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Public and Private Families: A Comparative Thematic Analysis of the Intersections of Social Norms and Scrutiny

Abstract

Despite the increased diversification of Australian families, the nuclear family formed through reproductive heterosex continues to be treated as the norm. This paper argues that this norm impacts negatively upon families formed in other ways, by exposing them to increased scrutiny. Drawing on interviews with 60 participants from four cohorts (families formed through reproductive heterosex, intercountry adoption, long-term foster care, or surrogacy), a comparative thematic analysis is presented in which two key themes are elaborated: 1) the impact of government policies and practices, and 2) the degree to which families are treated as public property. Findings suggest that families formed through reproductive heterosex were the least regulated and scrutinised; families formed through either adoption or surrogacy received a considerable degree of regulation and scrutiny; and foster families were the most scrutinised and negatively impacted by government policies. The paper concludes by considering what is required to engender more inclusive and supportive responses to all families.

Keywords: Family formation, comparative analysis, public and private, social norms, scrutiny, wellbeing

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Introduction

When comparing outcomes for families differentiated by mode of family formation, research suggests that there are more similarities than differences (e.g., Ceballo, Lansford, Abbey & Stewart, 2004; Golombok et al., 2011; Shelton et al., 2009). Such research suggests that it is family practices, rather than structure or mode of formation, which determines family wellbeing. Yet despite similarities across families, it remains the case that families are differentially affected by social norms (Weigel, 2008), specifically with regard to the comparison of all families against a particular family form that is treated as the norm (i.e., the nuclear family formed through reproductive heterosex). Furthermore, it has been argued that social norms impact upon the degree to which particular families are open to public scrutiny (Fox, 1999)

In order to examine how social norms circulate with regard to differing modes of family formation, and the degree of scrutiny this engenders, the present paper reports on a comparative thematic analysis of interviews undertaken with four family cohorts differentiated by mode of family formation (reproductive heterosex, intercountry adoption, long-term foster care, and offshore commercial surrogacy). Drawing on the theoretical framework of critical kinship studies, the analysis highlights both similarities and differences in terms of how social norms appear to shape the experiences of each cohort. In order to provide some context for the findings, the paper begins by briefly outlining previous research on differences between the four modes of family formation in terms of public perceptions of, support for, and attitudes towards each family form. The findings offer insights that may inform the development of policies and practice that are better able to support all families through and following family formation.
Perceptions of Diverse Modes of Family Formation

In this first section we provide a brief overview with regard to each of the modes of family formation under examination in this paper, focusing on currently available Australian statistics, along with Australian research that has documented how each mode of family formation is viewed by the general public. Whilst public attitudes are certainly not the only way of identifying social norms as they pertain to differing modes of family formation, it is arguably the case that such attitudes encapsulate something of the institutional norms that inform them (i.e., governmental regulations that either normalize or marginalize particular families), as well as reflecting how differing modes of family formation are represented to the general public (i.e., in media reporting).

Reproductive Heterosex

The total fertility rate in Australia has decreased substantially since the 1960s, with a peak of 3.5 children per woman in 1961, to the current rate of 1.88 per woman in 2013 (Australian Bureau of Statistics, 2014). Yet whilst the fertility rate has dropped, the number of babies born in Australia has increased over the past 40 years due to population growth, from approximately 175,000 births per year during the 1970s to approximately 308,000 births per year in 2013 (Australian Bureau of Statistics, 2014). Only a small percentage of these births are a result of Assisted Reproductive Technology (ART), with the most recent figures indicating that only 3.8% of women who gave birth in 2011 used ART (Li, Zeki, Hilder, & Sullivan, 2013). As such, it is realistic to state that Australian figures on births primarily document children born as a product of reproductive heterosex.
It is important to note, however, that fertility rates and total birth rates do not capture pregnancy loss, and thus only tell one part of the story of reproductive heterosex as a mode of family formation. Internationally, it has been estimated that 15-20% of all known pregnancies end in miscarriage, with most occurring before the 7th week of pregnancy (Storck, 2012; X. Wang et al., 2003). In Australia, the Australian Institute of Health and Welfare reports that in 2011, 74 out of 1,000 births were stillbirths or fetal deaths, and 26 out of 1000 live births resulted in neonatal deaths (Li, et al., 2013). The continued cultural silence about pregnancy loss, it may be suggested, contributes to the view that reproductive heterosex is both straightforward and ‘natural’, when for many people this is not the case (Rowlands & Lee, 2010).

Finally, it is important to note that there is no existing research documenting attitudes towards reproductive heterosex alone. There are, however, comparative studies that have examined public attitudes towards, for example, divorced or stepfamilies as compared to heterosexual nuclear families. Such studies have consistently indicated that the latter are described in more positive terms than the former, with negative descriptors rarely used with regard to heterosexual nuclear families (Valiquette-Tessier, Vandette & Gosselin, 2015).

**Surrogacy**

The numbers of children born through surrogacy within Australia has increased from 7 births in 2007 (Y. A. Wang, Chambers, Dieng, & Sullivan, 2009) to 19 in 2012 (Macaldowie, Wang, Chuhtai, & Chambers, 2014). These numbers remain relatively low, however, due to the fact that commercial surrogacy is illegal within Australia, and thus all surrogacy births within Australia occur as a result of altruistic surrogacy arrangements. By contrast, far higher
numbers of Australians engage in commercial surrogacy outside of Australia. Figures are limited given that births occurring outside of Australia are not registered in Australia, however Australian citizenship granted to babies born in India and the US (countries where many Australians have previously undertaken surrogacy) increased from 1,663 in 2008 to 1,975 in 2011, with many of these births likely the outcome of a commercial surrogacy arrangement (Department of Immigration and Citizenship, 2012).

Two recent surveys provide insight as to Australian public attitudes towards surrogacy. A survey of 1000 Australians undertaken by Dempsey and Critchley (2010) indicates that participants were highly supportive of heterosexual couples utilising surrogacy, however the sample was largely unsupportive of gay male couples utilising surrogacy. Similarly, a survey of 195 Australians undertaken by Constantinidis and Cook (2012) found that 80% of the sample were supportive of surrogacy, however the sample were less supportive of ‘traditional surrogacy’ (i.e., surrogacy arrangements in which the woman who acts as the surrogate uses her own ovum) when compared to gestational surrogacy (i.e., where donor eggs are utilised). Lacking from both surveys, however, was a distinction between commercial and altruistic surrogacy, which has received little recent attention in attitudinal studies both in Australia and internationally.

Adoption

Rates of adoption in Australia peaked in 1979-80, with 3,337 children adopted in that year alone (Australian Bureau of Statistics & WELSTAT, 1982). By 1999-2000 this number had dropped to 566 (Australian Institute of Health and Welfare, 2001), and numbers of adoptions were at an all time low in 2013-14, with only 317 completed adoptions (Australian Institute
of Health and Welfare, 2014). Of these, 114 were intercountry adoptions, 46 were domestic stranger adoptions, and the remainder were domestic ‘known’ adoptions (i.e., adoption by step-parents or other family members). This fall in adoption rates reflects a number of changes in Australia, including the increased availability of abortion, increased support for single mothers, decreased public support for adoption within Australia, and the decreased availability of children through intercountry adoption (Cuthbert, 2010).

In terms of public attitudes towards adoption, a recent survey of 1014 Australians (Adopt Change, 2015) suggests that only 17% of the sample had considered adoption, and of these 87% did not proceed to pursue an adoption. In terms of intercountry adoption specifically (through which our adoptive parent participants had formed their families), the survey documents the widely held perception that intercountry adoption involves high levels of bureaucracy that makes the adoption process slow, that children placed for adoption may have ‘abandonment issues’, and that intercountry adoption processes are open to corruption.

**Foster Care**

The number of children on care and protection orders in Australia continues to rise, increasing from 15,718 children at 30 June 1997 (Australian Institute of Health and Welfare, 1998) to 43,136 children at 30 June 2013 (Australian Institute of Health and Welfare, 2014b). Of all children in care in 2013, 83.81% were on long-term orders (Australian Institute of Health and Welfare, 2014b). Of those children on such orders, 38% were living with foster families (Australian Institute of Health and Welfare, 2014b). Whilst reunification with birth families is a principle guiding foster care in Australia, children on long-term orders and for whom reunification is not viable will typically live with a foster family until they are adults.
As such, foster care in Australia can be a permanent, rather than temporary, mode of family formation, though guardianship of children growing up in foster families remains with the state.

In terms of public attitudes to foster care, a survey of 1500 adults living in the Australian state of New South Wales conducted by Schwartzkoff, Rintoul, Grealy and Corrigall (2006) indicates a disjuncture between attitudes towards foster care and willingness to provide care. Whilst 93% of the sample felt that child protection was important, only 37% of participants felt that child protection should be a personal concern, and even less (22%) had considered becoming a foster carer. Whilst personal factors such as age were often cited as reasons not to foster, participants also indicated that they were discouraged from considering fostering due to the perception that children in care might have a negative impact upon their household.

Importantly, whilst approximately 38% of children on long-term orders live with foster families, over 40% of such children live with members of their extended birth families. To date, little research has explored attitudes towards such care arrangements (typically referred to as ‘kinship care’). McHugh (2013) suggests that child protection workers may hold somewhat negative views of kinship carers, due to perceptions about the complexities of such placements in terms of disengagement from child protection systems on the part of kinship carers. Whilst the attitudes of child protection workers don’t per se tell us anything about broader public attitudes, for the purposes of this paper (which includes a sample of foster, rather than kinship, carers) the information above must suffice.
Methods

Project

The data presented in this paper are drawn from a larger study examining similarities and differences between four cohorts of parents according to mode of family formation. The study specifically sought to examine the support needs of each cohort and their experiences of support from family members, the government, and the broader community. The research was approved by the ethics committee of the first author’s University.

Participants

Sixty interviews were undertaken, with 15 interviewees in each cohort of reproductive heterosex, offshore commercial surrogacy, intercountry adoption and long-term foster care. All of the participants identified as white and middle-class. The majority (n=45) of the participants were female, and the overall sample included both heterosexual (n=36) and lesbian or gay (n=24) participants. Most participants were members of a couple (n=54) with the remainder being single at the time of the interview. Participants came from across four Australian states.

Procedure

Participants were recruited through convenience and snowball sampling, drawing on the first author’s contacts with foster care and adoption agencies and the support group Surrogacy Australia, and through flyers placed in kindergartens and primary schools.
Interviews with families formed through foster care were conducted by the first author in person in South Australia and Victoria, and by telephone for participants in Queensland and New South Wales. Interviews with families formed through surrogacy living in New South Wales, South Australia and Victoria were conducted by the first author by telephone. Interviews with families formed through either reproductive heterosex or adoption were conducted in person by the third author in South Australia. Interviews lasted for between 45 and 90 minutes, and followed a semi-structured schedule that was uniform across cohorts. Sample interview questions pertinent to the present paper include “How do you feel that the broader community or society engages with your family?”, “How do you feel that the government impacts upon your family”, and “Are there any forms of support you wish you had as a parent/carers that you don’t have?” Interviews were transcribed by a professional transcription service. Pseudonyms were allocated at this point.

Theoretical Framework

Both the broader project and the specific analysis reported in this paper were informed by what has recently been referred to as ‘critical kinship studies’ (Kroløkke, Adrian, Myong & Tjørnhøj-Thomsen, 2015; Riggs & Peel, forthcoming). Critical kinship studies is critical in the sense that rather than taking the term ‘kinship’ as self-explanatory, it instead seeks to examine how particular family forms become the norm, how such norms are resistant to change, and how the inclusion of what are seen as ‘new’ family forms is typically predicated upon assimilation to existing norms. Critical kinship studies thus offers a practical approach to identifying social norms in relation to families, in addition to providing a theoretical context for understanding how such norms impact upon the wellbeing of all families.
Analytic Approach

The entire data set was read as a whole by the first and third author, looking for key themes that were evident across all four cohorts, yet which potentially took differing forms in each of the cohorts. The intent behind this analytic approach was to identify sample-level differences in a comparative sense. Two key themes were identified that met this criteria. The first of these pertained to the impact of government policies and practices upon the family. Responses identified as falling under this theme largely arose from a question specifically asking about government impact. The second theme pertained to the degree to which participants perceived their family as being treated as public property. Responses identified as falling under this theme arose both from a question that asked about community responses to the participant’s family, as well as from across a range of interview and probe questions that sought to explore what it meant to engage in a particular mode of family formation.

Importantly, whilst the themes identified largely mirror the interview questions, our interest in conducting the thematic analysis was to identify differences between the cohorts in any area. Given the fact that in regards to other interview questions (such as ‘what does family mean to you?’) answers were very similar across cohorts (see Bartholomaeus & Riggs, 2016), it was notable to us that the responses across cohorts in regards to the interview questions of interest in this paper were so diverse. As such, the comparative thematic analysis we conducted focused on responses to these two questions because comparatively, whilst each of the cohorts gave relatively internally homogenous responses, between cohorts the responses were diverse. In this sense, the cohort-level differences are sub-themes grouped under each of the individual interview questions which were generative of the overall themes themselves.
In the analysis reported below, indicative extracts are included. Given the sample size, the extracts included are not exhaustive, but instead represent the general trends evident for each of the cohorts within each of the two themes.

Findings

Impact of Government Policies and Practices

This first theme arose primarily from an interview question exploring the impact of the government, with participants specifically speaking about the impact of government regulation. Whilst this was not per se the intended interpretation of the interview question, the responses demonstrate that, at least amongst this sample, references to the impact of the government were typically perceived in individual terms (e.g., as freeing or constraining autonomy). Responses ranged from positive accounts in which the government was seen as positively impacting upon families (primarily amongst families formed through reproductive heterosex), to concerns about the impact of the government in terms of family finances (amongst all families other than those formed through foster care), to negative experiences of interactions with government agencies (primarily amongst foster families). Figure 1 illustrates these differences through the use of a continuum in which families formed through reproductive heterosex reported being least negatively impacted, and families formed through foster care reported being most negatively impacted.

[INSERT FIGURE 1 ABOUT HERE]
As noted above, the least negative accounts were provided by families formed through reproductive heterosex. For these participants, government impact tended to be spoken about in terms of financial benefits and incentives, where families formed via reproductive heterosex were most likely to be advantaged:

*Interviewer: Does the government impact upon your family in any way?*

Mary: I think through financial incentives and family tax. That impacts upon our family in a good way. I just think in broad terms that the government allows us to have freedom in our relationships and families, which is important.

*Interviewer: So, has the government had any impact on your family?*

Barbara: Ummm… no. And I’m aware of that. I’m aware of the fact that it’s a lot easier for us to access you know, families assistance and all that sort of thing. No. I don’t think they have impacted at all.

In these accounts of government impact, there is an implied paired contrast between the relatively positive relationship that these participants experience with government agencies, and those families for whom this relationship might be less “easy” or who might experience less “freedom”.

The experiences of government impact amongst families formed through foster care stands in stark contrast to the experiences of participants who formed their family through reproductive heterosex. Participants in the foster care cohort spoke about the difficulty of parenting under close government control and scrutiny, emphasising the negative impact that this had on the size of their families, the welfare of the children, and the ways in which they were able to parent:

*Interviewer: Do you feel that the government impacts upon your family?*

Mark: Oh absolutely – they control our life. They make decisions about who can come and go into our family without consulting us. Or they can say no, you can’t take
on a third or fourth child. They make decisions about our family without even consulting us – which is very frustrating. It’s a whole systematic thing. If the system left us alone, I think the kids would do a whole lot better.

*Interviewer:* Does the government impact upon your family?

Adam: Yes, in good ways and bad. If you have a good social worker then it can be a great form of support, and is almost like a good co-parenting relationship. If it’s bad – and we have had a number of bad workers – you are under constant scrutiny with little support or recognition. It’s the vexed thing about parenting in the context of foster care, and it certainly doesn’t make it easier to parent.

As seen in these extracts, participants in the foster care cohort indicated that the wellbeing of their family was affected by government regulation, seen here in relation to children potentially “do[ing] a whole lot better” if there was less systematic intervention, in addition to concerns about lack of support and recognition.

As indicated in Figure 1, the narratives of participants whose families were formed through adoption represent something of a midway point between the positive experiences of families formed through reproductive heterosex and the largely negative experiences of families formed through foster care:

*Interviewer:* And what about the government, in terms of impact on your family?

Tom: The children have been legalized now, so they get the same rights as everybody else. We didn’t get the baby bonus because we had the kids 6 months before it came in. They shouldn’t persecute adopters, when other people that don’t look after their money get everything.

*Interviewer:* And what about the government, in terms of impact upon your family?

Emma: Um… well in regards to the government, I would like [the child] to have a birth certificate. I don’t necessarily want to be on there as the birth mother. I don’t want to have any disrespect for her birth mother or [the child’s] heritage at all. But it’s really hard to get things done without one.
These accounts highlight what was a general trend amongst participants whose families were formed through adoption, namely that negative government impact was constituted in terms of rights, rather than the direct impact of government policies in the daily life of the family (as was the case in families formed through foster care). In a sense, participants whose families were formed through adoption sought rights that would make them on par with “everybody else”, such that their family would be seen as largely similar to families formed through reproductive heterosex. Families formed through surrogacy also spoke about the impact of government in terms of procedural concerns and rights, such as in relation to passports, parenting entitlements, and Medicare (Australia’s public healthcare system):

*Interviewer: You have spoken about overseas governments, but how has the government here in Australia impacted your family?*

Will: When we were getting [the child’s] passport through the Department of Immigration, that was more time consuming than it should’ve been, as the standard process is a very short process where you have citizenship by descent. Because we’re non standard it took them a lot longer and that was a bit of a pain.

*Interviewer: How has the government impact upon your family?*

Sarah: We’ve had to fill out forms, I mean for example just applying for, what do you call it, the baby bonus, at the Commonwealth level, and filling out some parenting payment form, you know we had to fill out forms three times, they couldn’t get their head around our family. But when they read the fine print they could see we were eligible and processed it.

Given both the differences in public attitudes towards the family cohorts included in the project, and the different ways in which each cohort is regulated by the state, it is perhaps unsurprising that we found differences in the ways in which each cohort spoke about the impact of the government upon their family. Nonetheless, the comparative thematic analysis presented in this first theme highlights precisely what is at stake as a result of these differences. As participants in the cohort whose families were formed through reproductive
heterosex noted, they experienced government impact as offering freedom and financial security, both of which are likely to increase overall levels of family wellbeing. For families formed through foster care, however, the role of the government in the family could be undermining. This echoes findings from Swartz (2004) and Nutt (2006), both of whom suggest that government regulation negatively impacts upon foster carers in terms of their experience of parenting. Importantly, as both of these authors suggest, whilst it is realistic that foster families would experience some government regulation, it should not be axiomatic that this regulation would have a negative impact. It is possible, they suggest, for foster families to experience both autonomy as well as engagement with government agencies, whereas in our sample the former was often not evident.

**Being seen as Public Property**

In terms of the second theme, participants spoke in differing ways about the extent to which they felt that their family was treated as public property, and thus as either deserving of respect for their privacy, or as inviting comment about their family. Comments about the perception of their family being public property (or not) arose in response to a question that asked about community responses to the family, as well as from across a range of interview and probe questions that sought to explore what it meant to engage in a particular mode of family formation. What unified these comments as a theme was an orientation to the sense that families *might* be a matter of public concern. As was the case in the previous theme, families formed through reproductive heterosex were the least likely to report the perception that their families were treated as public property, whereas foster care families were the most likely to perceive that they were under public scrutiny. Figure 2 again presents these differences on a continuum, where families formed through reproductive heterosex appeared
to be the least subjected to public attention, families formed through either adoption of surrogacy were subjected to a certain degree of public attention, and families formed through foster care were constantly subjected to public attention.

[INSERT FIGURE 2 ABOUT HERE]

Families formed via reproductive heterosex were most likely to feel supported by the community, which relates to the fact that, as one participant put it, they are the “standard man, woman, child type family”.

Interviewer: How does the community engage with your family?

Amanda: Our family is always received with total acceptance by the broader community. There is no issue at all and that probably comes from the fact we are the standard man, woman, child type family and racially we are just in the majority, so we are really not up against many challenges – we don’t give people a shock.

Interviewer: How does your local community respond to your family?

Beth: When people find out we’re not married, which normally happens because my child and I have different names, I cop a bit of “why does your child have a different name”. But that’s it really in terms of negative responses.

In the first account included above, the fact that the participant’s family does not “give people a shock” translates into an experience of acceptance. To be accepted – to not receive negative public attention – is thus to fly under the radar. As the second account suggests, it is only on occasions where families formed through reproductive heterosex come on the public radar for being outside the norm (i.e., having different last names in a family) that attention is paid to them.
This is in stark contrast to how foster families perceived the degree of public attention paid to their families. While there were degrees of recognition and support, foster parents in general reported that they were frequently asked invasive questions, and felt that they were constantly being monitored:

*Interviewer: How does the community engage with your family?*

Robert: It is difficult. On one level people appear to treat us as a unit, but on the other they say things that are negative, like “wouldn’t they be better off with their real parents?” or “I guess if they are naughty you could always give them back”. I don’t think they’d say this to other parents.

*Interviewer: Do you feel supported as a foster family?*

Gayle: What I feel most as a foster family is monitored – that everyone has their eye on us and that we are held up to a standard that, were we to fall short of it, we would be in trouble. I feel pressured as much as supported.

Similar experiences were reported by participants whose families were formed through adoption, who were also asked invasive questions by strangers. There was a difference we would suggest, however, between comments made to foster families and those made to adoptive families. Whilst in both cases the questions were inappropriate and personal, to a degree in the case of foster care what was being questioned was the legitimacy of the family (i.e., “wouldn’t they be better off with their real parents?”), which only served to reinforce the regulatory scrutiny foster families felt they were under. For adoptive parents the questions they were subjected to, whilst equally as marginalising, either focused on the reproductive capacity of the parent, or evoked exoticising understandings of children who were perceived as racially different to their parents.

*Interviewer: How do people in the general community engage with your family?*
Mariah: Some ask you very personal questions, in the street, in the supermarket. In the bakers I was once asked ‘can’t you have children of your own?’ so people actually feel very empowered to actually ask you very personal questions out of their own curiosity.

*Interviewer: How did people in the community respond when you had your children?*

Chris: To start with we had a little bit of harassment: my youngest would stand on the trolley and everyone would come and pat her hair and say “oh you are beautiful”. It got to the stage where she wanted to wear a hat when she went shopping or she wanted to stay in the car.

Similar to a degree were responses from participants whose families were formed through commercial surrogacy. Given the ongoing media attention paid to commercial surrogacy in Australia, (e.g., see Riggs & Due, 2013; 2014), it is perhaps unsurprising that these families were subjected to invasive questions. Similar to the case with adoptive parents, and different to a degree from foster parents, whilst the questions asked of parents who had their children through surrogacy were inappropriate and personal, they did not question the legitimacy of the family, but rather treated the family’s personal business as a public matter:

*Interviewer: How have your friends responded to your family?*

Todd: With a couple of friends the first question they asked was “well whose sperm did you use?” As if that is anyone’s business! People seem to want to know everything or nothing, there’s no happy medium I suppose.

*Interviewer: How have people in the community responded to your family?*

Susan: It’s like it’s everyone’s business and they need to know the insides and out. It’s just mind-boggling and I think that’s why I haven’t told many people yet. I can’t deal with it! It’s just too difficult and it just makes me far too anxious.

The findings presented in this theme again reiterate previous research, specifically with regard to negative public perceptions about intercountry adoption (e.g., Suter & Ballard, 2009). However, whilst inappropriate questioning of a personal nature was reported by
participants from families formed through foster care, adoption, and surrogacy, families
formed through foster care were more likely to be implicitly or explicitly questioned about
the *legitimacy* of the family itself. Different to the previous theme, then, there is no automatic
reason for why foster families should be questioned in terms of legitimacy. Rather, our
suggestion is that this differential treatment is the product of public attitudes about what
properly constitutes a family, a point we return to in our discussion below.

**Discussion**

The comparative thematic analysis presented in this paper suggests differences in terms of
whether the lives of four cohorts of Australian families are treated as private or public.
Specifically, the findings suggest that families formed through reproductive heterosex remain
the most protected and supported family form, and are afforded the greatest degree of
privacy. Families formed through foster care, by contrast, receive the highest level of public
and institutional scrutiny, and this scrutiny appears to negatively impact upon the degree to
which such families feel protected and supported. Both families formed through adoption and
commercial surrogacy continue to be subject to public scrutiny, though arguably this is more
because the topics of adoption and surrogacy remain contentious public issues, rather than the
families themselves being closely scrutinized in the way that is the case for foster families.
Whilst these differences are perhaps understandable given previous research concerning
public attitudes and institutional responses to the four modes of family formation, it is
nevertheless important to consider whether family forms that experience heightened degrees
of scrutiny are vulnerable to decreased wellbeing. The analysis presented in this paper
indicates that this is likely, however further research focusing on this specific research
question is required.
Bearing in mind our points above about the degree to which each mode of family formation under examination in this paper is treated as either a private or public matter, we propose a tentative hierarchy through which social norms about reproductivity and scrutiny in Australia may be understood. In Figure 3 we suggest that whilst, following Turner (2001), all forms of reproductivity (broadly understood as family-making) are accorded value (in comparison to, for example, voluntary childlessness), differing forms of reproductivity are nonetheless ranked in relation to the normative status accorded to the nuclear family formed through reproductive heterosex, and this ranking produces differing degrees of scrutiny.

[INSERT FIGURE 3 ABOUT HERE]

As this hierarchy would suggest, families formed through reproductive heterosex (or at least those whose social location approximates that of our sample) are able to live a relatively private life. Families formed through adoption or surrogacy are also able, to a certain degree, to live relatively private lives, however at certain key points their family may come under public scrutiny (i.e., when public debates over adoption or surrogacy occur). Families formed through foster care, by contrast, appear to experience their family as constantly under scrutiny, and thus constantly in the public eye. Such scrutiny, it might be argued, is important for ensuring the safety and wellbeing of children in care. Whether such high level scrutiny achieves this potential aim, however, is questionable (consider, for example, recent Australian reporting on incidences of abuse in care, despite monitoring and regulation, see Productivity Commission, 2015). Furthermore, and in terms of wellbeing specifically, it is important to acknowledge that scrutinising foster families over and above all other modes of family formation potentially contributes to the stigma attached to foster care, stigma that
arises from the continued privileging of families that more closely approximate the norm of reproductive heterosex (Blythe, Jackson, Halcomb & Wilkes, 2012).

Responding to our proposed hierarchy, we now consider two areas that we believe require attention with regard to public policy and practice, so as to address the disparate levels of scrutiny indicated in the hierarchy. These two areas will be of especial relevance to practitioners and policy makers in the fields of public health, legislation and child protection. The first of these pertains to the importance of decentring reproductive heterosex as the most privileged mode of family formation in policy. As the statistics we presented earlier in the paper would suggest, changing social contexts and lifecourse decisions made by many heterosexual couples means that increasingly reproductive heterosex, whilst remaining the most common mode of family formation, is not inherently the most ‘natural’. As Strathern (1992) has suggested, forms of kinship that are treated as ‘natural’ are in fact the product of modes of relationality that are privileged. Whilst it is understandable that government policies should aim to service the majority, this does not mean that the needs of the majority should necessarily shape service provision across the board, potentially to the detriment of the wellbeing of those located outside the norm. Instead, government policies that recognise the diverse needs of families as their organizing principle may serve to 1) decentre a particular norm, and 2) ensure that inclusion is available to all families based upon their circumstances, not upon their approximation to a norm.

The second point that we would emphasise relates specifically to practice. It is unfortunately far too common that those who oppose modes of family formation other than reproductive heterosex make recourse to outcomes to legitimate their opposition. This can involve suggesting, for example, that children of lesbian or gay parents will be bullied; that
commercial surrogacy is detrimental to the psychological wellbeing of all parties involved; or that children placed for adoption are likely to experience ‘abandonment issues’. What these types of claims indicate, however, are not problems associated with wellbeing that are per se inherent to each of these families. Rather, poor wellbeing outcomes experienced by these families, we would suggest, are more correctly the product of the impact of social norms (e.g., homophobia, the relative lack of availability of surrogacy within Australia, and the lack of support for families at risk of having a child removed). What is required, then, are practice responses that 1) attempt to address the effects of social marginalization upon wellbeing through targeted programmes that promote social inclusion and minimise unnecessary levels of scrutiny, and 2) involve cohort-specific programmes that promote wellbeing in ways that are specific to the cohort, rather than being based upon normative assumptions.

We must of course acknowledge that these suggestions are based on findings from a particular cohort of participants (i.e., they were all white and middle-class). Factors such as diversity in class, race, (dis)ability and religion will likely add complexity to the ways in which modes of family formation are understood (Green et al., 2005; Roberts, 2002). For example, whilst foster families appear to be subject to intense scrutiny, this is a corollary of the intense scrutiny that has already been given to birth families who are deemed unable to care for their children. As such, reproductive heterosex is not a guarantee that scrutiny will not occur. Rather, our findings suggest that for white middle-class families formed through reproductive heterosex, scrutiny may be minimal. For other families formed in this way but for whom whiteness and middle-classness are not an existing privilege, scrutiny may be increased.
We are also aware that the project did not include a cohort of parents whose mode of family formation was an assisted reproductive technology (other than surrogacy) used to supplement the infertility of one (or both) of the partners. Future research will do well to include this population in comparative research, and to explore whether the findings and suggestions outlined in this paper hold true for a more diverse population. Nonetheless, despite these limitations, the findings presented in this paper support findings from previous research, and contribute to our understanding of the differential experiences of families by focusing comparatively on four cohorts, all of whom responded to the same interview schedule.

To conclude, as researchers and theorists have long noted, views on what should properly be treated as private and what is considered public are often used to legitimate practices that are both marginalizing and regulatory. Our intent in this paper has been to draw attention to the differential ways in which social norms shape how certain families are afforded the ‘freedom’ of privacy, whilst others are pushed into the public sphere. How we think about and engage with practices of scrutinisation in the context of families, then, requires our ongoing attention.

References


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FIGURE 1: Continuum of Regulatory Government Impact

- Government primarily seen as having a positive impact through welfare benefits
- Little awareness that government may negatively impact some families
- Clear and ongoing recognition of government intervention and/or threat of it
- Some understanding of the role of the government as a ‘corporate parent’
FIGURE 2: Continuum of Treatment as Public Property

- Some degree of experience of their families being on the public radar, but primarily in regards to affection for children
- Some degree of awareness that other people make judgments about parents, but little awareness of the possible implications of this

- Considerable degree of experiences of their families being treated as a public topic, at times leading to disrespectful responses from strangers
- Awareness of judgments made by others

- Considerable awareness of the implications of other people’s judgments
- Constant exposure to other people’s opinions and questions
- Perception that the legitimacy of their family was in question

LEAST PUBLIC

Reproductive Heterosex

Surrogacy Adoption

Foster Care

MOST PUBLIC
FIGURE 3: Hierarchy of family forms

- Families formed through reproductive heterosex
- Families formed through assisted reproductive technologies utilised by at least one of the parents (e.g., IVF)
- Families formed through assisted reproductive technologies utilised by someone other than the parents (e.g., surrogacy)
- Families formed through the reproductivity of a birth parent from whom guardianship is legally transferred (e.g., adoption)
- Families formed through the reproductivity of a birth parent from whom guardianship is not legally transferred (e.g., foster care)

- Private
- Mostly private
- Both public and private
- Mostly public
- Public