parenthood

The legal and other changes deemed necessary to improve the lives of LGBT people planning parenthood in Ireland, along with the findings from this study of LGBT parents, form the basis of the recommendations made in this report. The most important legal change, as with LGBT parents, is for LGBT people planning parenthood to have the same legal rights as opposite-sex couples who have entered into a civil marriage. Other high-ranking changes that LGBT people planning parenthood put forward for improving the lives of LGBT parents, include the need for government policies on health, education, etc., that would reflect the diversity of family life.
13.2 Recommendations

The recommendations arising from the findings of the LGBT Parenthood Study are set out below.

i) Legal Changes for LGBT Parents

- **Civil Marriage:** In line with the recommendations made by the ICCL in 2006, same-sex couples should no longer be barred from entering into a civil marriage. This was also the top-ranking legal change identified by LGBT parents and LGBT people planning parenthood in both the anonymous survey and the qualitative interviews. Section 2 (2) (e) of the Civil Registration Act 2004 should be repealed, allowing persons to marry each other irrespective of their gender (whether ascribed at birth or not). The introduction of civil marriage for same-sex couples would achieve equality of legal status with opposite-sex couples, and would allow for the conferring of parental rights and responsibilities on LGBT parents (which already exist in Irish law for married couples), including the constitutional protection afforded to married families.

- **Adoption:** In line with the recommendations made by the Ombudsman for Children in 2009, the categories of persons eligible to apply for an assessment of suitability to adopt should be extended to same-sex couples.

- **Second-Parent Adoption:** In line with provisions that exist in other countries, legislation should be introduced to enable second-parent adoption, which would allow a same-sex parent to adopt a partner’s biological or adoptive child, without terminating the legal rights of the first parent.

- **The Right to be Eligible to Apply to Adopt a Child who is Fostered:** LGBT parents who have fostered a child / children, should be allowed to apply to adopt a child / children, in line with current policy for married opposite-sex couples that foster. This right should also be extended to all single foster-parents, irrespective of their sexual orientation or gender identity.

- **Guardianship Rights / Parental Responsibility:** Legislation should be introduced for guardianship / parental responsibility to be extended to all carers who have a parental relationship with the child / children, including non-biological parents. This would go further than the recommendations of the 2010 Law Reform Commission’s Report on Legal Aspects of Family Relationships which recommended that legislation be introduced to facilitate the extension of parental responsibility to civil partners and step-parents.

- **Right for Same-Sex Parents to be on the Birth Certificate:** There should be automatic joint registration of same-sex parents on a birth certificate, in circumstances where a child has been jointly planned in a same-sex couple.

- **Gender Recognition:** The legal rights of trans parents should be protected, and any forthcoming legislation on gender recognition should not include the requirement that married transgender people would have to divorce, in order to have their preferred gender identity legally recognised.
ii) Government Policies and Strategies to Reflect Family Diversity

- Government policies on the family, children, health care and education, should aim to facilitate a greater diversity of family relationships that would reflect the circumstances of the lives of LGBT parents and families. This would make it easier to provide services that meet the needs of a diversity of parents.

- A Commission on Family Diversity in Ireland should be established by the government, to examine the reality of different and complex contemporary parenting roles and family relationships. This should take into account LGBT parents and their families. The Commission should be tasked with making recommendations to enhance future policy, government strategies and service-delivery outcomes that are relevant to families and children, and that provide a framework for new approaches to family policy in Ireland.

- A key recommendation underpinning all government policies and strategies is that, in the future, a much greater emphasis needs to be placed on ‘child centred’ approaches to policy that are rooted in the fundamental principles of the rights of the child and in line with the National Children’s Strategy (Government of Ireland 2000). As a result, it is recommended that a new focus should be given to the visibility of, and attention to, the rights of children of LGBT parents in Irish law, and progressed under the Department of Children and Youth Affairs.

iii) Access to Services

Assisted Human Reproduction

- The recommendations from the Commission on Assisted Human Reproduction (2005) should be implemented to ensure that AHR services are made available without discrimination on the grounds of gender, marital status or sexual orientation, under the Equal Status Acts 2004-2010. In addition, it is recommended that this should be extended to include non-discrimination, on the grounds of gender identity. In the event of a same-sex couple, a child conceived through AHR should be presumed to be that of the commissioning couple.

Inclusive Education Policies

- The Department of Education and Skills should draw up inclusive school policies and procedures that reflect the diversity of families, including LGBT families. These policies and procedures should include specific guidelines on how schools engage with LGBT parents. They should frame the policies of all schools in Ireland, and should be carried out in consultation with GLEN and BeLonGTo.

- School policies should give a commitment to the training and awareness-raising of staff on the specific issues and needs of children in LGBT families, and to promoting positive awareness of family diversity in the classroom and in the school curriculum.

- There should be full implementation of the Department of Education / GLEN guidelines: Lesbian, Gay and Bisexual Students in Post-Primary Schools: Guidance for Principals and School Leaders.
Inclusive Health Care Policies

- The health and social care needs of all LGBT parents should be integrated into all relevant policies and strategies of the Department of Health, the Department of Children and Youth Affairs and the Health Services Executive.

- Medical, health and social care professional bodies, should develop guidance for professionals on providing LGBT inclusive services, and in particular, guidance on providing accessible and appropriate services for LGBT families. Professional bodies should also ensure that professional training programmes include content on LGBT health care and LGBT parents and families.

- The recommendations of the HSE’s mapping exercise, LGBT Health: Towards meeting the health care needs of Lesbian, Gay, Bisexual and Transgender People (2008), should be fully implemented. The proposed National HSE Strategy and Action Plan for LGBT People, should also be fully implemented, and should be inclusive of the needs of LGBT parents. These should be drawn up in consultation with LGBT parents and organisations representing LGBT parents.

- The HSE should draw up practice guidelines, linked to training, on providing inclusive services for LGBT parents and their children. This is particularly relevant for staff working in child and family services, in primary care teams, in adoption and fostering services, in maternity services, along with all general health care services. The guidelines should also cover the equal treatment of opposite and same-sex couples with regards to next-of-kin.

Information for LGBT Parents

- LGBT Diversity should establish a working group, to source and draw up relevant legal and practical information for LGBT parents and those planning parenthood. A dedicated website for LGBT parents should be developed between LGBT organisations and the Citizens’ Information Board.

- The website should include information about legal rights for LGBT parents, accessing AHR services in Ireland, the legal framework governing adoption, fostering and surrogacy, and where to access support as parents and support for the children of LGBT parents. One LGBT organisation should be given the responsibility to provide up-to-date and accessible information for LGBT parents and those planning parenthood.

- Fertility clinics, and adoption and fostering service-providers, should publish information in their client information booklets and on their websites about the accessibility of their services for LGBT parents, and to make a statement of non-discrimination on the grounds of marital status, sexual orientation and gender identity.

iv) Support for LGBT Parents and the Children of LGBT Parents

LGBT Parent Support

- LGBT Diversity, in consultation with LGBT organisations, should establish a network of support groups for LGBT parents across the country.

Peer Support for the Children of LGBT Parents

- Peer-support groups should be established for the children of LGBT parents, so that they can meet and socialise with other children. This should be organised within the LGBT
community, and linked into the national network of support groups for LGBT parents proposed above.

Support and Counselling for LGBT Parents and the Children of LGBT Parents

- Existing counselling services, for example, those provided by Family Resource Centres or by specialist family psychologists in the HSE, should become more inclusive of, and be more welcoming to, people from LGBT families.

- Access to support and counselling should be established by schools and the Department of Education and Skills for children of LGBT parents, who may experience homophobic bullying in schools, or in their own local communities.

- Support, counselling and family therapy services, should also be provided for children whose family circumstances change as a result of a parent becoming an LGBT. This is particularly relevant for children of trans parents, in order to help children to adjust to new family circumstances.

- Professional counselling and psychotherapy bodies should also be tasked with drawing up guidelines on providing non-discriminatory services to LGB parents, and services to trans parents and the children of trans parents.

Increasing Visibility and Awareness of LGBT Parenthood in the Community

- Local service-providers that provide support for families, for example, Family Resource Centres and Local Development Companies, should implement inclusive policies and programmes on LGBT families. This should build on the GLEN Code of Practice for Community Development Projects, Family Resource Centres, Urban Partnerships / Integrated Development Companies on Supporting Lesbian, Gay, Bisexual and Transgender Communities.

- The to be newly established Children and Family Support Agency, the Irish Local Development Network, and Pobal (through the Local Community Development Programme and the LEADER Rural Development Programme) have key roles to progress the Code of Practice, with the inclusion of LGBT parents and families through policy and practice guidelines, awareness-raising and training.

- LGBT Diversity should liaise with local service-providers, and provide an information directory for each region, with information about services, groups and contact points for LGBT parents.
Appendix 1: Research Methodology

LGBT Parenthood Research Steering Group

The research was overseen by an LGBT Parenthood Research Steering Group, made up of representatives from LGBT organisations, family organisations and state agencies. The Steering Group initially drew up a draft survey tool, which was further developed and refined in consultation with the researchers who carried out the survey and who were in the Steering Group. The Research Steering Group spent several months examining the format and design of the questionnaire, so that it was comprehensive, clear and easy to complete, and so that respondents were given a clear explanation of the purpose of the study, including confidentiality and research ethics. The Steering Group, along with LGBT Diversity, also supported the advertisement and dissemination of the survey. The membership of the Steering Group is made up of representatives from the following organisations BeLonG To; Cork Gay Community Development Project; Dundalk Outcomers; GLEN; LINC; LGBT Noise; Marriage Equality; NLGF; Outhouse; OUTWEST; Rainbow Support Services and TENI.

Qualitative and Quantitative Research

The research used a mixed methodology of quantitative and qualitative data, based on an anonymous self-completed survey and in-depth interviews.

Anonymous Self-Completed Survey

An anonymous self-completed survey was drawn up, which could be completed online, as a hard copy to be returned by post or email, or by telephone interview. A website, a dedicated telephone number and email and postal addresses were provided to advertise the survey, and enable potential participants to contact the researchers by post, telephone or email. The anonymous survey was a relatively inexpensive survey tool that aimed to reach a large group of LGBT parents in a wide geographic area. A review of online surveys was carried out, and the principal source was Supporting LGBT Lives (Maycock et al. 2009) to ensure that there was some consistency of terminology and approach between this survey and the LGBT Parenthood Study.

The advantages of a self-administered survey (online survey and paper-based) are that it can elicit a higher response rate than other survey methods, while the completion of the survey can be carried out quickly, and at a time convenient to the participant. This was also important as it minimised the time constraints faced by those parents participating in more in-depth research. The survey could also be completed in any geographic location, and had the potential to reach out to a wide group of survey participants. Confidentiality could also be assured in the online survey through security and encryption, which protects the identity of respondents, enabling respondents to be anonymous and for the confidentiality of responses to be protected. Encryption also ensured that the survey could only be completed on one occasion by each participant. The disadvantages of a self-administered online survey are that it does not reach out to those people who are not familiar with online tools, or who are reluctant to engage with them, particularly those in older age groups. In addition, qualitative information is minimised, and in-depth responses are difficult to elicit. Some people may also be unsure about confidentiality, or nervous about providing information online, or in a paper-based format.

The anonymous survey was piloted with LGBT parents in March, 2011. The pilot was the basis for testing the ease of completion and relevance of the questions asked. In order to recruit participants for the pilot meetings, the researchers contacted - and met with - a number of different organisations, groups and individuals including: Bi-Irish, Bi-Dublin, Lesbian Perspective Mums Group, GCN, Outhouse, Running Amach, TENI, and the members of the Research Steering Group. As a result of these meetings and contacts, a total of twenty-two people initially agreed to participate, with eighteen people actually undertaking the survey. The profiles of the participants who took part in the pilot, are outlined below:

- Transgender Parents: completed by three parents who identified as male-to-female, with a transgender history. All were LGBT parents who had children with former female partners.
- The Bisexual Parents: completed by three parents (one identified as male and two identified as female). All were LGBT parents living full-time with their children.
- The Lesbian Parents and LGBT People Planning Parenthood: completed by nine participants. Of these, five are planning to become parents (using AHR through a fertility clinic), and four were LGBT parents who lived with their children full-time (one parent was a non-biological parent, one was a biological parent, one was both a biological and a non-biological parent and one was a long-term foster-parent).
- The Gay Fathers and Planned Gay Parents: completed by three participants (two were parents with shared custody of their children, and both had their children using AHR with a female friend, one of whom is in a lesbian relationship). The participant planning parenthood had actively considered adoption with his male partner while living in another country.

Some very useful feedback was given from the pilot, and a separate report of the pilot was produced for the Advisory Group. This led to some amendments being made to refine the questionnaire.

The final survey can be found in Appendix 2. The survey went live in June, 2011 and was closed at the end of October, 2011. In total, 326 people completed the anonymous survey.

People were invited to participate in the survey if they identified as a lesbian, gay, bisexual or transgender parent (biological and non-biological parents, guardians, adoptive-parents, foster-parents, living with - or separately from - their child / children of all ages). Participation in the survey also required the participant to be over the age of 18 years and living in the Republic of Ireland at the time that the survey was completed. Consent to participate in the survey was given by inserting the data that the survey was completed and in proceeding with the survey. The survey allowed participants to withdraw at any stage, and to complete just the sections that were relevant to the participant regarding their roles as LGBT parents or people planning to be parents in the future. The interview guide stated that all responses given by participants would be anonymous and confidential, and that the data generated would not identify any individual.

The majority of the survey questions required participants to tick a response from a multiple-choice list of responses or, yes / no answers. However, the survey did provide the opportunity for participants to write responses in free space text boxes, either in response to open-ended questions, to elaborate on their responses or, if the choices of answers were not applicable nor relevant to their situation. The survey took between 20 and 45 minutes to complete.

**In-Depth Interviews**

Twenty-five, in-depth, semi-structured interviews, were held with a representative sample of LGBT parents and LGBT people planning parenthood who had completed the anonymous
Sampling was based on a purposive sample of participants, drawn up in consultation with the Research Steering Group. This included lesbians, gay men, bisexual people and transgender people who are parents, and those planning parenthood. Consideration was given in the sampling to ensure that there was a representation of people from different age, gender, socio-economic and geographic backgrounds. The agreed sample profile for the in-depth interviews can be found in Appendix 3.

The advantage of this element of the survey was that a more in-depth analysis of the profiles, experiences and needs of LGBT parents and those planning parenthood, could be achieved. In particular, respondents were prompted and encouraged to answer questions fully, so that a better understanding was being gained of participants’ biographies and life-course events that have shaped their parenting roles. The survey facilitated a reflection on the legal or other changes that LGBT parents would like to see introduced in Ireland, in order to improve the lives of LGBT parents.

The interviews gave emphasis to encouraging people to ‘tell their stories’ through people’s own personal biographies. This method is particularly useful in building the life stories of LGBT parents and those planning parenthood, and in gaining in-depth insights and evidence that can be used to develop more detailed case stories of participants in order to exemplify specific experiences or life-course events. The interviews were constructed to enable respondents to feel at ease with the interviewer, in a setting of their choice in order for participants to feel comfortable in sharing their experiences and life-course events that have shaped and influenced their parenting or planned parenting roles.

An interview guide was drawn up prior to the interviews, and was based on some of the key findings from the anonymous survey. The interview guide aimed to provide a structure for the interview questions with sufficient flexibility to enable participants to highlight any specific issues that might not have been included in the interview guide. Overall, this approach enabled participants to elaborate on and reflect on their own unique situation, experience and needs.

Interviews were carried out between September and December, 2011. All interviews were carried out face to face and at a time and location that was convenient for the interviewee. On average, each interview lasted between sixty and ninety minutes, with a small number lasting over two hours.

At the start of the interviews, participants were assured of the confidentiality of the interview, were told that they could withdraw from the interview at any time, and that they were under no obligation to answer all questions. Participants were also given the opportunity to reflect back on the interview at the end, add any additional comments or reflections on the interview itself, and to request that any sensitive information given in the interview be deleted from the recording and not be used in the research. All participants were asked for their consent in participating in the interview. Consent was given on the basis that digitally recorded interviews and transcripts would be held securely, that no identifying information would be included in the transcripts, and that all data would be destroyed on completion of the research.

**Definitions and Survey Guide**

A guide to the survey setting out its background, the aim and objectives of the survey and information on research ethics, was published on the survey web site. The definitions used in the survey were published alongside the survey in a glossary.
The survey asked people for their gender identity, sexual orientation and sex at birth, to reflect the diversity of LGBT sexual lives and identities. This was deemed to be important in order to reflect non-traditional gender identities, and to include people who identify as transgender, transexual or pansexual. This is reflected in the approach taken in the two previous LGBT surveys carried out in Ireland: *Supporting LGBT Lives* on mental health (Maycock *et al.* 2009) and the study, *Visible Lives* which is about older LGBT people (Higgins *et al.* 2011). In addition to this, consultations were also held with Transgender Equality Network Ireland (TENI) regarding the use of inclusive definitions that take account of the fact that some individuals do not identify as trans but have a trans history, while others who may identify as trans but not within the categories of male-to-female or female-to-male. The Centre of Excellence for Transgender Health in the US, acknowledges some of the challenges that exist in using appropriate trans terminology in health surveys. Guidance was taken from the types of questions used by the Centre of Excellence for Transgender Health to reflect both gender identity and sex assigned at birth. Using these two questions, it was possible for all participants to complete the questions while allowing for the ‘. . . specific disclosure of a person’s history and at the same time validates their present sex and gender identity’15.

**Dissemination of the Survey**

The survey, survey guide and glossary were published on the specially-designed LGBT parenthood survey web site, hosted by LGBT Diversity. All LGBT organisations in Ireland were contacted in advance of the survey going live, and information was published in GCN. A ‘tag’ for the web site was developed, and published on the web sites of LGBT organisations. LGBT organisations and members of the Research Steering Group were also asked to disseminate the survey through their own networks. Organisations and individuals were also contacted by email with a link to the survey web site.

**Analysis of the Qualitative and Quantitative Data from the Survey and Interviews**

The quantitative data from the anonymous survey was downloaded into a specially-designed relational database, which enabled statistics to be generated in Excel through data tables and charts. These were cross-tabulated by specific data on LGBT parents and LGBT people planning parenthood and - where relevant - by other criteria such as sexual orientation, gender identity, age and geographic location of the participant. Care was taken to avoid presenting data that may identify a participant, for example, by geographic location. Narratives provided in the open-ended questions, were downloaded into Excel, were coded by specific themes / questions, and cross-tabulated by each participant’s sexual orientation.

The qualitative data from the semi-structured interviews was digitally recorded and transcribed in full. Transcription of interviews excluded any specific identifying data, such as a person’s name, or where they lived. Prior to the analysis of the interviews, a coding framework was established for the content analysis. This used the questions in the research guide as the first stage of coding, which was adapted during the content analysis to incorporate any additional themes / codes that were relevant to the analysis. This enabled key, emerging themes to be identified from the interviews, as well as specific and individual experiences of participants.

All data generated from the survey and interviews was held securely, and could only be accessed by the researchers through a computer-generated password. All printed transcriptions and data

tables were stored in a secure place in a locked filing cabinet. All hard copies of transcriptions and data tables were shredded at the end of the research.
Appendix 2: Anonymous Survey and Information about the LGBT Survey

LGBT Diversity
Information about the LGBT Parenthood Survey

Confidential

What is the LGBT Parenthood Study?
The LGBT parenthood study is a national survey of LGBT parents and LGBT people planning to become parents. It aims to find out about the experiences and diversity of needs of lesbian, gay, bisexual and transgender (LGBT) parents and those who are planning to become parents. The findings from the survey will be published and widely disseminated to Government and relevant State bodies, NGOs and advocacy groups, both mainstream and LGBT, to assist them in effecting positive change for LGBT parents and those planning parenthood. The study findings will be shared with all LGBT organisations in Ireland and, in particular, support groups and organisations to assist them in meeting the needs of the community. The study has been commissioned by the LGBT Diversity programme: Building Sustainable LGBT Communities.

What is the LGBT Diversity Programme?
LGBT Diversity is a programme to build the capacity of the LGBT sector in Ireland. It aims to facilitate LGBT organisations and activists to collectively mobilise and engage with the wider community in order to advocate strategically and effectively on gender identity and sexuality orientation issues. It has regional programmes in the Midlands, South East and the North West of Ireland. For further information see www.lgbtdiversity.com

Who should complete the Questionnaire?
The questionnaire is for LGBT parents and LGBT people who are planning to be parents. This includes biological and non-biological parents, guardians, adoptive-parents and foster-parents, living with, or separately from, their child / children of all ages. You need to be over 18 years of age to complete the questionnaire and also living in the Republic of Ireland.

What is the Purpose of the Questionnaire?
The questionnaire aims to find out about the experiences and needs of LGBT parents and those planning to be parents in Ireland. This is the first time that a study of this nature has been carried out in Ireland. We know very little of the experiences and situations of LGBT parents in Ireland, and we hope to build up a picture of these experiences so that we can inform service-provision and propose policy changes for LGBT parents. The study is important, because the needs of LGBT parents and those planning to be parents, often go unnoticed.

Is the Questionnaire Confidential?
Yes, the information that you provide is completely CONFIDENTIAL, which means that the answers you give will be kept private. The survey is anonymous, which means you don’t need to give us your name to fill in the survey, and no one will be able to connect the information you give with you personally.

Glossary
A glossary explaining the terminology used in the survey is included below.

How long will it take to complete?
The questionnaire will take about 15-20 minutes to complete.
Glossary (Anonymous Survey)

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access</td>
<td>Where one parent has custody, an access arrangement allows for the child or children to have contact with their other parent. Access rights allow the person having access to take the necessary steps to care for the child or children, while he or she is with them. (The right to apply for legal access is not limited to parents, and Irish law does allow for an application by a partner of a parent where the partner was in loco parentis to the child or children)</td>
</tr>
<tr>
<td>Assisted Human Reproduction</td>
<td>Assisted Human Reproduction refers to methods used to achieve pregnancy through artificial or partially artificial means. In this survey, this includes methods undertaken by a person or a couple themselves, for example insemination using donor sperm or clinical methods such as Intra-Uterine Insemination by Donor (IUID) or In Vitro Fertilisation (IVF) using donor sperm and / or donor egg or donor embryo.</td>
</tr>
<tr>
<td>Bisexual</td>
<td>Term used to describe anyone sexually and romantically attracted to both males and females.</td>
</tr>
<tr>
<td>Biological Parent</td>
<td>The term biological parent referred to in this survey, means a birth mother or biological father who intended to become a parent.</td>
</tr>
<tr>
<td>Custody</td>
<td>Custody is the physical day-to-day care and control of a child or children. It is just one aspect of the wider concept of guardianship. (A parent who does not have custody, can still have the rights and duties of a guardian)</td>
</tr>
<tr>
<td>Donor</td>
<td>The term Donor referred to in this survey means a man who donates sperm or a woman who donates an ovum (egg) to assist another person or couple to conceive.</td>
</tr>
<tr>
<td>Gay Man</td>
<td>A man whose primary sexual and romantic attraction is to other men. The term is more commonly applied to men who self-identify as same-sex attracted, rather than men who have sex with men but do not self-identify as gay.</td>
</tr>
<tr>
<td>Guardianship</td>
<td>Guardianship is a legal relationship between a parent and their child or children. Guardianship permits a person to make all major decisions relating to the child, for example, where the child will live, the right to apply for a passport for the child, and in what religion the child will be raised. Married (Heterosexual) parents are joint guardians of their children. Where a child is born outside of (Heterosexual) marriage, the mother is the sole automatic guardian of the child. A father can be appointed guardian by the consent of the mother, or he can apply to court to be so appointed.</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>A person whose primary sexual and romantic attraction is to people of the opposite sex.</td>
</tr>
<tr>
<td>Lesbian</td>
<td>A woman whose primary sexual and romantic attraction is to other women. The term is more commonly applied to women who self-identify as same-sex attracted, rather than women who have sex with women but do not self-identify as gay.</td>
</tr>
<tr>
<td>Non-Biological Parent</td>
<td>Non-biological parent refers to a person who is in a parenting role and considers themselves to be a parent, but who is not the child’s birth mother or biological father. For example, the partner of a child’s birth mother.</td>
</tr>
<tr>
<td>Surrogacy</td>
<td>Surrogacy is the process whereby a woman agrees to carry a child for another person(s).</td>
</tr>
</tbody>
</table>
Transgender

Transgender is an umbrella term referring to people whose gender identity and/or gender expression differs from conventional expectations based on the sex assigned to them at birth. This can include people who self-identify as transsexual, male-to-female, female-to-male, transvestite, cross-dressers, drag performers, gender-queer, gender-variant, etc.

LGBT Parenthood Survey
Confidential

Please see the attached word document with information about the survey and the glossary. This can be used as a reference as you are filling in the survey.

If you are filling in the questionnaire on your computer as a word document, your cursor will take you to the areas that you need to fill in. Please save the document when you have completed it, and email it to us (see email address at the end). If you are filling in the questionnaire by hand, please return the completed form to LGBT Diversity (see address at the end).

Consent to participate in the survey

Your participation in the study is entirely voluntary, and all information that you provide is confidential. There will be no information used that will identify you by where you live or by your name. Before you proceed to complete this questionnaire, we would be grateful if you could indicate your consent to take part in the study.

Please read the consent below and consider whether to take part in this study. Your participation is voluntary, and you are free to withdraw from the research at any time. To complete the survey, you must be over 18 years of age, living in the Republic of Ireland and identifying as an LGBT person.

Consent: As this survey is anonymous, you are not required to sign this form. By putting today’s date on this form, you are indicating that you agree to take part in the survey.

Please insert today’s date below.
SECTION 1: TO BE COMPLETED BY ALL LGBT PARENTS AND THOSE PLANNING TO BE PARENTS

This section should be completed by all LGBT parents and people who are planning to be LGBT parents.

1. What is your age? (Please put your age in the box.)

2. How would you describe your sexual orientation? Please tick the box that is relevant to you.
   - Lesbian
   - Gay man
   - Bisexual
   - Heterosexual
   - Questioning / Not Sure
   - Something else (Please tell us in the box below.)

3. What is your sex or LGBT parent’s gender identity? Please tick the boxes that apply to you.
   - Male
   - Female
   - Male-to-Female / Trans Woman
   - Female-to-Male / Trans Man
   - Gender-Queer
   - Something else (Please tell us in the box below.)

4. What sex were you assigned at birth? Please tick the relevant box.
   - Male
   - Female

5. What is your LGBT parent’s relationship status? Please tick the relevant box.
   - Same-Sex Marriage or Civil Partnership
   - Same-Sex Relationship
   - Single
   - Heterosexual Marriage
   - Heterosexual Relationship
   - Separated
   - Dissolved Civil Partnership
   - Divorced
   - Something Else (Please tell us in the box below.)
6. Which of the following best describes the total annual income for your household? Please tick the relevant box.

- Under €10,000
- €10,000-€29,999
- €30,000-€49,999
- €50,000-€69,999
- €70,000 or more
- I prefer not to say

7. Do you currently have any of the following? Please tick the relevant box.

- Medical Card
- Private Health Insurance
- Neither

8. What County do you currently live in? Please tick the County you live in.

<table>
<thead>
<tr>
<th>Carlow</th>
<th>Kerry</th>
<th>Louth</th>
<th>Tipperary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cavan</td>
<td>Kildare</td>
<td>Mayo</td>
<td>Waterford</td>
</tr>
<tr>
<td>Clare</td>
<td>Kilkenny</td>
<td>Meath</td>
<td>Westmeath</td>
</tr>
<tr>
<td>Cork</td>
<td>Laois</td>
<td>Monaghan</td>
<td>Wexford</td>
</tr>
<tr>
<td>Donegal</td>
<td>Leitrim</td>
<td>Offaly</td>
<td>Wicklow</td>
</tr>
<tr>
<td>Dublin</td>
<td>Limerick</td>
<td>Roscommon</td>
<td>I would prefer not to answer</td>
</tr>
<tr>
<td>Galway</td>
<td>Longford</td>
<td>Sligo</td>
<td></td>
</tr>
</tbody>
</table>

9. Please could you give some more information about whether you live in a city, suburb, town or village. Please tick one box that most describes where you live.

- A city (e.g. Dublin, Galway, Limerick, Cork, Waterford)
- Suburb of a city
- A town with a population of 5000 or more
- A town with a population of less than 5000 people
- A village
- Rural area outside of a village
- Something else (Please tell us in the box below.)

10. What is your LGBT parent’s employment situation? Please tick all relevant boxes.

- I am a full-time parent / carer.
- I am in full-time paid employment.
- I am in part-time paid employment.
- I am self-employed.
- I am a student in full-time education.
- I am a student in part-time education.
- I am retired.
- I am unemployed.
- I am unemployed, but actively volunteering.
11. What is your educational background? Please tick one box indicating the highest level of education that you have attained.

- Primary school only
- Some secondary school
- Secondary school completed
- Some 3rd level
- 3rd level completed
- Postgraduate-level completed
- Professional qualification
- Technical qualification
- Something else (Please tell us in the box below.)

12. Please tell us who you are ‘out’ to? Please tick the relevant boxes.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Out to some</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>My child / children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My immediate family (siblings, parents)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My extended family (grandparents, aunts, uncles, cousins)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My partner’s immediate family (siblings, parents)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My partner’s extended family (grandparents, aunts, uncles, cousins)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My ex-partner’s family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friends</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighbours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work colleagues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local community groups / networks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Informal and formal LGBT support networks and groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Are you currently a parent?

- Yes, I am a parent.
  *(Please complete the questions in Section 2 and Section 4 of this questionnaire.)*

- Yes, I am a parent and planning to be a parent to more children in the future.
  *(Please complete all questions in this questionnaire.)*
No, but I am planning to be a parent in the future.
(Please complete the questions in Section 3 and Section 4 of this questionnaire.)

SECTION 2: TO BE COMPLETED BY LGBT PARENTS

This section asks you for some information about your role as a parent (to be completed by all LGBT parents).

14. Are you a biological or non-biological parent? Please tick the relevant box.

- [ ] I am a biological parent.
- [ ] I am a non-biological parent.
- [ ] I am both a biological and a non-biological parent.

15. Please tell us your legal status as a parent. Please tick all of the boxes that are relevant to you.

- [ ] I do not know what my legal status is as a parent.
- [ ] Sole legal guardian
- [ ] Joint legal guardian
- [ ] Sole custody, provided by court order
- [ ] Joint custody with biological father, mother or adoptive-parent by court order
- [ ] Access granted by a court order
- [ ] Sole adoptive-parent
- [ ] Joint adoptive-parent
- [ ] Sole foster-parent
- [ ] Joint foster-parent
- [ ] No legal status as a parent
- [ ] Something else (Please tell us in the box below.)

16. Who do you parent with? Please tick the relevant box.

- [ ] I parent with my partner.
- [ ] I parent with my partner and another person/people.
- [ ] I parent with my ex-partner.
- [ ] I parent with my ex-partner and another person / people.
- [ ] I parent with another person / people.
- [ ] I parent alone.
- [ ] I do not currently have an active parenting role.
- [ ] Something else (Please tell us in the box below.)

17. What is your LGBT parent’s living arrangement? Please tick the box that describes your LGBT parent’s living arrangement.

- [ ] I live with my partner and my child / children.
- [ ] I live with my partner and have my child / children living with me part-time.
- [ ] I live alone with my child / children.
- [ ] I live alone with my child / children part-time.
- [ ] I live with other people and my children.
- [ ] I live with other people and have my child / children living with me part-time.
I do not live with my child / children as they are grown-up and have left home.
I do not live with my children.
Something else (Please tell us in the box below.)

18. How many children are you a parent to? Please put the number of children you have in the box below.


19. What age(s) is / are your child / children? Please put the number of children you have under each of the age groups listed below.

<table>
<thead>
<tr>
<th>Age of child / children</th>
<th>Please add how many child / children under each age group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 3 years</td>
<td>●</td>
</tr>
<tr>
<td>Between 3 and 5 years</td>
<td>●</td>
</tr>
<tr>
<td>Between 5 years and 12 years</td>
<td>●</td>
</tr>
<tr>
<td>Between 12 years and 18 years</td>
<td>●</td>
</tr>
<tr>
<td>Over 18 years</td>
<td>●</td>
</tr>
</tbody>
</table>

20. Please tell us how you became a parent. (This is for all parents, whether you are a biological parent or not).

<table>
<thead>
<tr>
<th>Please indicate how many children you parent in each of the categories below</th>
</tr>
</thead>
<tbody>
<tr>
<td>I became a parent because my partner had a child / children before we became partners</td>
</tr>
<tr>
<td>Child / children from my previous heterosexual relationship</td>
</tr>
<tr>
<td>Child / children from my LGBT parent’s relationship that was previously heterosexual</td>
</tr>
<tr>
<td>Child / children from Assisted Human Reproduction through a clinic</td>
</tr>
<tr>
<td>Assisted Human Reproduction from a private ‘known-donor’ arrangement</td>
</tr>
<tr>
<td>Child / children through adoption</td>
</tr>
<tr>
<td>Child / children through fostering</td>
</tr>
<tr>
<td>Child / children through surrogacy</td>
</tr>
<tr>
<td>Something else (Please tell us.)</td>
</tr>
</tbody>
</table>
Some information about your social / support networks

21. Who provides support for you in your parenting role and what level of support do you receive? Please tick all boxes that are relevant.

<table>
<thead>
<tr>
<th>Support Source</th>
<th>A lot of support</th>
<th>Some support</th>
<th>No support</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ex-partner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My immediate family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My extended family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My partner’s immediate family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My partner’s extended family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friends</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighbours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work colleagues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local community networks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LGBT support groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please tell us more about the support you receive, if it is relevant, in the box below.

22. Please could you tell us about your experiences in the last five years as an LGBT parent in the areas listed below. Please tick the boxes that are relevant.

<table>
<thead>
<tr>
<th>Services you received:</th>
<th>Positive</th>
<th>Some positive/some negative</th>
<th>Negative</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisted Human Reproduction Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Services for myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Services for my child / children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fostering Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adoption Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child / Children’s Crèche / Pre-School Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child / Children’s Primary and</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Secondary Education

### Social Welfare

#### Information Providers (e.g. Citizens’ Information Service, Money Advice and Budgeting Service)

### Landlords or Social Housing

#### 2. Your local community / neighbourhood:

<table>
<thead>
<tr>
<th>Positive</th>
<th>Some positive/some negative</th>
<th>Negative</th>
<th>Not relevant</th>
</tr>
</thead>
</table>

### Local Community Centre or Group

### Neighbours / Local People

### Local Church or Religious Institution

Please tell us more about your experiences, if they are relevant, in the box below.

23. Have you ever experienced discrimination or negative attitudes towards you as an LGBT parent?

- [ ] Yes
- [ ] No

24. If you have experienced discrimination or negative attitudes to you as an LGBT parent in the last five years, could you tell us about it.

25. In the last five years, if relevant, could you tell us about your experiences of the assistance or services to enable you to become a parent. Please tick all relevant boxes.

<table>
<thead>
<tr>
<th>Assistance or Service</th>
<th>Inside Ireland</th>
<th>Outside Ireland</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very good</td>
<td>Good</td>
</tr>
<tr>
<td>Adoption</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fostering</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisted Human Reproduction Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Known Donor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surrogacy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (please tell us)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If there are any other issues you would like to tell us regarding these services or the assistance you received, please use the box below.

26. If you considered accessing Assisted Human Reproductive Services, Surrogacy or Adoption Services at any time, was the service accessible to you? Please tick the relevant box.

☐ Yes
☐ Somewhat
☐ No

27. If you have used Assisted Human Reproductive Services, Surrogacy or Adoption Services, could you tell us how you funded these services? Please tick the relevant box.

☐ Savings
☐ Loan
☐ Health Insurance
☐ Assistance from friends or family members
☐ Something else (Please tell us in the box below.)

28. In the box below, please could you give us the approximate cost of Accessing Assisted Human Reproductive, Surrogacy or Adoption Services, for your most recent child?

29. If you do not live with your child / children, please tell us about your experiences. For the purposes of this survey, living with your children means that they reside with you in your home, on either a full-time or part-time basis. Please tick the boxes that are relevant.

If you do live with your child / children, go directly to question 30.

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Some positive / some negative</th>
<th>Negative</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with child / children</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relationship with child / children’s immediate family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participation in decision-making about child / children’s welfare, schooling and other matters</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If relevant, please give us some further information about your experiences in the box below.
30. Could you also tell us a bit more about your role as a parent, if you are not living with your child / children. Please tick the relevant boxes.

<table>
<thead>
<tr>
<th>Yes</th>
<th>Somewhat</th>
<th>No</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have legal custody / access</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I provide maintenance and financial support for my child / children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have regular access to my child / children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have regular contact with my child/children’s immediate family</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I do not have regular contact with my child / children</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

31. If you are no longer parenting, or do not have access / regular contact with your child / children, please could you tell us about the circumstances that led to a change in parental status? Please tick the relevant boxes.

- [ ] It was never my intention to have a parenting role / regular access.
- [ ] No parenting rights
- [ ] No cooperation with former partner
- [ ] Opposition from child / children’s other parent(s) / family
- [ ] I am in new relationship that has made contact difficult.
- [ ] Something else (please tell us in the box below)

32. Do you believe that your sexual orientation and / or gender identity, influenced the custody decision? Please tick the relevant box.

- [ ] Yes
- [ ] Possibly
- [ ] No
- [ ] Don’t know

Please tell us more in the box below, if relevant.

33. If you are a transgender parent, please tick the boxes that are relevant to you as a parent.

If you are not a transgender parent, please go directly to question 34.
Is your child / children aware that you are trans?

If so, are you accepted as trans by your child / children?

Are your child’s / children’s other family members aware that you are trans?

If so, are you accepted as trans by your child / children’s other family members?

Have conditions been put in place for being with your child / children?

Do you, or have you had to, hide your identity from your child / children?

If you would like to tell us more about your experiences as a transgender parent, please do so in the box below.

34. What do you see as the most important legal changes for you as an LGBT parent today? Please rank the top five in order of importance to you (1 is the most important).

<table>
<thead>
<tr>
<th>Rank the top 5</th>
<th>I’d like to have the right to apply for joint adoption of the biological child / children of my partner or foster-child.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I’d like my partner and I to be eligible to be considered as adoptive-parents (of a child not related to either of us).</td>
</tr>
<tr>
<td></td>
<td>I’d like to be able to seek guardianship of my child / children.</td>
</tr>
<tr>
<td></td>
<td>I’d like to be able to gain legal access to my child / children.</td>
</tr>
<tr>
<td></td>
<td>I’d like my and my partner’s name to go on the birth cert of our child / children.</td>
</tr>
<tr>
<td></td>
<td>My child / children should have the right to access, maintenance and succession from his / her non-biological parents.</td>
</tr>
<tr>
<td></td>
<td>My child / children should have the right to a legal relationship with the people who care for them.</td>
</tr>
<tr>
<td></td>
<td>I’d like more accessible and affordable Assisted Human Reproduction Services</td>
</tr>
<tr>
<td></td>
<td>I’d like my partner and I to have the same rights to parental leave, adoptive leave and other parental benefits as opposite-sex couples.</td>
</tr>
<tr>
<td></td>
<td>I’d like legislation to allow civil partners to gain guardianship and custody rights to their partner’s child / children.</td>
</tr>
<tr>
<td></td>
<td>I’d like civil marriage for same-sex couples (allowing for joint adoption for same-sex couples).</td>
</tr>
<tr>
<td></td>
<td>Other (Please tell us.)</td>
</tr>
</tbody>
</table>

35. What other changes would have the most positive impact for you and your children? Please rank the top three in order of importance to you (1 is the most important).
I’d like to have more contact with my child / children.

I’d like access to schools and other services for my child / children that recognise and respect diversity of families.

I’d like access to health services for myself and my child / children that recognise and respect diversity of families.

I’d like government policies and state services to fully reflect the diversity of family life in Ireland.

I’d like access to support groups for LGBT parents and families.

I’d like my children to have access to supports / groups for other children in LGBT families.

Other (Please tell us.)

36. If you would like to describe in more detail your LGBT parent’s parenting situation, please feel free to do this in the box below.

SECTION 3: LGBT PEOPLE PLANNING PARENTHOOD

Some information about your plans to become a parent (to be filled in only by those planning to become a parent)

37. Please tell us what your plans are for becoming a parent? Please tick all relevant boxes.

☐ Assisted Human Reproduction through a clinic
☐ Assisted Human Reproduction through a private known-donor arrangement
☐ Surrogacy
☐ Adoption
☐ Fostering
☐ Heterosexual relationship
☐ Other (Please tell us in the box below.)

38. Please tell us about your plans for parenthood / your anticipated legal status as a parent. Please tick the relevant boxes.

☐ I do not know what my legal status will be as a parent.
☐ Sole legal guardian
☐ Joint legal guardian
☐ Sole custody, provided by court order
☐ Joint custody with biological father, mother or adoptive-parent by court order
☐ Sole adoptive-parent
☐ Joint adoptive-parent
☐ Sole foster-parent
☐ Joint foster-parent
☐ No legal status as a parent
☐ Something else (Please tell us in the box below.)
39. Who do you plan to parent with? Please tick the relevant box.

- [ ] I plan to parent with my partner.
- [ ] I plan to parent with my partner and another person / people.
- [ ] I plan to parent with my ex-partner.
- [ ] I plan to parent with my ex-partner and another person / people.
- [ ] I plan to parent with another person / people.
- [ ] I plan to parent alone.
- [ ] I do not plan to have an active parenting role.
- [ ] Something else (Please tell us in the box below.)

40. What is your planned living arrangement when you become a parent? Please tick the box that describes your planned living arrangement.

- [ ] I plan to live with my partner and my child / children.
- [ ] I plan to live with my partner and have my child / children living with me part-time.
- [ ] I plan to live alone with my child / children.
- [ ] I plan to live alone with my child / children part-time.
- [ ] I plan to live with other people and my children.
- [ ] I plan to live with other people and have my child / children live with me part-time.
- [ ] I do not plan to live with my children.
- [ ] Something else (Please tell us in the box below.)

Some information about being ‘out’ and your social / support networks (for LGBT people planning on becoming parents):

41. Who provides support for you in your planned parenting role and what level of support do you receive? Please tick all boxes that are relevant.

<table>
<thead>
<tr>
<th>Support Provider</th>
<th>A lot of Support</th>
<th>Some Support</th>
<th>No Support</th>
<th>Not Relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ex-partner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My immediate family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My extended family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My partner’s family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My ex-partner’s family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friends</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighbours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work colleagues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Local community networks

LGBT support groups

Please tell us more about the support you receive, if it is relevant, in the box below.

42. Please could you tell us about your experiences as someone who is planning to be an LGBT parent, in any of the areas listed below, that are relevant to you. Please tick the boxes that are relevant.

<table>
<thead>
<tr>
<th>Services you received</th>
<th>Positive</th>
<th>Some positive/some negative</th>
<th>Negative</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisted Human Reproductive Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Services for myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fostering Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adoption Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information-Providers (e.g. Citizens’ Information Service, Money Advice and Budgeting Service)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

43. Please tell us whether you have accessed / or have plans to access, Assisted Human Reproductive Services, Adoption or Fostering Services, in Ireland or overseas. Please tick the relevant box.

☐ Ireland
☐ Overseas

Please tell us more about your plans to access any of these services, whether in Ireland or abroad, if it is relevant, in the box below.

44. Have you ever experienced discrimination or negative attitudes towards you, as a person planning to be an LGBT parent?

☐ Yes
☐ No

45. If you have experienced discrimination or negative attitudes towards you as a person planning to be an LGBT parent, please could you tell us about it.
46. If you are planning to be a parent and you do not plan to live with your child / children, could you tell us about your relationships in planning for parenthood. Please tick the relevant boxes.

*If this is not the case, please go directly to question 48.*

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Positive</th>
<th>Some positive / some negative</th>
<th>Negative</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with planned biological parent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relationship with planned child / children’s immediate family</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participation in decision-making about future parenting role</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

47. If you do not plan to live with your child / children could you also tell us a bit more about your plans as an LGBT parent. Please tick relevant boxes.

<table>
<thead>
<tr>
<th>Plan to have legal custody / access.</th>
<th>Yes</th>
<th>Somewhat</th>
<th>No</th>
<th>Not relevant</th>
</tr>
</thead>
<tbody>
<tr>
<td>I plan to provide maintenance and financial support for my child / children.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I plan to have regular contact with my child / children.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I plan to have regular contact with my child / children’s immediate family.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

48. What is most important to you as someone planning to be an LGBT parent? Please rank the top five in order of importance to you (1 is the most important).

<table>
<thead>
<tr>
<th>Important Factor</th>
<th>Rank the top 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>I’d like to have the right to apply for joint adoption of the biological child / children of my partner.</td>
<td></td>
</tr>
<tr>
<td>I’d like my partner and I to be eligible to be considered as adoptive-parents (of a child not related to either of us).</td>
<td></td>
</tr>
<tr>
<td>I’d like to be able to seek guardianship of my child / children.</td>
<td></td>
</tr>
<tr>
<td>I’d like to be able to gain legal access to my child / children.</td>
<td></td>
</tr>
<tr>
<td>I’d like my and my partner’s name to go on the birth cert of our child / children.</td>
<td></td>
</tr>
<tr>
<td>My child / children should have the right to access, maintenance and succession from his / her non-biological parents.</td>
<td></td>
</tr>
<tr>
<td>My child / children should have the right to a legal relationship with the people who care for them.</td>
<td></td>
</tr>
<tr>
<td>I’d like more accessible and affordable Assisted Human Reproduction Services</td>
<td></td>
</tr>
</tbody>
</table>
I’d like my partner and I to have the same rights to parental leave, adoptive leave and other parental benefits as opposite-sex couples.

I’d like legislation to allow civil partners to gain guardianship and custody rights to their partner’s child / children.

I’d like civil marriage for same-sex couples (allowing for joint adoption for same-sex couples).

Other (Please tell us.)

49. What other changes would have the most positive impact for you and your children in the future? Please rank the top three in order of importance to you (1 is the most important).

<table>
<thead>
<tr>
<th>Rank the top 3</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I’d like to have regular contact with my child / children.</td>
<td></td>
</tr>
<tr>
<td>I’d like access to schools and other services for my child / children that recognise and respect diversity of families.</td>
<td></td>
</tr>
<tr>
<td>I’d like access to health services for myself and my child / children that recognise and respect diversity of families.</td>
<td></td>
</tr>
<tr>
<td>I’d like government policies and state services to fully reflect the diversity of family life in Ireland.</td>
<td></td>
</tr>
<tr>
<td>I’d like access to support groups for LGBT parents and families.</td>
<td></td>
</tr>
<tr>
<td>I’d like my children to have access to supports / groups for other children in LGBT families.</td>
<td></td>
</tr>
<tr>
<td>Other (Please tell us.)</td>
<td></td>
</tr>
</tbody>
</table>

Section 4: ADDITIONAL COMMENTS

50. Is there anything you would like to tell us that you feel is relevant to the LGBT parenthood research? If so, please use the box below.

51. Finally, would you be willing to be interviewed by one of the researchers for this research project? The interview could be carried out face to face in a place or location that suits you, or if you prefer, over the telephone.

□ Yes
□ No

If yes, please could you put your contact details, telephone and email, in the box below, and one of the researchers will contact you. Please note that this contact information will be kept separately from the survey, and will be treated with confidentiality.
Alternatively, you can send us an email on: 
{lgbtparenthoodresearch@lgbtdiversity.com} 
or
Telephone 086 347 8037

Please return this questionnaire either by email or post.

By email to: 
lgbtparenthoodresearch@lgbtdiversity.com

By post addressed to:
LGBT Diversity, Parenthood Survey, 3/4, 8 North Mall, Cork

Many thanks for completing the questionnaire!
## Appendix 3: Interview Profile and Interview Codes

<table>
<thead>
<tr>
<th>Profile of Participants</th>
<th>Interview Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gay father living with same-sex partner with children from a previous opposite-sex marriage.</td>
<td>01 Gay father</td>
</tr>
<tr>
<td>Lesbian parent living with same-sex partner, both with children from previous opposite-sex relationships</td>
<td>02 Lesbian parent</td>
</tr>
<tr>
<td>Bi-sexual female parent married to opposite-sex partner with children from that relationship.</td>
<td>03 Bisexual mother</td>
</tr>
<tr>
<td>Gay father living with same-sex partner with children from a previous opposite-sex marriage.</td>
<td>04 Gay father</td>
</tr>
<tr>
<td>Gay male planning parenthood with same-sex partner through adoption or fostering</td>
<td>05 Gay man planning parenthood</td>
</tr>
<tr>
<td>Gay father living with same-sex partner with child through known-donor arrangement with lesbian couple.</td>
<td>06 Gay father</td>
</tr>
<tr>
<td>Gay male planning parenthood who is single and planning to foster</td>
<td>07 Gay man planning parenthood</td>
</tr>
<tr>
<td>Bi-sexual male parent married to opposite-sex partner with children from that relationship.</td>
<td>08 Bisexual father</td>
</tr>
<tr>
<td>Bi-sexual male parent married to opposite-sex partner with children from that relationship.</td>
<td>09 Bisexual father</td>
</tr>
<tr>
<td>Lesbian planning parenthood with same-sex partner both through AHR with anonymous donor</td>
<td>10 Lesbian planning parenthood</td>
</tr>
<tr>
<td>Lesbian parent living with same-sex partner, both with child through AHR with partner and children from previous opposite-sex relationship of partner</td>
<td>11 Lesbian mother</td>
</tr>
<tr>
<td>Lesbian parent single, fostering children.</td>
<td>12 Lesbian parent</td>
</tr>
<tr>
<td>Trans parent living with spouse, with child from that relationship</td>
<td>13 Trans parent</td>
</tr>
<tr>
<td>Trans parent separated from spouse, with children from that relationship</td>
<td>14 Trans parent</td>
</tr>
<tr>
<td>Trans parent separated from spouse, with children from that relationship</td>
<td>15 Trans parent</td>
</tr>
<tr>
<td>Trans parent separated from spouse, with children from that relationship</td>
<td>16 Trans parent</td>
</tr>
<tr>
<td>Trans parent separated from spouse, with children from that relationship</td>
<td>17 Trans parent</td>
</tr>
<tr>
<td>Lesbian parent with children from previous opposite-sex relationship and one child through AHR in previous same-sex relationship and one child through fostering / adoption.</td>
<td>18 Lesbian parent</td>
</tr>
<tr>
<td>Trans parent separated from spouse, with children from that relationship</td>
<td>19 Trans parent</td>
</tr>
<tr>
<td>Bi-sexual female parent with same-sex partner with children from that relationship through AHR.</td>
<td>20 Bisexual mother</td>
</tr>
<tr>
<td>Lesbian parent with same-sex partner with children from that relationship through AHR.</td>
<td>21 Lesbian parent</td>
</tr>
<tr>
<td>Lesbian planning parenthood with same-sex partner both through AHR with anonymous donor</td>
<td>22 Lesbian planning parenthood</td>
</tr>
<tr>
<td>Gay male planning parenthood with same-sex partner through adoption or fostering</td>
<td>23 Gay man planning parenthood</td>
</tr>
<tr>
<td>Lesbian planning parenthood with same-sex partner, both through AHR with anonymous donor</td>
<td>24 Lesbian planning parenthood</td>
</tr>
<tr>
<td>Lesbian planning parenthood with same-sex partner, both through AHR with anonymous donor</td>
<td>25 Lesbian planning parenthood</td>
</tr>
</tbody>
</table>
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