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## **LGBT+ Parenting**

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**'It is what happens within families, not the way families are composed, that seems to matter most' (Golombok 2000, p101).**

### **Introduction**

The last few decades have seen unprecedented legal changes in support of lesbian and gay equality in many western nations across the world, including the United Kingdom, many countries in Europe, New Zealand, Australia, USA and Canada. These legal changes include equalising the age of consent for sexual relationships, equal rights in civil partnerships, marriage and equal access to public goods and services. Many more lesbians, gay men, bisexual, queer and trans/non-binary (LGBT+) persons are now choosing to have families of their own (Mezey, 2015). Some individuals will have birth children, some will use a range of co-parenting arrangements, and others will have their families via adoption. However, societal discourses about families remain entrenched within a heteronormative cisgendered framework and there is a danger that the diversity of how lesbians, gay men, trans and non-binary people create 'family' and family structures will not value the complex family forms and structures that they form in their lives. Chambers (2007) states that the concept of heteronormativity, '*reveals institutional, cultural and legal norms that reify and entrench that normativity of heterosexuality. In other words, 'heteronormativity' tells us that heterosexual desire and identity are not merely assumed, they are expected.*' (Chambers, 2007, p. 664-65).

Depending on where in the world people live, LGBT+ parenting can take place openly, whilst for some, it will be a largely hidden activity; the legal framework in each country is different and will influence social views and attitudes toward LGBT+ parents. There are still over 70 countries in the world where homosexuality is illegal and some where the death penalty exists (see: [humandignitytrust.org](http://humandignitytrust.org)). The numbers of countries where LGBT+ partnerships enjoy the same legal status as heterosexual marriage is small in comparison with those where homosexuality is illegal. It is important to acknowledge that raising children within a country where such limits are placed on an individual's sexuality and family life is incredibly challenging. However, this chapter is not able to investigate those difficulties. Instead, it will focus on reviewing research into LGBT+ families within predominantly western nations where more liberal rules and legal frameworks exist. This does not mean that homophobia and heterosexism do not exist within these societies – they do. The chapter will therefore provide an overview of the ways in which lesbians, gay men, trans and non-binary people are having children and creating families. The first part of the chapter will discuss LGBT+ family-forming/creation that has occurred largely outside of the influence of the state. The second part of the chapter will look more closely at LGBT+ fostering and adoption practices – this is a route to parenthood that involves the state entering the homes and lives of those LGBT+ citizens who put themselves forward for assessment. These will almost always be undertaken by a social worker. As well as presenting data about various studies that have evaluated the outcomes for children, fostered and adopted by lesbians and gay men, the chapter will also critically examine the way in which social workers are consciously/unconsciously influenced by heteronormative expectations of what it means to be a family when assessing LGBT+ people as adopters and foster carers.

### **Legal and social policy overview**

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Marked social changes for lesbian and gay parents over the past 40 years have enabled many more LGBT+ persons to choose to have families of their own, some by birth, or by co-parenting arrangements and others by adoption. Many of the legal changes have meant that LGBT+ families are now viewed in law as equal to heterosexual families, but this hasn't always been the case. In the United Kingdom, there are a small number of publications (Hanscombe & Forster, 1982; Richardson, 1981; Rights of Women Lesbian Custody Group, 1986) that offer historical insights into the experiences of lesbian parents in the 1970s and 1980s. Many of the lesbians that these authors spoke to had conceived children within marriages to men that had then ended, and these women had then experienced custody battles. The negativity of the courts towards lesbians at that time, meant that the majority of women facing such custody battles lost custody of their children, because of their sexuality. This was in marked contrast to how the courts at that time treated heterosexual women, where custody arrangements for children almost always favoured mothers.

It wasn't until the 1980s that social science researchers began investigating the outcomes for children who were raised by lesbian parents. The work of two psychologists deserve particular mention. In the United Kingdom, the work of Susan Golombok was important in showing that the children of lesbians were just as likely as children growing up in heterosexual families to have good mental health, to have positive relationships with peers and to have good relationships with both male and female adults. Golombok's work has compared the psychological, sexual, educational and social outcomes of children raised by lesbians, compared with children raised by single heterosexual mothers (Golombok, 2000; Golombok et al., 2003; Golombok, Spencer, & Rutter, 1983; Golombok & Tasker, 1996).

In the USA, Charlotte Patterson's work in the early 1990s also challenged the prevailing beliefs at the time concerning the impact on children's psychosocial development of having two parents who were lesbians or gay men. Her research, which also compared data between same sex and opposite sex parented households, also showed that these fears were unfounded. As with Golombok in the UK, Patterson's research has influenced the behaviours of the Courts in child custody cases in the USA and impacted on social and legal discourses around LGBT+ families (Frame, 2017; Patterson, 1992).

Shortly before this, in 1988 the UK government passed legislation that forbade schools from promoting homosexuality, describing it as 'a pretended family relationship' (Section 28 of the Local Government Act England & Wales, 1988). This had an impact on lesbian and gay families through the 1990s; in this environment, lesbians and gay men choosing to create families made personal decisions that had political implications. Section 28 remained law until 2003, when it was removed from statute books. In 2003 the Adoption and Children Act was passed, which allowed lesbian and gay couples to jointly adopt for the first time, although it wasn't enacted until December 2005. Hitherto only one person in a same sex partnership could adopt a child – local authority and the courts viewed lesbian and gay couple applications as single person adoption applications. The other partner had to apply for a joint Residence Order (section 8 of the Children Act 1989), to be given 'Parental Responsibility' (section 3 of the Children Act 1989), which lasted until the adopted child turned 18. This legislation marked a change in public policy by acknowledging the existence of same sex families. From this point forward, additional legislation regarding Civil Partnerships (2004) and Same Sex Marriage (2013) has enabled further equality between the relationship status of same sex couples and heterosexual couples in England, Scotland and Wales and Civil partnerships in Northern Ireland. It is only since January 2020 that Northern Ireland has allowed same sex marriage.

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The legal situation in the USA is complex because of the federal and state legislative structures. However, various Supreme Court rulings between 2015-20 have made adoption by same-sex couples legal in all 50 states. Hitherto adoption laws varied widely by state; some granted adoption rights to same-sex couples, others banned adoption entirely for lesbians and gay men, or only allowed the partner in a same-sex relationship to adopt the biological child of the other partner. Mississippi was the last state to change its law in 2016, to allow same-sex couples to adopt. In 2015, the Supreme Court overturned all bans on same-sex marriage in the United States. In 2017, the Supreme Court ordered all states to treat same-sex couples equally to opposite-sex couples in the issuance of birth certificates.

### **LGBT+ persons creating families of choice**

Many of these social and legal changes have impacted on the ways in which lesbians and gay men choose to live their lives. For many older lesbians and gay men who did not have heterosexual relationships and had not had biological children, the idea of having a biological child or raising an adopted child as part of their family was not something they generally considered possible. In the 1980s a number of lesbians began self-inseminating, often approaching gay men to act as sperm donors for them, and this led to the first wave of children being born into lesbian families. Despite the heteronormative hegemony of clause 28 in the UK, lesbians in the UK and USA were creating alternative families. Various self-help manuals were written at the time in both places (e.g. Pies, 1985; Saffron, 1986, 1994), and the lesbian and gay parenting handbooks followed (e.g. Martin, 1993).

As the numbers of children growing up in (predominantly) lesbian families increased throughout the 1980s and 1990s, the expectations of lesbians and gay men themselves also began to change, with many more people beginning to see parenting as something that was a realistic aim.

*It used to be that whenever you came out, your mother would give you a hug, say she loved you, and offer a sad aside to her friends that she would never have grandchildren. That's not the case anymore. When I was a kid realising I was gay in the 1980s, it never occurred to me that I would grow up to create a family of my own; it was a bleak and alienating thought. But in the 1990s, when I saw so many gay people doing just that, I felt like I had the option to be part of the great human slipstream of procreation. (Hari, 2009, para. 6)*

The difference in the lesbian and gay community was of course that the effort that went in to planning to have children meant that a lot of discussion about parenting took place long before a child was born into a family – these children were desperately wanted.

*This is all part of a slow shift that is transforming gay culture. During the twentieth century, our battle was to find a place of our own where we could be safely different, and recover some shreds of self-esteem. After millennia of being told our difference was a sickness, we needed a moment to celebrate that difference. But after that was achieved, our goal changed. We started to realise - once we had the space - that we are actually very similar to our straight siblings. We have the same desire for stability and home-building as everyone else. (Hari, 2009, para. 4)*

At the same time, some alternative perspectives expressed within the lesbian and gay community were more critical; lesbians and gay men choosing to become parents were seen as endorsing

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assimilationist practices and embracing heteronormativity in order to achieve acceptability. The concern was that this potentially damaged decades of debate and discussion about the validity of alternative family structures and forms within LGBT communities that did not privilege biology and stood outside of state control and scrutiny. In the mid-1990s, Allen and Demo's view (1995) was that lesbian and gay parents should no longer be viewed as part of a "new frontier" in family research, rather other critique and advancements in family theory were necessary to better account for sexual diversity within families, that went beyond basic descriptive accounts of parents sexual orientation (Allen & Demo, 1995; Berkowitz, 2009). Before continuing to explore this critique, we want to point out some of the differences in the academic literature about gay men and parenting, and trans people and parenting, as it has a different history than lesbian parenting.

Most of the early studies in the 1980s focussed on lesbian parents. The research literature about gay men's parenting and outcomes for their children began 10–15 years later (e.g. (Bailey, Bobrow, Wolfe, & Mikach, 1995; Barrett & Tasker, 2002; Patterson, 2004). In terms of the outcomes for the children parented by gay men, the results are broadly similar to lesbian mothers, with children raised by gay men exhibiting no more psychological differences than their heterosexual counterparts. Indeed, some studies suggest that children of gay fathers may have better outcomes than those of heterosexual parents in some psychological domains; less gender-stereotyped and less internalizing and externalizing behaviours (Goldberg, 2010; Golombok et al., 2014; Miller, Kors, & Macfie, 2017). However, in their review of 63 studies about gay parenting from 1979 to 2016, (Carneiro, Tasker, Salinas-Quiroz, Leal, & Costa, 2017) found that the literature about gay parenting presents it as more diverse than lesbian parents. They suggest that this is due to the way in which gay men become parents; via co-parenting, adoption, fostering, or surrogacy. In addition, social attitudes play a role in this process. Whilst both lesbians and gay men defy traditional gender roles, gay men have experienced different types of homophobia than lesbians in their bid to become parents, particularly around 'paedophile' narratives observed in many political discourses associated with legal changes (see Hansard transcripts from debates in the Houses of Parliament in the UK around lowering the age of consent for gay men to 16 in 2003 and debates around adoption law reform in 2002). Negative stereotyping in relation to HIV has also affected gay men who are HIV positive when thinking about their options for becoming parents, as well as the advice they receive about parenting (Barber et al., 2019).

Significant medical advances mean that it is now possible for those on antiretroviral medication to have undetectable levels of HIV in their blood, meaning they cannot transmit HIV via sexual fluids. This is described as Undetectable = Untransmissible, or U=U. However, although this has transformed the opportunities people living with HIV (PLWH) have to become birth or adopted parents, stigma still exists around PLWH wanting to have children, with parental gender, relationship status and financial resources affecting available options. Single women, single men, couples in same sex relationships and trans people are subject to different legal options, depending on how they choose to have children - whether they use a clinic to become pregnant, use a surrogate to carry a child, or donate eggs to their partner to carry a child. Barber et al., (2019) have offered a more comprehensive overview of the options for PLWH in the UK, including fostering and adoption.

The empirical evidence about parenting with people with diverse gender identities is limited (T Hafford-Letchfield et al., 2019). It is an under-researched area. Many studies use the term LGBT to describe non-heterosexual parenting, but do not specifically address 'T'. Studies exploring issues for non-binary parents are uncommon (Tornello, Riskind, & Babić, 2019). In their systematic literature review comprising 26 studies of trans/non-binary (TNB) parenting between 1990 and 2017, Hafford-

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Letchfield et al., (2019) found that whilst lesbian and gay families are viewed as having pioneered new family forms, there is evidence from the literature to show that TNB experiences of parenting are distinct from wider lesbian, gay and bisexual (LGB) experiences. 'Transition' is a process, not an event and is different for each trans-person. These experiences, including the external and internal contexts within which people's lives are situated, will affect their parenting relationships with their children (Veldorale-Griffin, 2014). Whether they became a parent before or after beginning their transition is also an important factor. Hafford-Letchfield et al.'s (2019) findings showed that trans people are as invested and committed to their families as any other persons, but there is a fear about how being trans might affect family relationships, particularly where coming out as trans after becoming a parent. There are differences between trans-women and trans-men's journey to parenting: trans-women are more likely to become parents before their gender transition at younger ages and with lower socioeconomic status. Trans-men and gender non-binary people are more likely to become parents after gender transition (Tornello et al., 2019).

For non-binary people, the psychosocial challenges they faced were considerable in terms of having their gender acknowledged and respected within their social and cultural parenting community environments (Tasker and Gato, 2020). Most TNB persons become parents through biological means, with few becoming parents through adoption or foster care (Tornello et al., 2019). This is because TNB persons have reservations about whether their application would be favourably received or is likely to be successful (Tasker & Gato, 2020). Even though lesbian and gay adoption and fostering is now much more commonplace, it is an unexplored area of social work practice for TNB people (Brown & Rogers, 2020).

Services for prospective TNB parents have been the subject of more recent research (Pearce & White, 2019; White, 2018) given that service providers for prospective TNB parents are poorly equipped regarding their reproductive needs and the barriers to them achieving biological parenthood, particularly alongside perceived incongruities with gender identity during pregnancy (De Sutter, Kiira, Verschor, & Hotimsky, 2002). Riggs, Power, and von Doussa (2016) research has revealed the positive correlation between being given positive support from the wider family to the TNB people expressing and fulfilling their ambition of having their own family in the future and transgressing internalised transphobia in relation to these parenting desires.

The other group of people whose needs and experiences are not often discussed in the literature are parents who are bisexual. Although they are located within both heteronormative and same-sex partnerships and family arrangements, the ways in which their bisexuality informs these can present challenges for people in maintaining a sexual identity that is often marginalised within society and presented negatively (Hayfield, Clarke, & Halliwell, 2014). Engaging in relationships that acknowledge people's bisexuality and sexual identity challenges societal expectations of sexual attraction, partnerships and family-making, with people feeling that they do not belong in either a lesbian/gay or heterosexual world (Tasker & Delvoye, 2018). This unhelpful positioning ignores the potential for creating family forms that are not based solely on biology in family relationships but can also include family members who are there from choice (Tasker and Delvoye, 2018).

### **Adoption and fostering**

Having a family through fostering or adoption is now possible for many LGBT+ individuals and couples. Applicants who are single or in a same-sex relationship are encouraged to apply by many local authorities and voluntary sector agencies in the UK and the US. However, it is important to

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remember that no one has the 'right' to become an adopter or a foster carer, but in the UK, people who are LGBT+ can approach adoption agencies to ask for an assessment. Agencies assess applicants to ensure that all adopters and foster carers have the necessary qualities and experiences to care for children who have had traumatic and abusive experiences. The challenges that many LGBT+ applicants have handled successfully in their own lives may well be regarded as assets in the assessment process. In addition, many LGBT+ applicants are approaching adoption as their first choice for creating a family and they are often open to adopting children who are older and of different ethnic and racial backgrounds in comparison to heterosexual adopters (Mellish et al., 2013).

In both the UK and the US the assessment process is rigorous. It includes a home study report undertaken by a social worker, and an assessment of health (including mental health). This is undertaken to ensure that applicants have a reasonable expectation of continuing good health and, in the case of adoption, the ability to support a child until adulthood.

The research evidence concerning the experiences of lesbians and gay men of adoption in the UK is small but has developed over the past 20 years (Cocker, 2011; Costa & Tasker, 2018; Golombok et al., 2014; Golombok & Tasker, 1996; Hicks, 2000, 2005; Hicks & McDermott, 2018; Mellish, Jennings, Tasker, Lamb, & Golombok, 2013; Skeates & Jabri, 1988; Wood, 2016). The reported experiences of LGBTQ+ individual and couples approaching fostering and adoption agencies in the UK now, is much more positive than in the past, with LGBTQ people expecting to be treated fairly and their application being assessed on its merits (Costa and Tasker, 2018). Much more is known about LGBT+ adopters experiences in the USA. Studies in the U.S.A. report on adopters satisfaction with their adoption experiences (Ryan & Whitlock, 2009). Importantly, the sexual orientation or gender of the adopter is not seen as a significant factor for children achieving positive outcomes (Erich, Hall, Kanenberg, & Case, 2009), and outcomes for older children placed with lesbian or gay adopters are positive (Erich, 2005; Leung, Erich, & Kanenberg, 2005), which supports the UK data concerning LGBT+ adopters being open to adopting older children (Mellish et al., 2013). Lesbian and gay families have supportive networks and they enjoy good levels of support from them (Erich, 2005; Kindle & Erich, 2005).

In the UK there are a few studies, using a comparative method, that are also now able to comment on the strengths of adoptions with lesbian and gay carers compared with heterosexual adopters (Mellish et al., 2013). For lesbians and gay men, adoption is much more likely to be a first-choice option and is not a decision made solely because of infertility. In addition, lesbians and gay men are highly motivated parents and are more actively involved in the lives of their adopted children than heterosexual parents. This literature is particularly positive about the contribution of gay men as parents, where motivation is high. The research team who undertook this study (Mellish et al., 2013) have moved on to examine the experiences of trans and/or non-binary parents. They are based at the Centre for Family Research at the University of Cambridge, along with Susan Golombok, who is the Director of the Centre.

These reductionist methodologies have their place as a starting point, to answer critics concerns about the possible effects on children of having lesbian, gay or TNB parents. They have shown that there are relatively few differences in outcomes for the children born to and adopted by lesbian and gay families compared with heterosexual families (Cocker, 2015). For TNB applicants, there is now a developing interest in understanding how assessments might need to sensitively and appropriately address any specific issues about gender that should be discussed in an adoption or fostering

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assessment, without asking unnecessary or intrusive questions that are simply not relevant (Brown & Rogers, 2020; Brown, Sebba, & Luke, 2015). Hafford-Letchfield, Cocker, Manning, and McCormack (2020) suggest that,

*'people with TNB identities may be best conceptualized within an intersectional framework, which explores how multiple axes of identity or social location interact to influence peoples' experiences, perceptions, and enactments of self in different contexts'* (p. 211).

In their review of the literature, Hafford-Letchfield et al., (2020) found that parents and carers identifying as TNB were highly excluded from mainstream as well as same sex-specific parenting resources. How prospective foster carers and adopters access parenting resources is something to be considered by social workers when assessing TNB people as foster carers and adopters, and that includes resources available within their own agencies. Tasker and Gato (2020) report that TNB individuals say that *'Feeling that who I am doesn't fit into the cisgender system of accessing fostering, adoption or fertility services'*. The onus is on the adoption agency to ensure that their services are TNB 'friendly', which includes social workers having an understanding and appreciation of trans identities and gender diversities, and being able to recognise the positive contribution that TNB foster carers, adopters and their families can make to the lives of looked after children.

### **LGBT+ parenting: Critical perspectives**

Despite the interest by many local authorities and adoption agencies in the UK and USA in assessing lesbians, gay men, trans and non-binary individuals as prospective adopters, heteronormativity and cisnormativity are established discourses within social work in terms of the kinds of families being approved by social workers (Brown & Rogers, 2020; Hicks, 2011). Why is it that within adoption, the lesbians, gay men and other kinds of families that do make 'the grade' are more likely to be those families that emulate heteronormative and gendernormative structures and patterns of behaviour?

The developing body of literature on lesbian and gay parenting has mainly adopted a social constructionist position to challenge heteronormative parenting. Social constructionism sees knowledge and meaning as socially created and located within particular historical and cultural contexts (Hafford-Letchfield et al, 2020). Therefore meaning is not fixed, rather it is constructed using dominant discourses. Using a social constructionist position has provided a lens through which research evidence on outcomes for children, familial, and social relationships can be critiqued (Hicks, 2011) and the quality of parenting in families of choice can be understood and positively valued (Hicks, 2011; Hicks & McDermott, 2018). However, in contrast to this, research on TNB parenting remains uncommon (Hines, 2007), which further reinforces the gendernormative practices within the adoption and fostering field generally (Brown and Rogers, 2020) and this continues to emphasise the invisibility of gendered experiences (Lane & Seelman, 2018; Siverskog, 2014).

Walls, Kattari, & DeChants, 2018; Walls, Kattari, Speer, & Kinney (2019) have also stressed the importance of taking an intersectional understanding of parents who identify as TNB due to the discrimination and disadvantage they may experience as parents. This highlights the need for intersectional cultural responsiveness training for social workers, along with the need to consider how family interventions and policy advocacy work can address TNB issues. Research on TNB parenting has tended to consist of small qualitative samples; when large samples have been examined, they have rarely explored differences based on gender identity within the community or

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on intersections with other demographic characteristics such as race and ethnicity or disability. Their work on secondary data analysis using a convenience sample from a large national dataset has found significant differences in likelihood of being a parent. Those within the transmasculine community are more likely to be parents than those within the transfeminine spectrum community, with ethnicity, age, relationship status, income, educational status, and disability also playing a part. (Walls et al., 2018; Walls et al., 2019). . Their findings across these range of indicators provide a foundation for future research to help social workers understand the community and our role in providing culturally responsive services and call for social workers to be prepared to offer culturally responsive and trans-inclusive practice that understands transfeminine and transmasculine individuals may have experiences as parents. These include looking at trauma from not being allowed to maintain relationships with their children or having had their children cease communication with them and building an evidence base for responding to these nuances in both macro and micro intersectional issues that need good understanding in order to continue to support the TNB parenting community.

Criticisms also exist within the LGBT+ communities about some of the legal changes that have occurred, in particular around civil partnerships and same-sex marriage, but also concerning the rise in the numbers of LGBT+ people becoming parents, including via adoptions. These are seen as steps towards assimilation and acceptability. Spade and Willse (2013) argue that marriage does nothing for the status of the majority of lesbians and gay men and is instead a tool of gendered social control, material distribution and protection of material wealth. The danger of marriage equality is that it creates a barrier between LGBT+ partnerships and family forms, with some being seen as more legitimate as they are 'state sanctioned', and those lesbians and gay men who choose to live their lives outside of this legal structure do not have their families and roles valued in the same way (Cocker 2015). How these preferred family structures privilege fostering and adoption assessments was explored in an earlier study by Hicks (2000), who found that assessing social workers were much more likely to approve lesbians who they did not assess as 'man-hating' or 'militant' – rather lesbians needed to present as a 'pedestal of virtue', emulating heteronormative choices around family relationships, such as being in a committed monogamous relationship. Hicks (2000) showed that these powerful discourses rely upon a continued 'othering' of specific categories such as 'lesbian' or 'gay'. But this also applies to how TNB people are viewed, with any assessment being affected by this 'othering' of people who live their lives outside many of the social constructs that govern the way society understands family life and family relationships. The effect that this can and does have on LGBT+ people is devastating; they are over represented in mental health services, and report homophobic and transphobic experiences in schools and work environments, which include social services, the National Health Service (NHS), prisons and probation services, and the police (Government Equalities Office, 2016).

What we do know is that there is quite a lot of work to be done to ensure the adequacy and consistency of child and family social work education about sexual and gender identities (Hudson-Sharp, 2018) so as to significantly improve the experiences of TNB individuals and families within social work and social care settings. In the UK, significant reports (Alleyn & Jones, 2010; Government Equalities Office, 2016) have revealed substantial areas of discrimination and poor provision in social care. These have picked up on inadequate preparation of the workforce to work positively with families with TNB members and in developing the structures and process that enable the workforce to network and tune into the needs of the community both nationally and at a local level. As with lesbian and gay parenting in more recent times, there is a tendency towards a deficit

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approach which contradicts some of the evidence (Hafford-Letchfield et al, 2019). This is undermined by a lack of resources and collaboration with the community to establish trust and communication of their needs necessary to develop more responsive services (Hafford-Letchfield et al., 2020).

Social workers and their managers and educators will need to be more proactive in providing training and opportunities for practice and workforce development in these areas. It is the profession itself which needs to take responsibility for making itself aware of the debates on gender diversity, and have a nuanced understanding of LGBTQ+ oppression as part of their practice. There are debates in the literature as to whether existing practice frameworks should be flexible enough to adapt to people's individuality, and incorporate differences in a reflexive manner rather than as an 'add on' (Cocker & Brown, 2010). There are occasions where certain types of assessments do need to cover different areas, because some experiences are particular to the lives of LGBT+ individuals, such as coming out, homophobia and transphobia. There are a number of practice manuals to guide workers through a number of these complexities (Brown, Andrew, & Adams, 2018; Hill, 2009; Mallon, 2005). Cocker and Brown (2010) developed the SPRIINT model to assess sexuality in relationships in its broadest sense. SPRIINT is an acronym that stands for: **S**exual orientation; **P**revious sexual relationship histories; **R**elationships (current); **I**ntimacy (the expression of this with each other); **I**ntegration into the community; **N**ot so nice bits, which involves the assessor exploring the long-term nature of relationships; coping with difficulties, stress, disagreements, etc; **T**hinking: about the patterns and the gaps within the stories being told. This model is flexible enough to apply to all applicants, regardless of sexual orientation and gender expression. Having a nuanced and ethical understanding of the associations between the different factors impacting on different parents and carers, and understanding their experiences can help professionals and support staff to work more effectively and in serving LGBT+ parents, prospective parents and their families. The model requires practitioners to analyse the content of what applicants discuss with them to enable a synthesis of the material, thereby reaching an informed, reflexive assessment (Cocker and Brown, 2010). This is an example of how an assessment process can explore areas relevant to parenting in all families.

### **Implications for Policy, Practice, and Research**

This chapter has presented an overview of LGBT+ parenting. Although there are now many ways in which LGBT+ family-forming occurs in private spaces away from the scrutiny of the state, homophobia and transphobia remain part of the social landscape for LGBT+ families. Progress in policy and practice has redressed this to a certain extent, however they are still significant problems for LGBT+ families.

One issue for policy and practice is where the state or other institutions have a role in assessing LGBT+ families, for example in fostering and adoption practices, it is essential that social workers remain mindful of the impact of homophobia and transphobia on themselves and on the lives of the individuals and families they work with. This has implications for the training and development of social workers as well as for the social work agencies in which they work. Brown et al., (2015) maintain that this responsibility also exists in an historical as well as current context. Social work practice must be robust and nuanced enough to be able to recognise and counteract these oppressions, including being able to critically examine the way in which social workers are

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consciously/unconsciously influenced by heteronormative expectations of what it means to be a family.

LGBT+ people will continue to create families that meet their needs and in so doing, their families will continue to evolve and change. One issue for research is encouraging a programme that explores this diversity of experiences in such a way to capture the uniqueness of the LGBT+ contribution to child welfare practices at the same time as celebrating the ordinariness of LGBT+ family lives. Additionally, although much of the recent parenting research that refers to gender and sexual minorities uses the acronym LGBT+, limited attention has been given to the 'T' and '+'. Far less is known about the experiences of TNB parents, including their experiences as foster carers and adopters. There are differences in experiences for lesbian and gay parents, and TNB parents, but we do not know how fostering and adoption agencies take these into account in their prospective adoption and fostering assessments.

One issue for practice is whether social workers views and expectations about who and what makes a family can shift so that they do not just concentrate on the structure and form of the families who they work with, but understand the dynamics of relationships within each family, and identify the many strengths that LGBT+ families offer. Moving beyond a heteronormative frame of reference is a challenge for practice, but to not do this limits our own vision of what is possible, and says much more about the social work profession than it does about LGBT+ families.

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