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Separated Same-Sex Parents' Experiences and Views of Services and Service Providers

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Separated Same-Sex Parents' Experiences and Views of Services and Service Providers

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Despite social, cultural, and political changes in Australia leading to greater acceptance of same-sex parented families, such families continue to exist outside of mainstream understandings of relationships and family. Social change is gradual, and emerging kinships are not necessarily understood by all sectors of society. Consequently, same-sex parented families continue to face challenges when accessing support and understanding from service providers.

This article reports on findings from a qualitative study of semi-structured in-depth interviews with 24 same-sex parents in Australia who had experienced parental separation. There is only a small amount of empirical research on separation within same-sex parented households (see Farr, 2017; Gartrell, Bos, Peyser, Deck, & Rodas, 2011; Goldberg & Allen, 2013; Turteltaub, 2002), and as observed by van Eeden-Moorefield, Martell, Williams, and Preston (2011), there are only minimal data on the dissolution experiences of same-sex couples more broadly. Goldberg and Allen (2013) suggest that research on lesbian, gay, and bisexual (LGB) parenting has only recently undergone a shift from exploring family relationships and child well-being in LGB families post-heterosexual divorce to examining the experiences of planned LGB parented families.¹ While research on same-sex parents' relationship dissolution is critical to understanding their unique experiences, Goldberg and Allen (2013) believe that given this fairly recent shift in focus within LGB family research, it is little surprise that there has been limited research in this field to date. The study here aims to fill this gap in research and increase our understanding of the experiences of separation among same-sex parented families. In particular, this article will explore separated same-sex parents' experiences of services and service providers—focusing on the parents' interactions with and perceptions of mental health, mediation, and legal services.

New Realities for Same-Sex Parented Families in Australia

Parenting is increasingly a part of lesbian, gay, bisexual, transgender, and intersex (LGBTI) culture in Australia in a way that it has never been before. In Australia, same-sex parenting social, support, and lobby groups exist in both urban and regional cities, and these groups have become an increasingly integral part of the LGBTI community. Increasing numbers of same-sex couples are having children (Australian Bureau of Statistics [ABS], 2013; Leonard et al., 2012), a phenomenon sometimes referred to as the “gayby boom” (Dempsey, 2015). A 2012 study of LGBT people in Australia found that 22.1% of respondents had children or step-

¹ Planned same-sex parenting is when parents have or adopt children within the context of their same-sex relationship rather than having the children in a previous heterosexual one.

children and that up to 40% desired more children (Leonard et al., 2012). As has been the case for many years, parenting was shown to be more common among lesbians (32.5%) than gay men (11%) (Leonard et al., 2012). Similarly, the 2011 Australian census showed that there had been an 85.3% increase in the number of children living in same-sex couple families between 2001 and 2011 (ABS, 2013). Once more, female same-sex couples were more likely to have children than male same-sex couples (22% compared with 3%) (ABS, 2012). While the census data showed that there were large numbers of same-sex parents in Australia, it is likely to be an underestimation of the actual numbers of Australian same-sex parents. The census does not ask about sexuality, only counts intact same-sex couples, is unable to identify separated same-sex parents among single-parent households, and does not identify situations where a parent may have re-partnered with a person of the opposite sex.

The increase in same-sex parenting in Australia has occurred as part of wider social, cultural, and political changes. Australian social attitudes have become increasingly supportive of diverse sexuality; in 1984, 64% of adults opposed homosexuality compared to 48% in 2000 (de Vaus, 2004). More recently, we have witnessed greater support for same-sex couple relationships (Dempsey, 2013), with 72% of Australians in 2014 believing that same-sex couples could successfully raise children (Montero, 2014). In the 2017 national marriage survey, commissioned by the Australian government, 61.6% supported same-sex marriage (ABS, 2017). The political change has been most evident in the shift of political support for marriage equality from a Federal Parliament in 2004 that voted almost unanimously to ban same-sex marriage to one in 2016 where a majority of Members of Parliament have declared their support to reverse that decision² (Kenny, 2016). Consequently, over the past 10 years, this social, cultural, and political change has given rise to a number of legislative changes in Australia for same-sex parents and LGBTI people in general.

In 2008, the *Family Law Amendment (De Facto Financial Matters and Other Measures) Act* (Cth) broadened the federal definition of “de facto relationships” to include same-sex couples. De facto relationships, also known in some countries as “common law relationships” or “domestic partnerships,” are relationships of two people who are not married or related by family and who live together as a couple on a genuine domestic basis and have the same legal status as a married couple (Family Relationships Online, 2010). The amendment also provided for the recognition of female

² At the time of writing, a bill to legalize same-sex marriage had passed the Australian Senate and was in the process of being debated in the House of Representatives. Same-sex marriage will likely be legal by the time this article is published.

same-sex parents, so long as the couple was in a de facto relationship at the time of their child's birth and the nonbiological³ mother consented to an artificial conception procedure that resulted in the conception (Rainbow Families Council, 2010). Subsequently, the *Family Law Amendment Act 2008* (Cth) provided separating same-sex couples' access to the federal Family Court in order to resolve any custody or property disputes.

Same-Sex Parents and Service Providers

Research on lesbian parents in Australia has shown that when accessing healthcare services, lesbians are compelled to be more reflective, to plan, and to negotiate their contact with mainstream service providers more cautiously than heterosexuals or lesbians without children (McNair et al., 2008). Consequently, lesbian mothers manage their engagement with the healthcare system by identifying lesbian-friendly service providers and utilizing a variety of protective strategies to ascertain the level of safety and sensitivity they might face (Hutchinson, Thompson, & Cederbaum, 2006; McNair et al., 2008). Similarly, in their study of lesbian parented families in the United States, Mercier and Harold (2003) found that such families actively selected schools and teachers who were known for multiculturalism and openness to diversity. For some parents, this meant spending considerable energy collecting information about different schools and possibly moving their residence in order to be closer to a school that they felt more comfortable with (Mercier & Harold, 2003). Likewise, in their study on Australian lesbian parented families, Lindsay et al. (2006) found that while a third of the families reported significant school support for their families, this support had been created by the actions of both schools and the families themselves and included parents carefully selecting their children's schools.

Nevertheless, a majority of the families in Lindsay et al. (2006) chose to hide their family structure from the children's school. This practice by lesbian parents of hiding their sexuality from professionals in order to avoid a negative reaction was also found by McNair, Dempsey, Wise, and Perlesz (2002). The lesbian parents in their Australian study reported experiencing difficulties as parents because of their sexuality, including fear of harassment and a lack of access to services (McNair et al., 2002). While research on gay fathers is limited, an Australian study on gay fathers through surrogacy has shown that as with lesbian mothers, negative, discriminatory, or conservative social attitudes present a challenge in same-sex male fathers' day-to-day lives (Tuazon-McCheyne, 2010). Research

³ Throughout this article, I will be using the term "nonbiological mother" for the female parent who did not give birth or provide genetic material in the creation of the child.

has consistently shown that LGBTI people in Australia have a fear of prejudice or discrimination (Hillier et al., 2010; Pitts, Smith, Mitchell, & Patel, 2006; Smith et al., 2014) and that this fear often causes them to modify their daily activities in particular environments (Pitts et al., 2006). Nevertheless, while McNair et al. (2002) found that prospective same-sex parents anticipated less acceptance and support as parents, including less support from professionals and service providers, participants who had children and had come into contact with professionals and services reported relatively little discrimination and good support.

Services continue to be framed around a heterosexual family model, and this can lead to LGBTI people feeling isolated and vulnerable and may lead to them spending considerable time and emotional energy finding a provider whom they will feel comfortable with and/or prevent them from accessing the much-needed support of a service provider (see Barrett, Harrison, & Kent, 2009; Barrett & Stephens, 2012; Barrett, Turner, & Leonard, 2013; The Bouverie Centre, 2012; Christensen, 2005; Hayman, Wilkes, Halcomb, & Jackson, 2013; Hutchinson et al., 2006; Lindsay et al., 2006; McNair et al., 2008; Peterson, 2013). In the *Work, Love, Play* longitudinal study of lesbian, gay, bisexual, and transgender (LGBT) parents in Australia, parents often experienced “uncomfortable or anxiety provoking encounters with healthcare workers who struggled to adopt inclusive or appropriate language to engage their family” (von Doussa et al., 2015, p. 459). Similarly, the study demonstrated that parents valued healthcare workers who were open and honest and comfortable asking questions about their relationships and family (von Doussa et al., 2015).

Separation can often result in a need for service providers with whom parents have not had contact previously, such as mental health practitioners, mediators, and/or lawyers. During a separation, these services are often pivotal in framing a person’s experiences, can make separation either easier or harder to go through, and can ultimately assist or hinder the creation of positive post-separation kinships. For example, counseling can reduce a person’s isolation and help him or her process the pain and challenges of a separation; mediation services can help a couple negotiate a positive separation agreement, avoid costly and/or traumatic legal processes, and help them to facilitate a more positive ongoing post-separation relationship. Likewise, for those who end up requiring the services of a lawyer, finding one who can understand their situation and respond to individual requirements can be the difference in ensuring that parents’ rights are protected and recognized. Consequently, the study on which this article is based was particularly interested in how same-sex couples navigated services and service providers during and after their

separation and how this may have had an impact on their separation experiences.

Method

The aim of the study was to explore, and increase understanding of, experiences of separation in the context of a same-sex parented family. The study required a methodology that allowed for an exploration of people's experiences in relation to broader social and political structures such as the law, marriage, and family. I wanted to be able to interact with participants and delve deeper into their responses and individual experiences than is possible in either a quantitative study or qualitative study using surveys and/or focus groups. Consequently, I chose to undertake a qualitative study via semi-structured one-on-one interviews. Participants were same-sex parents who had either experienced separation within their own same-sex relationship or had experienced the separation of another same-sex couple within their multi-parent family.⁴ A total of 23 semi-structured in-depth interviews with 24 people⁵ took place in the Australian capital cities of Melbourne, Sydney, Brisbane, and Adelaide, as well as in rural and regional locations in the state of Victoria. The average interview lasted for approximately 80 minutes.

The 22 participants who were included⁶ in the study came from 19 different separated same-sex parented families; 18 were female, and 4 were male. Of the 18 female participants, 11 were biological mothers, 6 were nonbiological, and 1 was both a biological and a nonbiological mother. Of the 4 male participants, 2 were biological fathers, 2 were nonbiological fathers, and 3 were co-parenting with lesbian couples in multi-parent families. Only 1 of the male parents had been parenting as part of a couple relationship without female co-parents involved. A further 3 female participants had also parented as part of a multi-parent family. The remaining 16 female participants had parented as part of a couple relationship without male co-parents involved.

The youngest participant was 33 years old, the oldest participant was 57 years old, and the average age of participants was 43. The majority of participants had post-graduate qualifications (68%), and half of the

⁴ Families in which there were more than two parents with the plan to permanently co-parent their children as part of a multi-parent family. These families began with a same-sex female couple who either joined with a male same-sex couple, or a single gay male, to create their family together.

⁵ In one of the interviews, two participants asked to be interviewed together.

⁶ Two people were not included in the final study; one was excluded because s/he did not fit the parameters of the study, and one participant withdrew from the study.

participants (50%) had an annual household income of over \$(AUD)150,000. Two participants identified as Aboriginal Australian and the remaining 20 as Anglo/Caucasian Australian. All participants reported that English was the main language spoken at home and that they were totally fluent. Half of the participants (50%) lived in an inner-metropolitan area, eight in an outer-metropolitan area (36%), and three (14%) in a rural or regional location. Pseudonyms were randomly applied to all names used in this article to anonymize participants' identities.

The semi-structured in-depth interviews followed an adaptive theory (Layder, 1998) methodological approach. Layder's (1997, 1998) adaptive theory posits the notion that there is both a subjective and objective social reality. The aim of research using this framework is to explore the subjective perspectives of participants—the ways they view and understand the world, the values they hold, the meaning they make out of their lives and their interactions—while also seeking to understand the influence of objective social structures on participants' views—such social structures as the law, a person's economic position, and so forth. This method provided me with the means to combine microanalysis research (individual experiences) with structural analysis (broader theories focusing on society rather than individuals) (Layder, 1997, 1998; Van Gramberg, 2006). In other words, an adaptive theory methodology allowed “for an interconnection between the actor's meanings, activities and intentions, or their 'lifeworld' and the broader 'system elements' of society, culture, institution, and power” (Van Gramberg, 2006). Consequently, the adaptive method allowed for the acknowledgment of the various aspects of the social world that are pre-constituted and that exist alongside, and interact with, the lives of participants (Layder, 1998).

Limitations

A limitation of this study was the small sample of male participants. Recruiting male participants had been particularly difficult due to the added sensitivity of their situation. Male same-sex parents in Australia have a higher sense of vulnerability due to the difficulties for two males to become legally recognized as co-parents in Australia (see: Rainbow Families Council, 2010) and may therefore fear how research on their separation may be used against them politically. Equally, they may fear possible sanctions from within the LGBTI community as a consequence of them sharing what could be perceived as a negative same-sex parenting story

that may damage the conservative family values image of marriage equality campaigns.⁷

These sensitivities and vulnerabilities were raised by potential male participants and caused trepidation among all but one of the men whom I interviewed. The one male who appeared at ease throughout the interview was someone whom I had met previously and with whom I had already developed a rapport. In contrast, the men who did not know me began the interview appearing shielded and asking questions about how their stories would be used. Unlike the female participants, after the recording was stopped, the three men who had not met me before requested to see the transcript of their interviews before I could use their data, and one participant specifically mentioned that he wanted to ensure that he had not mentioned anything that could damage “the community’s reputation.”

In particular, the study was unable to recruit participants who had created their family via surrogacy. While sensitivities are faced by all male same-sex parents, those who had children via surrogacy are subject to further stigma and are more vulnerable. Several states in Australia outlaw couples, both same-sex and opposite-sex, from accessing commercial surrogacy abroad, and the discourse in the Australian media surrounding surrogacy tends to be one of scandal, abhorrence, and outrage (see Berkovic, 2014; Landy, 2014; Maiden, 2014; News Corp Australia Network, 2014; Peatling, 2014). Consequently, it is likely that this contributed to the difficulty in recruiting fathers who had their children via surrogacy. The limitation of access to separated male same-sex parents highlights a need for future research of these parents and their experiences of separation—in particular those who conceived their children via surrogacy. These difficulties may become less problematic in the future as the stigmatization of male same-sex parenting is reduced and if laws in Australia criminalizing or preventing forms of surrogacy are relaxed or removed.

Findings

Counseling and Mental Health Service Providers

Participants encountered a range of counseling and/or mental health service providers before, during, and after their separation. Counselors and/or mental health service providers were engaged for a variety of reasons and may have been arranged either by choice or due to the court or mediation process requiring them to do so. The parents in this study had

⁷ For example, when Australian gay men Andy John and Craig Roach appeared on the television show *Married at First Sight*, they came under attack from within the gay community for trivializing marriage and potentially setting back the marriage equality campaign (see Anderson, 2016; Quinn, 2016).

concerns around whether counselors and mental health service providers would adequately understand their specific needs as separating same-sex parents. They were nervous about this service sector, not necessarily as a consequence of previous bad experiences but due to an assumption that they would encounter heteronormative services and heterosexist service providers. The desire to be understood by service providers without a need to explain anything was common and was something that motivated the way people navigated the whole sector. Participants wanted help from their service provider without the need to explain their sexuality or to clarify their therapist's understanding of same-sex relationships and same-sex parented families. When encountering a counselor or mental health provider, people are raw and vulnerable and need reassurance that they are in a safe and welcoming place where they can discuss and unpack their innermost personal thoughts and emotions. A key element to a safe space is being understood and not feeling alien and unusual.

Some participants managed these concerns by intentionally seeking out LGBTI-specific counselors and/or mental health providers. Lillian explained that while she did not feel the need to visit a lesbian doctor, when it came to discussing her relationship she wanted someone who immediately understood her:

I would rather a lesbian counselor in some situations, not everything. I don't need a lesbian doctor or anything like that, but when it's relationship stuff—someone you don't have to go through why you are same-sex attracted, not that you necessarily do but you sort of feel like you do. You know what I mean? So if you know that the person talking to you just gets it, you know if she's a lesbian, you don't have to worry about that, you can just get in there. . . . I liked going to a lesbian counsellor rather than just your average Jo counselor because [non-gay counselors] get a bit too interested in the sexuality side, and I don't want to talk about that. I want to talk about the issue.

Participants were worried that non-LGBTI counselors would focus more on their sexuality than on the reasons they had gone to see them. Consequently, Carina and her former partner did not go to a counselor when one of them was suffering post-natal depression out of fear that a non-LGBTI counselor would pathologize their relationship rather than focus on the post-natal depression. Nevertheless, when they began having relationship difficulties, Carina and her former partner decided they would seek the help of a family therapist. While Carina had a preference for a

lesbian counselor, she and her former partner found an LGBTI-friendly service provider who, despite not being lesbian or gay, advertised specifically to LGBTI people and was able to satisfy Carina and her former partner's therapeutic needs. Carina explained:

We went to [a service downtown] because it had, you know, like it had a lesbian and gay sort of rainbow thing and it had been promoting itself in the papers and things. I mean even though we had a preference for a lesbian and gay provider we didn't think that that was ever the only criteria. So we felt that we were able to pick someone or that we would trust a provider that wouldn't cloud their practice.

Likewise, Audrey went to a lesbian counselor because she believed that a lesbian counselor would understand her relationship better. Audrey explained:

I had a counselor, and yeah that was the only way I kind of got through it. She was a lesbian . . . , so she knew exactly what my ex was like.

Similarly, while Tanya had not originally sought out a lesbian-specific service, she unintentionally found herself with a lesbian counselor, an experience she valued so much so that she has thereafter deliberately sought out lesbian counselors. Tanya explained:

By chance we happened upon just a generic service, but the person we ended up seeing happened to be a lesbian, not by design, so that was good. After that, I sought out a counselor who was a lesbian . . . because I did feel that some of the issues I felt more comfortable discussing that with somebody who got it. You know, who I didn't have to explain or didn't have to spend time explaining you know the whole parameters of the thing.

Accessing LGBTI or LGBTI-friendly⁸ counseling and/or mental health services allowed participants to have confidence and trust in their provider and to begin their relationship with the service provider believing that their same-sex separation would be understood and that their interaction would be prejudice-free. Having these positive expectations before parents begin

⁸ Participants specifically used the term "LGBTI-friendly" rather than "gay-friendly."

using a service can provide them with a safe space where they can hopefully gain more from the sessions than had they gone in with fear and hesitation.

While some participants had bad experiences—feeling misunderstood or encountering attitudes that privileged biological kinships—others had good experiences that allowed them to feel understood and have their needs met. Good and bad experiences were described by participants regardless of whether the service providers they visited were non-LGBTI, advertised as LGBTI-friendly, or LGBTI-specific. One of the biggest concerns of participants was that they had come away from their experiences feeling that their counselor and/or mental health service provider was unable to understand their relationship or their specific situation and needs. For example, Rosemary went to a psychologist for help dealing with her separation, but after a couple of sessions she stopped going because she perceived that her psychologist had no understanding of her experiences. Rosemary explained:

He was an older straight male. What does he understand about a gay female who has just gone through a breakup and has two kids and is in quite an unusual life situation? I mean he went through the normal coping mechanisms, all the usual psychology stuff, but I didn't find it that useful. I had a couple of sessions with him, and then I just gave up.

Participants often believed that the lack of understanding they experienced was due to the provider privileging biological parenthood and kinship. For example, Karen, a nonbiological mother who lost contact with her child due to the law at the time of her separation not recognizing nonbiological mothers, attempted to gain contact with her child after the law had changed. Nevertheless, Karen explained that before she attended the family court, a psychologist made a report dismissing her role as a nonbiological mother, arguing that the child did not know who Karen was and that it would not be in the child's interest to meet Karen. Karen explained:

When we tried to recontact her last year, my ex went and saw a child psychologist that the family courts kind of respect and got this report done. The psychologist refused to meet with me or hear my side of the story, made all these assumptions about my intention, and said it was all about me and nothing about the child and [that] the child doesn't know who I am and so why would you bother coming back

into their life now. So obviously, they had no understanding of, you know, children's right to know where they have come from and who their parents are.

Similarly, when nonbiological mother Elizabeth was going through her separation, the court required her and her former partner, Cindy, to see a psychologist with their child, Stephen. While the law at the time did not recognize the nonbiological mother, the psychologist had the ability to recommend that Elizabeth have contact as a significant person in the child's life. However, Elizabeth's former partner had now re-partnered with a man named Ian, and Elizabeth believed that this led to the psychologist giving preference to Cindy and Ian's new heteronormative nuclear family over her desire to continue to be a parent. Elizabeth explained that this was why she stopped fighting to be Stephen's mother:

The ugliest part of [the separation] was the psychologist. I was required to go through this big process with this lady who was supposed to be one of the leading legal psychologists in [my state], and she could not wrap her head around the relationship or the situation. And pretty much I felt she was against me the whole time, and [she said] "why would I inflict this on a child?" That was a big part of the reason I gave up as well. I just knew in [my state] with this system and somebody like that who just openly said she would go to court and speak against me because Cindy had a good man who was willing to raise somebody else's child, [I would lose].

While participants often shared a preference for an LGBTI or LGBTI-friendly counselor or mental health service provider, some participants nevertheless believed that these providers also failed to understand their situation or specific concerns. For example, Elizabeth specifically sought out a bisexual counselor for help in dealing with the loss of her child as a result of separation. Elizabeth had decided to stop having contact with her former partner and their child, believing that it was necessary in order to protect the child. When she explained this to the counselor, she felt that her unique situation was not understood, and she believed that the counselor aggressively disagreed with her decision. Elizabeth explained:

I tried a couple of times to see psychologists about it, and I ended up just pulling the pin because the last one I saw was just like really intense in my face, going "you must see Stephen immediately, you must maintain contact, you must sort this out right away, you must

go see him now." Just like a lot of really heavy in-my-face, and it was just not the right kind of message. . . . She is bisexual.

While Elizabeth recognized that the counselor was supportive of her role as a nonbiological mother, Elizabeth did not feel that the counselor appreciated the unique situation that she was experiencing, and this left her feeling even more isolated—particularly because she had the expectation that an LGBTI counselor would understand her.

Like Elizabeth, Pauline and her former partner, Judy, went to a counselor who was a same-sex-attracted woman. Nevertheless, Pauline believed the counselor not only failed to understand their experience as separating same-sex parents but also failed to recognize the importance of Pauline's role as a nonbiological mother. Pauline explained:

When we separated, the counselor told us that Donna, the youngest [child], she was like two-and-a-half at the time, needed to spend more time with Judy because she is the birth mum. We're just like, "I don't think that's right." [The counselor was] saying, you know, "Donna shouldn't be away from Judy for anything longer than three days," and Judy was like "but Pauline is like no more or less a mother," like Donna would miss me just as much as Judy. You know what I mean? So it was a really interesting kind of thing that there is a [belief] that the birth mother has more of a bond. I don't feel we ever had anything other than equal love for them. That was the lesbian counselor who said that! I think it is like a thing—that's what shrinks believe, that kids need to be with their birth parent.

Neither Pauline or Judy supported the counselor's view that their child needed to spend more time with the biological mother. Consequently, Pauline continued to share equal care of the children with Judy, and the two women stopped seeing the counselor. While the two women were able to proceed without the counselor's help, they nevertheless felt as though they had no other option as they could not find the assistance that they needed from a counselor. Some participants reported that while they had negative experiences with some providers, they found others whom they were happy with. After her separation, Lexy was seeing both a psychologist and a psychiatrist. According to Lexy, while the psychiatrist struggled to understand or cope with her needs as a separated same-sex parent, the psychologist was inclusive and understanding. When asked if the mental health service providers were receptive to her situation as a separated same-sex parent or if they understood her sexuality, Lexy explained:

The psychiatrist not so much. He was a bit old school, very old school and male. So I have to say it was a bit over his head. So I tended just to kind of focus on the counselor and the psychologist who were great. [So I saw] the psychiatrist just to deal with the medication stuff.

Similarly, after her separation, Sally had taken her daughter, Denise, to see a psychiatrist whom Sally believed was unable to cope with their family situation. Nevertheless, Sally reported having had good experiences with the psychologist to whom she took her daughter. Sally explained:

The first guy we took Denise to was a bit of a dickhead psychiatrist. But the psychologists that I have spoken to were the best for me and her. They've all been excellent. . . . I couldn't criticize any of them.

Some participants were fortunate to only have good experiences with counselors and/or mental health services. Tara believed that she and her former partner were lucky to have encountered mental health service providers who understood and responded to their needs as a same-sex parented family, both before and after their separation. Prior to separation, Tara and her former partner, Laura, visited a counselor and discussed the idea of modifying their relationship to become sexually non-monogamous. According to Tara, the counselor understood their needs and desires and helped the two women navigate the change in their relationship. Tara explained:

[Non-monogamy] came up for us when Laura was in counseling. We actually saw the same counselor but at different times—we never went together. But I went, and then she went. . . . So I think the fact that that happened and we talked about [non-monogamy] while she was in counseling was good too, because we had someone supporting us through it, in a way, externally supporting us through it and promoting openness and honesty and gentleness and you know doing it in a very gentle way. So I think that absolutely helped our relationship to have talked through all that stuff. And I am sure, yeah, that that would have helped in the long run.

After they separated, Tara, Laura, and their daughter went back to the same counselor, who then provided them with the counseling that they needed to

get through the separation and to form new post-separation family relationships. Tara explained:

I had an awesome counselor, and she just kept me on track with the kids too in saying, “This is what needs to happen. They need to understand that it is not their fault. They need to understand they don’t need to control it. They need to understand that your expression of emotion doesn’t make you incapable of taking care of them.” . . . We were really lucky to encounter that really good psychologist that we both then saw and then took my daughter to.

Like Tara and Laura, Zoe found a good mental health service provider who was able to provide her with support and affirmation during her separation. While Zoe had originally begun seeing the psychologist because the service was provided by her employer for work stress, she continued to use the service for help during her separation. Zoe explained:

It was actually good timing. I was seeing a therapist through the work process, and to be honest 80% of our conversations were about my breakup rather than my stress from work. He gave me a lot of support, and it was very helpful in reaffirming that what I was doing was logical and that I wasn’t doing anything wrong. It was helpful through that process to know that I had put in everything that I could to try and keep the family together and that the decision I made was okay to make. It was important for me to know that I hadn’t just walked away at, you know, at the first sniff of something going wrong.

Zoe’s therapist understood her needs and helped her to be able to feel that she was on the right path. In contrast, Belinda believed that her counselor had helped her by telling her she was going down the wrong path. When Belinda separated from Nora, Belinda took their child, Sharron, and moved to another city, hoping to never see Nora again. The law did not guarantee Nora any recognition of parenthood at the time; however, Belinda changed her mind and eventually shared the raising of her daughter with Nora. According to Belinda, her change of heart came about as a result of a counselor’s advice. Despite separating many years before the law changed to legally recognize female nonbiological parents, Belinda believed that her counselor understood their family’s needs more than she had herself and that this helped her make her separated same-sex parented family work. Belinda explained:

I think the poor old counselors were like “oh, my god,” and that was good. The counselor pretty much just worked us through “you two have to find a way to get along. . . .” It was the court-ordered counseling that really changed [our relationship]. When [the counselor] said, “if you want to damage your child, keep doing what you are doing,” I just had to go, “Well, do I want to damage you or do I not?” So I had to put that stuff aside and do what’s best for Sharron really.

Participants’ experiences with counselors and/or mental health services was the difference for many between being able to work through their separation and relationship issues and having protracted mental health difficulties due to their separation. A counselor or mental health provider has the ability to reduce isolation and provide invaluable coping techniques for separating families. The ability to be understood and to find a provider whom one can trust and who feels unprejudiced towards same-sex parents was incredibly important for participants and allowed them to feel affirmed and valued and ultimately helped them work through their issues.

Mediators

Before a parent can apply to the courts for parenting and/or financial orders, they are required to make a genuine effort to resolve their disputes through mediation (Family Court of Australia, 2016). Mediation, also known as family dispute resolution, is designed to assist couples affected by separation in solving family disputes and can help families make agreements on a range of issues relating to property, money, and children (Family Relationships Online, 2011). As with counselors and mental health service providers, mediation providers can make an incredible difference to the separation experiences of parents and their families. Mediation can be the difference for parents between being able to negotiate parenting agreements they are satisfied with and failing to reach any suitable agreement or making one that is ultimately unsatisfactory. Once more, finding a service provider who can adequately understand the family circumstances is incredibly important as it allows parents to feel validated from the onset of mediation and able to discuss their concerns in a safe environment. Participants’ views of mediators and mediation services were not unanimous, and they shared both good and bad experiences and/or perceptions of the industry. Some people felt that the services would not be appropriate for their same-sex or multi-parent family and either avoided the services, reluctantly attended, or sought out LGBTI-specific and/or LGBTI-friendly providers. Similarly, while some parents felt that the

services were too heteronormative or displayed biological-privileging attitudes, others felt that the providers were able to adequately respond to their family's needs.

When Sally and Mary separated, they attended a mediation service provider who, according to Sally, took the position that children should stay with their biological mother. Sally believed that it was this belief by the mediator that convinced Mary, the nonbiological mother, to eventually agree to a parenting plan that privileged Sally's biological kinship to the children. According to Sally, "the mediator convinced Mary that she wasn't doing [the children] any favors" by seeking shared custody. Like Sally, Audrey visited a mediator whom she believed privileged biological kinship over the role of a nonbiological mother. Audrey, who is a biological mother, believed that the service she and her former partner attended did not see nonbiological mothers as real parents. She explained:

We used a Jewish [mediation service]. I mean it was all fair and reasonable from the outside, but I think it was a little bit of a whitewash, and I don't think that my ex was prepared for it, and I basically got exactly what I wanted. I think that the Jewish [mediation service], from a couple of comments they made in that mediation, were kind of implying that I was the [only] mother, and so I thought that that was a bit odd, like you know because she is the mother as well. I mean I loved it because I got exactly what I wanted.

However, some participants reported good experiences with religious-based mediation services. When Lexy and Megan separated, the family went to an Anglican mediation service. Lexy and Megan had created a family with Jack, who conceived the child with Lexy. According to both Lexy and Jack, who were interviewed separately, the mediation providers not only understood the same-sex separation but were respectful and understanding of their multi-parent family arrangements. Lexy described their mediation experience:

We went to [an Anglican provider], and we had some mediation and some sort of planning sessions. I sort of came away with things that were a little bit clearer in terms of acceptable behavior towards each other. . . . I think [Jack] felt a lot better about the fact that he wasn't the person in the middle of [Megan and me]. . . . The three of us went [to mediation]. We would never have got the two of us together at that stage. My ex wouldn't have come if it were just the two of us. . . . I didn't feel that there was any animosity [from the Anglican provider]

in regard to anything. Which is interesting, I think, kind of going to the whole Christian service. I mean she was very good.

Likewise, Jack described their good experience with the religious service provider:

They were really good. I mean, it's a long time ago, but my memory of it was that they were very good. I don't think they had handled many situations like this at all, but the particular people we dealt with, which were probably only one or two people at the service, we never had any problems.

As some participants had with counselors and mental health service providers, some of the separated same-sex parents had a preference for an LGBTI-specific mediation provider. Lillian explained:

I would rather see someone that's like of the same sexuality because I don't want to discuss the sexuality because I don't want it to be the topic. I want it to be the fact that you know the personality issues or the crisis. I want to talk about that rather than the sexuality thing because it shouldn't matter but it does matter.

However, participants often discovered that due to the smallness of the LGBTI community, they encountered LGBTI-specific service providers who were connected to themselves or their former partner's circle of friends. While this connection may not necessarily be an issue when using other service providers, for example, an LGBTI car mechanic, plumber, or gardener, when it comes to mediation during a separation, this closeness can create concern for one or both members of the mediating couple. For Tara, this closeness made her former partner feel prejudiced against the mediation:

We did a mediation session, but [my ex] felt like they were prejudiced towards me and against her. . . . It was someone from [an LGBTI organization], and she did know me . . . but not particularly well, and so there was potentially some boundary crossing there that maybe we shouldn't have done it that way. We don't really interact much, and I trusted her, but I know her, so I trust her.

On the one hand, participants wanted to see someone who understood and sympathized with their family situation, while on the other hand, they did not

want someone who was too closely connected to either themselves or their partner.

Finally, despite their preference for LGBTI mediation services, participants in rural and regional areas raised concern at the lack of LGBTI services or LGBTI-inclusive services in their community. For example, Lillian explained:

I don't feel that there's any place out there that I think "wow, I would go there, they are so fantastic, I would go there." You know, maybe there is, but I don't feel like it is, especially around in the country. There's not a place that you think "wow, they are just completely inclusive, it's completely not an issue, and we can just work on what we need to." I don't know. Have you heard of such a place?

Consequently, Lillian and her former partner did not attend any form of mediation during their separation—neither from a private mediation service nor from a government-funded Family Relationship Centre⁹ (FRC). While Lillian believed that this did not impact their final post-separation family arrangements, she was fortunate to be able to negotiate her separation with her former partner. Other parents may not be as fortunate, and by not being able to access a mediation service provider with whom they feel comfortable, their separation outcomes and post-separation kinships may be negatively affected.

Family Relationship Centres (FRCs). In 2006, the Australian government introduced *The Family Law Amendment (Shared Parental Responsibility) Act 2006* (Cth), which among other reforms to the family law system, introduced 65 FRCs across Australia (Kaspiew et al., 2009). These government-funded centers provide mediation and offer separating families information, advice, and group sessions, with the focus on enabling separating families to achieve workable parenting arrangements outside the court system (Family Relationships Online, 2014). Separated same-sex parents' views and experiences of FRCs were an area of interest to this study because it provided a greater insight into how separating same-sex parents perceived and experienced mainstream family mediation services. Participants' discussions of FRCs were broken into three themes: did not attend an FRC, had negative experiences at an FRC, and had positive experiences at an FRC.

Did not attend an FRC. Several participants explained that they had chosen to neither contact nor attend an FRC because of their negative

⁹ In this article, I use the official spelling of the organization, which includes the Australian English spelling of "center" as "centre."

perceptions of FRCs and/or their perception that the services were not targeted to, or available for, the use of same-sex couples. For example, Matthew explained that he and his family did not seek the support of mediation because they did not think that there was a provider who could deal with their specific concerns as lesbian and gay parents or as a family that had more than two parents. Matthew recalled:

We didn't get any supports. I wouldn't have thought that there was any. Because Relationships Australia¹⁰—I didn't think [they] did any work around gay issues.

Similarly, Judy had felt that there was nowhere for separating same-sex couples to go to for advice and help with their separation, and as a result, she did not access any formal service to mediate her separation. Referring to Relationships Australia, Judy questioned whether she was able to go to them or indeed any service for her family:

I certainly didn't feel like there was [sic] places I could call. You know, Relationships Australia? Where do you go for stuff like this? . . . I mean I think if there was . . . we definitely would have gone.

Many of the beliefs that prevented participants from contacting and/or attending an FRC stemmed from a perception that FRCs were for heterosexual couples and were not set up for, or trained to understand, same-sex relationships and separation. Lillian explained why she and her former partner, Erika, chose not to go to an FRC:

I didn't want to go to Relationships Australia. I could be completely wrong, but I didn't want to go as lesbians to what you see as a straight kind of place. Because it's just, I don't know, you don't want to be a curiosity necessarily, especially when you are going through that kind of pain.

¹⁰ Tenders from organizations were sought by the Australian Government to operate the new FRCs, and an organization known as Relationships Australia was granted the tender to establish and manage over half of the initial FRCs (Relationships Australia, 2006). Consequently, a number of participants mentioned Relationships Australia during their interviews when referring to FRCs. However, it is important to note that it was unclear if participants were directly referring to Relationships Australia or if they were referring to FRCs more broadly. It is possible that due to Relationships Australia's status as the largest provider of FRCs, the Relationships Australia brand had become a common noun for the service.

The perception of FRCs as “straight” and the fear of being treated as a “curiosity” by attending an FRC as a separating same-sex couple were also mentioned by Judy when asked why she and her former partner, Pauline, had not gone to an FRC during their separation. Judy recalled:

They just seemed really straight, yeah. It is that thing where you don't want to be a curiosity. . . . I mean, I think if there was a really obvious kind of counseling service of some kind that Pauline and I could have gone to together where it felt like they understood who we were and our kids and the law and all that sort of stuff, in relation to us, we definitely would have gone. We worked it out ourselves, so that's great, but I don't know that everybody can do that. It would be great if there was something more obviously available.

Despite indicating a desire to have attended mediation or an FRC, both of the couples above felt that there were no services that would understand and meet the needs of same-sex relationships. Both women explained that theirs and their partners' perceptions of FRCs had been shaped by stories and beliefs within the LGBTI communities about the services. For example, Lillian's friend had warned her not to attend an FRC and told her about lesbians who had gone to Relationships Australia and had negative experiences. She explained:

I have heard about negative experiences, and so for me it is like, you know you are already going through all this, you don't want to have to bother with that, and it's really, it would be nice to know that there would be a service that you can just go into and not just have straight people that are, you know, are understanding. I'd actually just like a lesbian.

Likewise, Judy had heard about negative experiences with FRCs, and while she knew there were many different mediators at an FRC, she was worried that she would not have any choice over which mediation counselor she and her former partner would get to see. Judy recalled:

I had heard quite a lot about Relationships Australia, but it never felt like an attractive option to help us through the separation process, really, because it did appear to me to be aimed at heterosexual couples. I also had a sense that it could take a while to get into and you wouldn't necessarily have much choice around the counselors

you were given, and I just didn't want to end up with someone who had no experience in working with same-sex couples.

Negative experiences at an FRC. Some participants reported having had negative experiences with FRCs. Three themes emerged from participants' negative experiences: heteronormativity, a lack of knowledge about LGBTI relationships and/or the law, and FRC staff appearing uncomfortable and/or the couple feeling like they were a novelty. For example, Jack felt that the FRC treated his relationship as a novelty despite the mediator mentioning to them that they had dealt with gay and lesbian clients previously. While Jack did not doubt that the mediator had worked with same-sex couples and believed that they treated him and his partner the same as every other couple, they still felt that the service provider did not entirely understand what was "going on inside" their relationship. Jack explained:

In the counseling my partner and I went to, we spent some time explaining [our situation] to the counselor and they would go "oh, that is interesting" and ask a few questions, like it was obvious that it was a novelty. But they didn't run screaming from the room, and we didn't feel that they sort of treated us any differently. . . . It is sort of that common thing I think when you turn up to a health professional and they go "oh, yes, I have dealt with that before" and you can see them trying to feel cool and relaxed and comfortable about it, but you are not really sure what is going on inside.

This experience was very similar to that of Tanya, who visited an FRC three times in a regional city with her former partner:

We did go through the generic Relationships Australia thing where they send you. I think we had sort of three sessions. . . . [However,] there was a little tinge of them kind of going "oh." There was just a sense of slight un-comfortability [sic] about the fact that they didn't know what to do with divorced lesbians.

Similarly, Rosemary reported that the FRC service that she and her former partner, Esther, attended did not adequately understand same-sex separation. Despite separating after the 2008 law reforms, Rosemary said that the FRC she attended was not aware of how the law treated same-sex parents or separating same-sex couples and asked Rosemary to explain it to them. She recalled:

I can't remember what the title of the position of the lady was, but she had no idea. None. And she actually had involvement in the gay community, which completely surprised me. I just got the shits because I thought "you didn't even know." She asked me what Esther's rights were as the parent! Like "you are supposed to know that, you are the family center, not me. Yes, I know that, but you shouldn't be asking me that."

Rosemary also described the FRC that she attended as being heteronormative despite the fact that it promoted itself as being same-sex-friendly. She explained:

They promoted being same-sex-friendly and all that sort of stuff, but everything was still heterosexual. Like it was ridiculous . . . knowing that they have same-sex clients means nothing when you are sitting around in a group session and they say, "okay, so who is the mum and who is the dad?" You know, everything is targeted at mum and dad. All terminology is mum and dad. Points like that aren't inclusive whatsoever, and you are just sitting there. In fact, in the session, there's a compulsory thing, course thing, you have to do—"building bridges," I can't remember what it is called, but there was I think a total of maybe eight or ten people in the group and two of us were gay. There was a gay guy and me, and like that's a pretty high percentage in a small group, and the two facilitators didn't even talk about anything in an inclusive manner—it was all mum and dad. Like yeah "not all kids have a mum and a dad—hello!" You know that's some kids' parents, you know, when you are talking about the two parties of the separation and the two actual parents of the children. So I found it disappointing.

Positive experiences at an FRC. While in the above quote Rosemary expressed her disappointment with the heteronormativity of the FRC service provider, she later pointed out that in general the staff of the FRC "were very friendly and nice." Similarly, while Tanya was disappointed that the FRC staff had appeared uncomfortable and unsure of same-sex separation, she found the sessions "enormously helpful" and believed that the FRC she attended was able to overcome its lack of experience in working with same-sex couples. She recalled:

On the whole, I would say that they managed that very well, and you know they just used the skills of normal divorced couples and the issues that were put before them, which indeed on a whole was right because they are the same issues—you know? They are the same challenges, and even though there are sort of big dimensions to that, essentially it is about . . . the same issues for everybody. . . . I would say they are pretty good.

While Rosemary and Tanya had mixed experiences, one participant reported having attended an FRC and being completely satisfied. Carina described her mediation at an FRC as good and believed that while the FRC used a generic framework for all relationships, that framework was relevant to her and her former partner, Madeline. Carina explained:

They've probably got a really generic framework for resolving conflict, and it wouldn't have mattered to them if one person was Aboriginal and one was you know had six heads or something. Like in a way they just go "Look we have got a problem and we have two parties and we need to hear their views." Like in that way, it didn't really matter to me. I didn't feel like they either gave preference to me as a birth mother or less preference to Madeline as a non-birth mother, for example.

Nevertheless, Carina's former partner, Madeline, had worked within the lesbian health field, and as a consequence, the couple had insider knowledge of an LGBTI-friendly FRC long before they separated. Unlike other participants who attended FRCs, Carina and Madeline were empowered by this knowledge, allowing them to feel confident from the beginning of their experience and to potentially overlook the subtler elements of heteronormativity that may have otherwise created the same negative experience reported by other participants. Knowing that there was an LGBTI-inclusive FRC to attend removed an extra hurdle for the separating couple.

The Legal Profession

Parents in this study overwhelmingly held a negative view toward lawyers and the legal profession. Some participants saw lawyers for advice, either alone or with their former partner, while others saw lawyers in order to go to court and resolve a custody dispute. However, the vast majority of parents did not use the services of a lawyer during their separation; this was often because they were able to negotiate separation without the need of

legal services. It was also often due to their belief that a lawyer would not understand the legal rights of same-sex parents or their belief that there was no point engaging lawyers because at the time of their separation their relationship or parenthood status was not legally recognized. Those who did use a lawyer were largely uninspired by their experiences, and none of the participants mentioned having had a positive experience.

Elizabeth described her experience with the legal system as one of the hardest things about her separation:

The legal system could not wrap its head around our case. . . . I got some lawyer on the other side of town, and he sat on it for months, and he didn't get anywhere. And finally I went to see this friend of mine who does a lot with gay and lesbian civil liberties and . . . they were like "go to this lawyer. . . ." I went to see this guy . . . , and he could not wrap his head around it, and he would just say the most inappropriate things. And I would just be sitting going, "I can't believe you said that," and he was really uncomfortable. . . . And he couldn't wrap his head around the fact that I was in a relationship with a woman, and I'd say "oh, look, there is a case in America," and he'd go, "oh, yeah, it would be in America, wouldn't it?" And I would be like "this is me, this is my life, and you are making a joke of it" sort of thing.

Elizabeth, like other parents, found herself talking to lawyers who did not have experience with separating same-sex parents, who were unfamiliar with their current legal status, and who treated their situation as a novelty, a joke, or as some exotic case. While Elizabeth eventually sought out a lawyer with "gay and lesbian civil liberty" experience, the lawyer was still unable to understand her role as a nonbiological mother and, according to Elizabeth, compared her situation to that of a father in a male/female divorce. When Elizabeth disagreed with her lawyer's plan for her to go for full custody and to take the child away from her former partner, the lawyer, according to Elizabeth, said, "a guy wouldn't think like this." Elizabeth said she replied, "I'm not a man—this is my relationship." Consequently, despite having spent \$AUD35,000 in legal fees and court costs, Elizabeth stopped seeing the lawyer and gave up on her case to have her son for more than two days a week.

Like Elizabeth, Judy believed that the lawyer she engaged was overly curious about her relationship and sexuality and that the lawyer lacked a detailed understanding of same-sex parents despite having a reputation for working with lesbian and gay clients. Judy had deliberately

sought a lawyer who had lesbian and gay experience because she wanted someone who understood her and would not ask trivial questions or treat her life as different or as a fascination. Nevertheless, Judy felt that her lawyer did not understand her same-sex parented family or her separation. She explained:

Even at the lawyer who sees lots of same-sex couples, they just had so many questions like “how do you do this? How do you do that?” Like [we are] not that different, [we are] not that interesting. . . . I wanted somebody who had a history in dealing with gay and lesbian issues. . . . You know I just wanted somebody who didn't ask questions about that, because they got it and understand that there are lots of different ways to do family.

This desire to be understood and to not have to first explain same-sex attraction or answer questions about it often led to participants seeking lawyers who were LGBTI themselves rather than simply being LGBTI-friendly, such as Judy's lawyer. For example, Carina thought that finding a lesbian lawyer was more important than finding a lesbian doctor because she believed that while medical professionals were generally accepting of LGBTI people, the legal profession was largely unknown and untested and because she was not confident whom to trust. Carina explained why she sought out a lesbian lawyer:

I think lawyers are much less of a known—I mean I think for us going to see a health and welfare kind of person, you would generally assume that they're open. Lawyers I just thought—not that I thought they would not be open, but that there [are] just many of them and whom could you choose? You've got no way. So we just went with word of mouth.

As with other service providers, the negative perceptions of lawyers and the legal profession were most pronounced among nonbiological mothers who separated before the law recognized them. These participants reported coming away from the legal process feeling invisible, ignored, and defeated, regardless of whether their lawyer was LGBTI-identifying or advertised as LGBTI-friendly. They were frustrated at the inability of their own lawyers to correct what they saw as an injustice in the law and were dismayed at witnessing their former partner's lawyer defending their lack of legal status as a nonbiological parent. That is not to suggest that the changes to the law improved perceptions of lawyers; it simply demonstrates

that the legal status of nonbiological mothers had a particular impact on their experiences with, and their perceptions of, lawyers and the legal profession.

When asked about her experience with lawyers, Karen shared her frustration that lawyers were unable to challenge the law at the time of her separation and help her gain rights as a nonbiological parent. The lawyer instead suggested that she walked away to protect her daughter from a prolonged court battle. Karen recalled:

We ended up going through a very drawn-out kind of court process and in the end because my ex was pretty much prepared to destroy my daughter just to get back to me. My lawyer said, “look if you love your daughter, you have to let her go” because we would have had to go to the Supreme Court and set precedent back at that time.

Karen acknowledged that the lawyer was acting in her interest and giving her sound advice and that the lawyer was impeded by the law. However, this experience had an impact on Karen’s overall perception of lawyers and the legal profession and left her with disdain for, distrust of, and disillusionment with not just the law itself but with all those who practice it.

Discussion and Conclusion

While marriage equality has been branded the final frontier of LGBTI equality in Australia, this study highlights the need for greater separation equality by creating better access for parents to services and service providers that are non-heteronormative and knowledgeable of the needs of separated same-sex parented families. Separation is a difficult time for people and can create a number of challenges. People can feel isolated, vulnerable, and overwhelmed and can subsequently turn to service providers such as counselors, mediators, and lawyers for understanding, help, and advice. The findings presented in this article demonstrate that for many separated same-sex parents, there was an added layer of difficulty to their separation process due to their concerns around finding the support of a service provider. Regardless of whether they are separated, same-sex parents often feel the need to cautiously navigate mainstream service providers in order to find one with whom they feel comfortable discussing their issues. This study has shown that due to these same concerns, some separating same-sex parents did not access the assistance of service providers, in particular mediation services, and therefore potentially missed out on valuable help during what can already be a traumatic and challenging time. Regardless of whether participants had a good or bad experience,

finding a service provider whom they felt comfortable with as a same-sex parent was often complex. While some participants did report having good experiences with service providers, many still entered the client/practitioner relationship cautiously and uncertain about whether they would get the help they needed. This added another layer of challenges in what was an already difficult period in their lives.

This article has also demonstrated that LGBTI-specific or LGBTI-friendly service providers were not necessarily the solution to these challenges. While participants often turned to these services in order to allay their concerns, they nevertheless encountered some of the same difficulties that they did with other providers as well as some new ones. In particular, as with other providers, the issue of biological parent status created an added challenge for some parents when interacting with LGBTI or LGBTI-friendly service providers. Biological privileging is a widespread cultural norm, and it cuts across all sectors of society, including LGBTI communities. Consequently, nonbiological parents were confronted with added challenges and increased vulnerability during their separation and were often left without the guarantee of protection that they expected from LGBTI-inclusive providers.

Overwhelmingly, the most widespread issue was that of heteronormativity. Service providers operate within a wider social structure of compulsory heterosexuality, a structural order of gender binaries, sexual hierarchy, male dominance, and heterosexual privilege that is embedded in Western social norms and that assumes all people are heterosexual (Rich, 1980; Seidman, 2009). According to the The Bouverie Centre (2012), "in the absence of effective training and appropriate resourcing, service providers may fall back on ill-fitting traditional heterosexual family frameworks when working with same-sex parents and their children" (p. 1). This pervasive and often invisible norm not only negatively had an impact on some of the parents' encounters with service providers, but it also caused many of the negative perceptions held by participants that led to them not accessing services and therefore the care, help, and assistance they needed. While service providers may in fact be fully inclusive of and knowledgeable about same-sex parents and their needs, by portraying a heteronormative public image, they can leave parents unsure whether their service would be appropriate for them. These parents may therefore avoid obtaining the services they need. Similarly, attending a service provider and experiencing heteronormative practices can leave parents feeling uncomfortable and add to their isolation and vulnerability. Consequently, the pervasive nature of compulsory heterosexuality and heteronormativity, whether experienced or perceived, created an added layer of

marginalization for same-sex parents as they navigated the already difficult terrain of separation. Reducing or eliminating heteronormativity may not only reduce the anxiety for separated same-sex parents when accessing service providers, but it can also lead to parents gaining the services they desperately require and help them create positive post-separation experiences.

Treating all clients/patients the same is not a solution to achieving an inclusive practice. By treating all families the same, service providers ultimately ignore the vast difference between same-sex parented and opposite-sex parented families, a practice that has been identified by researchers as a barrier to creating a fully LGBTI-inclusive service (Barrett & Stephens, 2012). This was highlighted in Jack's responses in the above finding. Jack believed that the mediation service he attended had treated him no differently than someone in any other couple; while this may sound like a fair outcome, it nonetheless points to a hidden, and possibly unintentional, form of heterosexism that can cause people to feel they have been misunderstood. For example, Jack came away from his experience believing that the service provider did not understand what was "going on inside" his relationship. However, the existence of a one-size-fits-all approach is perhaps understandable given contemporary same-sex marriage discourses that emphasize that same-sex and opposite-sex relationships are the same and therefore need to be treated the same. Nevertheless, in an effort to treat everyone the same, these discourses, and the service providers who reproduce them, have created a narrow understanding of the relationship between sex, gender, and sexuality and have ignored how their interaction produces a more complex experience of relationships, parenting, and separation among same-sex parented families. Ultimately, this approach may lead to clients/patients feeling as though their relationships and unique problems are not adequately understood or responded to by the services they attend.

Since the commencement of this research, a number of resources have been published in Australia to enable service providers to provide LGBTI-inclusive services (see Barrett & Stephens, 2012; Barrett et al., 2013; The Bouverie Centre, 2012; Mars, Morris, & Marchesiello, 2014; O'Donnell & Taylor, 2014). While these emerging resources provide excellent generic advice for working with LGBTI people or same-sex parents, they do not specifically deal with the complexities of separating same-sex parents. Only one of these resources made a reference to the separation of same-sex couples with children; however, this reference was only fleeting and was in a monograph specifically written for counselors and no other type of service provider. Unfortunately, at the time of writing this

article, there are no resources available in Australia for service providers that specifically address the needs of separating same-sex parented families. It is not surprising then that participants reported difficulties finding service providers who they believed could meet and/or understand their specific needs.

To combat the negative perceptions of services that prevent parents from accessing them, service providers need to ensure that their promotional material, information guides, and websites are sensitive to and inclusive of the diversity of sex, gender, and sexuality. Service providers who have already made changes to become an inclusive service should conduct outreach within the LGBTI communities to raise awareness of the availability of their inclusive services. This will help overcome the fear and anxiety of same-sex parents, who as demonstrated by this study are often unaware that there are service providers available who are able to understand and meet their needs. Likewise, a resource or educational guide similar to that made by The Bouverie Centre (2012) for healthcare providers working with same-sex parented families should be made specifically for separation-related service providers to provide them with knowledge to better serve the needs of separated and separating same-sex parented families. Finally, training and education of future counselors, mediators, lawyers, and other service providers needs to be undertaken within a non-heterosexist framework and integrated into core curriculum. This will provide future service providers with the skills to create inclusive services that are not heteronormative in either the promotion or delivery of their service.

References

- Family Law Amendment (De Facto Financial Matters and Other Measures) Act 2008* (Cth) (Austl.).
- Family Law Amendment (Shared Parental Responsibility) Act 2006* (Clth) (Austl.).
- Anderson, C. (2016, September 9). Why the gay couple on *Married at first sight* set back the equality cause. *Huffington Post—Australia*. Retrieved from http://www.huffingtonpost.com.au/cathy-anderson/why-the-gay-couple-on-married-at-first-sight-set-back-the-equali_a_21468582/
- Australian Bureau of Statistics. (2012). Same-sex couple relationships. *Reflecting a nation: Stories from the 2011 Census, 2012-2013*. Canberra, Australia: Australian Bureau of Statistics.
- Australian Bureau of Statistics. (2013). Same-sex couples. *Australian social trends, July 2013*. Canberra, Australia: Australian Bureau of Statistics.
- Australian Bureau of Statistics. (2017). Australian Marriage Law Postal Survey, 2017. Retrieved from <https://marriagesurvey.abs.gov.au/results/>
- Barrett, C., Harrison, J., & Kent, J. (2009). *Permission to speak: Determining strategies towards the development of gay, lesbian, bisexual, transgender and intersex friendly aged care services in Victoria*. Melbourne, Australia: Matrix Guild Victoria.
- Barrett, C., & Stephens, K. (2012). *Beyond: "we treat everyone the same": A report on the 2010-2011 program: How² create a gay, lesbian, bisexual, transgender and intersex inclusive service*. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University.
- Barrett, C., Turner, L., & Leonard, L. (2013). *Beyond a rainbow sticker: A report on How² create a gay, lesbian, bisexual, transgender and intersex (GLBTI) inclusive service, 2012-2013*. Melbourne, Australia: Gay and Lesbian Health Victoria.
- Berkovic, N. (2014, September 19). Surrogacy the new slavery, says top judge John Pascoe. *The Australian*. Retrieved from <http://www.theaustralian.com.au/news/nation/surrogacy-the-new-slavery-says-top-judge-john-pascoe/story-e6frg6nf-1227063326926>
- The Bouverie Centre. (2012). *Guidelines for healthcare providers working with same-sex parented families*. La Trobe University. Retrieved from http://www.bouverie.org.au/images/uploads/Bouverie_Centre_Guidelines_for_working_with_Same_Sex_Parented_Families.pdf

- Christensen, M. (2005). Homophobia in nursing: A concept analysis. *Nursing Forum*, 40(2), 60-71.
- de Vaus, D. (2004). *Diversity and change in Australian families: Statistical profiles*. Melbourne, Australia: Australian Institute of Family Studies.
- Dempsey, D. (2013). *Same-sex parented families in Australia: CFCA paper no. 18*. Melbourne, Australia: Australian Institute of Family Studies.
- Dempsey, D. (2015). Familiarly queer? Same-sex relationships and family formation. In G. Heard & D. Arunachalam (Eds.), *Family formation in 21st century Australia* (pp. 225-240). Dordrecht, Netherlands: Springer.
- Family Court of Australia. (2016, May 3). Reaching an agreement without going to court. Commonwealth of Australia. Retrieved from <http://www.familycourt.gov.au/wps/wcm/connect/fcoaweb/family-law-matters/family-dispute-resolution>
- Family Relationships Online. (2010, 31 August). Property division when de facto relationships break down. Commonwealth of Australia. Retrieved from <http://www.familyrelationships.gov.au/BrochuresandPublications/Pages/propertydivisionwhendefactorelationshipsbreakdown.aspx>
- Family Relationships Online. (2011, January 7). Family dispute resolution. Commonwealth of Australia. Retrieved from <http://www.familyrelationships.gov.au/Services/FamilyLawServices/FDR/Pages/default.aspx>
- Family Relationships Online (2011, October 27). About Family Relationship Centres. Commonwealth of Australia. Retrieved from <http://www.familyrelationships.gov.au/services/frc/pages/default.aspx>
- Farr, R. H. (2017). Factors associated with relationship dissolution and post-dissolution adjustment among lesbian adoptive couples. *Journal of Lesbian Studies*, 21(1), 88-105.
- Gartrell, N., Bos, H., Peyser, H., Deck, A., & Rodas, C. (2011). Family characteristics, custody arrangements, and adolescent psychological well-being after lesbian mothers break up. *Family Relations*, 60(5), 572-585.
- Goldberg, A. E., & Allen, K. R. (2013). Same-sex relationship dissolution and LGB stepfamily formation: Perspectives of young adults with LGB parents. *Family Relations*, 62(4), 529-544.
- Hayman, B., Wilkes, L., Halcomb, E. J., & Jackson, D. (2013). Marginalised mothers: Lesbian women negotiating heteronormative healthcare services. *Contemporary Nurse*, 44(1), 120-127.

- Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J., & Mitchell, A. (2010). *Writing themselves in 3: The third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people*. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University.
- Hutchinson, M. K., Thompson, A. C., & Cederbaum, J. A. (2006). Multisystem factors contributing to disparities in preventive health care among lesbian women. *Journal of Obstetric, Gynecologic, and Neonatal Nursing*, 35(3), 393-402.
- Kaspiew, R., Gray, M., Weston, R., Moloney, L., Hand, K., Qu, L., & The Family Law Evaluation Team. (2009). *Evaluation of the 2006 family law reforms: Summary report*. Melbourne, Australia: Australian Institute of Family Studies.
- Kenny, M. (2016, January 30). Majority of MPs would back marriage equality. *Sydney Morning Herald*. Retrieved from <http://www.smh.com.au/federal-politics/political-news/majority-of-mps-would-back-marriage-equality-20160129-gmgraw.html>
- Landy, S. (2014, September 17). Baby Gammy "offered to other couple who did not take him." *Herald Sun*. Retrieved from <http://www.heraldsun.com.au/news/baby-gammy-offered-to-other-couple-who-did-not-take-him/story-fni0fiyv-1227062042381>
- Layder, D. (1997). *Modern social theory: Key debates and new directions*. London, UK: UCL Press.
- Layder, D. (1998). *Sociological practice: Linking theory and social research*. Thousand Oaks, CA: Sage.
- Leonard, W., Pitts, M., Mitchell, A., Lyons, A., Smith, A., Patel, S., . . . Barrett, A. (2012). *Private lives 2: The second national survey of the health and wellbeing of GLBT Australians*. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University.
- Lindsay, J., Perlesz, A., Brown, R., McNair, R., de Vaus, D., & Pitts, M. (2006). Stigma or respect: Lesbian-parented families negotiating school settings. *Sociology*, 40(6), 1059-1077.
- Maiden, S. (2014, October 11). "Baby for visa deals" feared in new cash for surrogacy scandal in India. *The Daily Telegraph*. Retrieved from <http://www.dailytelegraph.com.au/news/nsw/baby-for-visa-deals-feared-in-new-cash-for-surrogacy-scandal-in-india/story-fni0cx12-1227087543805?nk=b2aec4b4342a3d21dd724c390ab5f863>
- Mars, M., Morris, S., & Marchesiello, B. (2014). *Champions of inclusion: A guide to creating LGBTI inclusive organisations*. Sydney, Australia: National LGBTI Health Alliance.

- McNair, R., Brown, R., Perlesz, A., Lindsay, J., de Vaus, D., & Pitts, M. (2008). Lesbian parents negotiating the health care system in Australia. *Health Care for Women International*, 29(2), 91-114.
- McNair, R., Dempsey, D., Wise, S., & Perlesz, A. (2002). Lesbian parenting: Issues, strengths and challenges. *Family Matters*, 63, 40-49.
- Mercier, L. R., & Harold, R. D. (2003). At the interface: Lesbian-parent families and their children's schools. *Children and Schools*, 25(1), 35-47.
- Montero, D. (2014). Attitudes toward same-gender adoption and parenting: An analysis of surveys from 16 countries. *Advances in Social Work*, 15(2), 444-459.
- News Corp Australia Network. (2014, 9 October). Indian surrogacy saga: Australian couple abandons baby in India. News.Com.Au. Retrieved from <http://www.news.com.au/world/indian-surrogacy-saga-australian-couple-abandons-baby-in-india/story-fndir2ev-1227084223406>
- O'Donnell, M., & Taylor, B. (2014). *Working therapeutically with LGBTI clients: A practice wisdom resource*. Sydney, Australia: National LGBTI Health Alliance.
- Peatling, S. (2014, October 10). Overseas commercial surrogacy: What price are we prepared to pay to allow it to continue? *The Sydney Morning Herald*. Retrieved from <http://www.smh.com.au/federal-politics/political-opinion/overseas-commercial-surrogacy-what-price-are-we-prepared-to-pay-to-allow-it-to-continue-20141010-11469d.html>
- Peterson, C. (2013). The lies that bind: Heteronormative constructions of "family" in social work discourse. *Journal of Gay and Lesbian Social Services*, 25(4), 486-508.
- Pitts, M., Smith, A., Mitchell, A., & Patel, S. (2006). *Private lives: A report on the health and wellbeing of GLBTI Australians*. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University.
- Quinn, K. (2016, August 31). *Married at first sight*: Gay couple stung by attacks. *The Sydney Morning Herald*. Retrieved from <http://www.smh.com.au/entertainment/tv-and-radio/married-at-first-sight-gay-couple-sad-about-attacks-20160831-gr55dc.html>
- Rainbow Families Council. (2010). *Rainbow families and the law: An information kit for same-sex couples and single people in Victoria*. Preston, Australia: Rainbow Families Council.
- Relationships Australia. (2006). *Annual report 2006*. Canberra, Australia: Relationships Australia..

- Rich, A. (1980). Compulsory heterosexuality and lesbian existence. *Signs: Journal of Women in Culture and Society*, 5(4), 631-660.
- Seidman, S. (2009). Critique of compulsory heterosexuality. *Sexuality Research and Social Policy*, 6(1), 18-28.
- Smith, E., Jones, T., Ward, R., Dixon, J., Mitchell, A., & Hillier, L. (2014). *From blues to rainbows: The mental health and well-being of gender diverse and transgender young people in Australia*. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University.
- Tuazon-McCheyne, J. (2010). Two dads: Gay male parenting and its politicisation—A cooperative inquiry action research study. *Australian and New Zealand Journal of Family Therapy*, 31(4), 311-323.
- Turteltaub, G. L. (2002). *The effects of long-term primary relationship dissolution on the children of lesbian parents* (Unpublished doctoral dissertation). Alliant International University, San Francisco, CA.
- van Eeden-Moorefield, B., Martell, C. R., Williams, M., & Preston, M. (2011). Same-sex relationships and dissolution: The connection between heteronormativity and homonormativity. *Family Relations*, 60(5), 562-571.
- Van Gramberg, B. (2006, December). The case for adaptive theory for investigating meaning in the workplace. Paper presented at the 19th conference of the Australian and New Zealand Academy of Management, Rockhampton, Australia.
- von Doussa, H., Power, J., McNair, R., Brown, R., Schofield, M., Perlesz, A., . . . Bickerdike, A. (2015). Building healthcare workers' confidence to work with same-sex parented families. *Health Promotion International*, 31(2), 459-469.