Author's response to reviews

Title: Parent-reported measures of child health and wellbeing in same-sex parent families: a cross-sectional survey

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Author's response to reviews: see over
Dear Editors

Thank you for the opportunity to revise our manuscript for publication in BMC Public Health.

We would like to thank both reviewers for the time they have taken to consider our manuscript and to provide detailed and incisive reviews. We have made a number of revisions to reflect their comments and to improve the presentation of our findings. We will address each reviewer’s comments on a point-by-point basis below.

Reviewer 1 – Kirsten Hancock

Major compulsory revisions

Responses to broad comments

1. Overall we have endeavored to improve the level of detail to better explain the methodology and results, in doing so we hope that it is now clearer which data are compared with which samples throughout. To aid in this, and to reduce the number of tables, which as you rightly point out display a large number of null results, we have removed the comparisons with the data from Mellor and Hayes. We feel that this does not alter the findings or conclusions in any meaningful way and makes for a more straightforward and precise consideration of the data. While we recognize that splitting the paper may make the data slightly easier to follow we feel that it is important that overall health and stigma are presented together to give the complete picture. By adding to the background section this link is hopefully clearer and better supports the combination of data in this paper.

2. We have significantly increased the information around the methodology and analysis strategy, which hopefully brings better understanding to how we have handled the data. As mentioned, the Mellor and Hayes studies have been removed as comparators and we have included a new table, table 2 (p31), to show some key comparisons around the datasets. Throughout we have amended wording to ensure the reader understands that the population samples are drawn from Victoria and not the whole of Australia, which may not have previously been understood. The title of table 5, p34 (previously table 9) has been amended to better indicate which datasets are being compared.

3. Further information on demographic characteristics and how they compare to population data (i.e. from the census) and normative samples has been included throughout the manuscript and greater emphasis placed on the impact that this has on interpreting the results included (table 2, p31; line 9, p13; line 13, p13; lines 1-2, p14; paragraph 2, p16; paragraph 1, page 20).

Responses to specific comments
4. The introduction/background has been substantially expanded to give readers a clearer context for the work (start of page 4 to paragraph 1 page 6). The role of stigma in same-sex families has been particularly highlighted (paragraph 1, page 5).

5. Paragraph 2, page 5 - This paragraph has been substantially changed to be more about physical health in general with the emphasis taken off health care workers.

6. Stigma is now included as an integral part of the background work in this area (last 2 lines of page 4 to end of paragraph one on page 5).

7. The methodology has been substantially expanded with more detail and clearer explanations (pages 7-12).

8. Each of these issues has been addressed in sections for both the HOYVS and VCHWS (last paragraph page 10 to end of second paragraph page 11).

9. The analysis process has been re-written to more clearly explain how analyses were conducted and how they were interpreted. In doing so the presentation of results should now be clearer (last paragraph page 11 to end of first paragraph page 12).

10. Additional demographic information from population samples has been included, table 2 (p31), as well as elements of comparison data at a national level (eg median household income from the Census – line 13, p12; and parent education levels from LSAC – line 9, p13). The consideration of possible confounding has also been given greater weight in the discussion (paragraph 2, p16 to end of paragraph 1, p17; paragraph 2, p19 to end of paragraph 1 p20).

Minor essential revisions

11. The whole introduction has been re-worded to provide more detail and a clearer direction – a new introductory paragraph (p4, paragraph 1) sets the scene and paragraph 2, p7 highlights the aim.


13. The wording in these sentences has been changed to make them clearer – p6, paragraph 2, line 3.

14. This sentence has been re-worded – p6, paragraph 2, lines 6-7.

15. Two examples have been provided and a reference for more background – last 2 lines of p6.

16. The number of children with same-sex couple parents is now part of the first paragraph of the introduction (p4).

17. The recognition of theoretically possible household surveys has been included and a brief explanation of their lack of suitability given (lines2-5 p7).

18. This sentence has been re-worded for greater clarity – end of paragraph 1, page 7.

19. This paragraph has been substantially changed and incorporated into an early part of the background section – p5 paragraph 2.
20. The ACHESS is written in full – p 7, methodology.
21. The word ‘data’ has been amended to plural throughout.
22. HOYVS and VCHWS have been referenced throughout (paragraph 1, p8; paragraph 2, p10; paragraphs 1 and 2, p11).
23. This information is now presented in the results – penultimate line, page 12.
24. Clarification about the location of normative samples has been included (last paragraph page 10 to 2nd paragraph page 11; first paragraph, p14).
25. The pattern of family demographic data is no different when presented at child and parent level. It was decided to present all data at the child level for consistency and to ensure ease of understanding for the reader.
26. Recognition that the SDQ measures social and emotional wellbeing has been added – last 3 lines, p9
27. Comparative Cronbach alpha has been added – end of paragraph 1, p10
28. This data comes from a series of yes/no questions with multiple answers possible (although practically speaking a child cannot be biologically related to the index parent AND their partner). As such the data does not necessarily tell us who these children are, although it is likely that they are the biological children of a previous partner.
29. This has been changed – reference to table 1 now starts paragraph 1, p13.
30. Additional comparisons have been added to some results that are described from table 1 – line 9, paragraph 1, p13; line 13, paragraph 1, p13)
31. These characteristics are described in the footnotes of table 5 and not included in the text in order to maintain flow and in accordance with guidelines for presenting data such that data is not unnecessarily repeated. If required we can add it in the text.
32. This sentence has been changed in line with the comment so as not to overstate results – beginning of p16.
33. These studies have been referenced – line 4, p16
34. End of paragraph 1, p16 - This section has been reworded for greater clarity of meaning and can be related to new census data in paragraph 1, p4.
35. Greater attention has been given to demographic characteristics throughout the text (paragraph 2, p16 to end of paragraph 1, p17; paragraph 2, p19 to end of paragraph 1 p20) and is supplemented here.
36. This wording has been changed to explain some of the reasons behind milk supply – paragraph 2, p17.
37. This wording has been changed to better represent our meaning – line 8, p18.
38. This has been added to the introduction/background – beginning of p6.
39. A brief section reflecting on other family contexts has been added – paragraph 1, p19.
40. Possibly due to poor descriptions of data sets earlier in the manuscript we believe you have misinterpreted the findings that we present in relation to stigma. The family cohesion and general health findings are comparisons with population data and are independent of stigma. The scales associated with stigma are presented in paragraph 3 on p15 of the new manuscript. While family cohesion is included there are also
associations with mental health, emotional symptoms etc. – more broadly mental and emotional wellbeing. As such this section has not changed

41. Issues of comparison, bias and associated limitations have been addressed throughout (and are explained in the responses above).

42. This paragraph on temporal disparity has been deleted as suggested

43. The Hayes study has been removed

44. Old tables 4-6 have been deleted, and the old table 9 (new table 5) given a new title for greater clarity.

Discretionary revisions

45. This is an interesting alternative and worth further consideration but we have opted not to reflect this in the current manuscript.

Reviewer 2 – Marie Leiner

Information about the validity of the questionnaire

The details on the reliability and validity of the questionnaire have been re-worded to provide more clarity – specifically that the questionnaire is comprised of three validated instruments (the CHQ, the ITQOL and the SDQ) with some additional questions (paragraph , p8). It is not suggesting that we have tested the reliability and validity ourselves (although the reliability of the BSS for our sample is presented in terms of the Cronbach alpha – paragraph 1, p10).

Non-normal data.

It is commonly accepted that QoL data is often not normal in its distribution. While most authors ignore this fact we acknowledge that transformation is one way of dealing with this issue. Transformations did not provide any significant benefit when considering the raw data however, and through detailed reflection on the chosen statistical tests, in conjunction with consultation of statistical experts from the University of Melbourne Statistical Consulting Centre, plots of residuals and considerations of equality of variance suggested that the chosen models held up to greater scrutiny and as such the analysis is valid. This approach is summarized in the analysis section of the methodology (paragraph 2, p12) and is supported by published reviews (eg Lumley et al, 2002, Ann Rev Pub Health).

As such we do not agree that the results and possible conclusions are invalid, and agree with the statistical review of the first reviewer, whose concerns have been further addressed above.

Yours truly,

Dr Simon Crouch