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Abstract

The Nordic countries of Denmark, Sweden, Norway, and Finland were among the first countries to acknowledge same-sex couples' partnership and parenthood rights in their legislations. In this comparative paper, we explore trends over time in the share of female same-sex and different-sex couples that have children following their legal union and variation by socioeconomic status. Using harmonized register data, we assess couples' likelihood of having a child over time, with a focus on education and income. We find strong increases in female couples' likelihood of having a child, resulting in sharply increasing prevalence, approaching near parity with different-sex couples in Denmark, Sweden, and Norway around 2010. Finland diverges from the other countries in terms of its later and less steep increase. Higher education is associated with a higher likelihood of having a child, whereas we find a less clear gradient by income level. We suggest that legal changes have made same-sex parenthood more achievable in the Nordic countries, that these legal changes are concurrent with an increase in parenthood, and that female couples today are nearly as likely to have children following a legal union as different-sex couples.

Introduction

The Nordic countries of Denmark, Sweden, Norway, and Finland were among the first countries in the world to legally acknowledge same-sex couples' partnership and parenthood rights (Evertsson et al. 2020). Denmark was the first country in the world to introduce same-sex registered partnerships in 1989, and Finland was the last of the Nordic countries to do so in 2002 (Rydström 2011). All Nordic countries have since legalized same-sex marriage, expanded couples' pathways to parenthood, and enabled the legal custody and parental rights of a child to be shared between partners of the same sex (Waaldijk 2020). Although many same-sex couples had lived together and raised joint children before the legal recognition of their families, legal changes have reduced institutional barriers to family formation and provided greater security (Evertsson et al. 2020; Malmquist 2015).

Prior studies have shown that the number of same-sex couples, female-female couples (hereafter female couples) in particular, who have become parents within their partnership has increased in Sweden, Norway, Denmark, and Finland (Andersson & Noack 2010; Evertsson et al. 2020; Kolk & Andersson 2020; Möllborn et al. 2025; Ponkilainen et al. 2024) as well as in some other countries, such as in the United States (Gates 2015; Reczek 2020). We know less about the socioeconomic dimensions of this change and whether couples with more resources and education have driven the increase. Legal changes have opened up access to medically assisted reproduction (MAR) and adoption for same-sex couples, but these options often require planning, persistence in long processes, and socioeconomic resources (Malmquist & Spånberg Ekholm 2020; Mezey 2013; Rozental & Malmquist 2015). Therefore, different individual- and couple-level characteristics might play a role in which same-sex couples can realize their parental desires. Furthermore, we know little about differences in parenthood between female couples and different-sex couples or the extent to which childbearing patterns still differ between them.

The Nordic countries have similar family and welfare policies, based on the principles of social and gender equality, the universal availability of care services, and individual rights to social security and welfare benefits (Andersson et al. 2009). Even though the legislations have partly differentiated over time, the countries often take inspiration from each other for new laws and policies (Jeppesen de Boer & Kronborg 2011). For instance, after Denmark introduced same-sex registered partnerships in its legislation, the law was soon implemented in other Nordic countries (Rydström 2011). From then on, changing laws and policies for same-sex couples' family rights have taken place in all the Nordic countries, though in different orders and different years. The Nordic countries have some of the most accepting public attitudes toward sexual minorities and their families worldwide, though Finland and Norway are often ranked behind Sweden and Denmark in this regard (Andersen & Fetner 2008; Pew Research Center 2018; Waaldijk 2020). The Nordic countries provide us with a unique context to explore whether the childbearing behavior of same-sex couples has been following changing legislations similarly in different countries. Thus, it offers an opportunity to see how different timing and order of the implementation of laws and policies have (or have not) affected same-sex childbearing within a most-similar comparison framework.

We explore the childbearing behavior of female couples who have formed a legal union and analyze educational and income gradients in their childbearing over time. First, we examine the likelihood of having a child prior to the legal union in female couples and compare it to that of different-sex couples over time. We do this to illustrate their patterns of premarital childbearing, which reflect different starting points for childbearing after the legal union formation. Second, we examine childbearing after the legal union formation. Third, we investigate how the association between educational level and the likelihood of having a child has changed over time. Fourth, we analyze the corresponding association in terms of income level. We analyze the associations separately for education and income as they represent different dimensions of socioeconomic status that may influence childbearing through different mechanisms. Our individual-level data include 11,170 female couples who entered a registered partnership or marriage between 1989 and 2018 across the four countries. We analyze their childbearing data until 2023. We compare the same-sex couples to 1,766,778 different-sex couples who married within the same period. The declining fertility rates in the 2010s in the Nordic countries create an interesting background to study female same-sex couples' childbearing trends in relation to the underlying population-level trends (Hellstrand et al. 2021).

Same-sex couples' family formation and legislation

Many same-sex couples lived together, raised children, and had joint children already before the legal recognition of their partnerships and parenthood rights. Same-sex couples have been creative in finding alternative ways to form families, such as forming extended families by making informal agreements surrounding childbearing and -rearing with friends and other couples (Folgerø 2008; Stacey 1996; Weston 1991). Legal and structural barriers to reproduction, as well as social norms regarding living as a same-sex couple, have been reflected in same-sex couples' pathways to parenthood at different times (Kuosmanen 2007). The institutional context of same-sex families in the Nordic countries has changed in recent decades, as legal changes have formalized family structures and behavior that had already existed among same-sex couples. The legal changes have improved same-sex couples' access to reproduction methods and enhanced their security and rights in both everyday life and unexpected situations (Malmquist 2015; Rydström 2011), although practical and structural differences in access to parenthood still result in large differences in childbearing between female same-sex and male same-sex couples (Kolk & Andersson 2020).

In addition to the practical implications of legislative changes, laws also have normative and symbolic functions because they signal which kind of behavior is expected and supported (Garwood 2016; Neyer & Andersson 2008). Rydström (2011), for instance, has argued that the legal right to MAR has supported female couples' childbearing, as it has increased their sense of societal acceptance of their parenthood. At the same time, the legal recognition of same-sex couples' partnership and parenthood rights is based on the existing dominant heteronormative model (Digoix 2020), where legislation best recognizes family forms that most closely resemble a heterosexual nuclear family, i.e. married couples with children (Garwood 2016; Kuosmanen 2007; Moring 2013). For instance, many parental rights (particularly those related to adoption) initially applied only to same-sex couples in registered partnerships and marriages. This created incentives for couples to enter a legal union if they intended to have children (Kimport 2013; Kolk & Andersson 2020).

MAR has been argued to have become the preferred option for achieving pregnancy among most female couples because it ensures a two-parent family form (Garwood 2016; Mamo 2007; Moring 2013). A nuclear family form is often juridically and socially the most convenient option for couples because it fits existing legal and societal institutions (Garwood 2016; Mamo 2007; Moring 2013). Having a child as a nuclear family using an unknown donor also protects the couple from interference from a third party, such as a known sperm donor or father of the child whose desires regarding his role in the child's life may conflict with the mothers' interests (Folgerø 2008). As a result, more creative family forms may have been implicitly crowded out among female (and male) couples (Garwood 2016; Rydström 2011).

The opportunities to become a parent are much greater for women than for men in same-sex unions (Evertsson et al. 2020; Kolk & Andersson 2020; Waaldijk 2020). The gender gap is to some extent explained by biological differences (i.e. women's ability to become pregnant and carry a child), though legislation has also facilitated female couples' opportunities to become parents (Evertsson et al. 2020; Digoix 2020; Malmquist & Spånberg Ekholm 2020). It has been argued that rigid norms about the importance of a mother in caring for a child may have directed societal support for female couples (Evertsson et al. 2020; Goldberg 2013; Moring 2013). The number of male couples who have had children within their same-sex partnership has remained low in the Nordic countries (e.g., Andersson & Noack 2010; Evertsson et al. 2020; Kolk & Andersson 2020). In this study, we have to exclude male couples because so few have a child together that privacy concerns make it impossible to report differences by socioeconomic status. Therefore, we focus on female couples in the following overview and in our empirical analyses.

Socioeconomic resources in same-sex couples' transition to parenthood

Legal changes have improved female couples' opportunities for family formation in the Nordic countries, although individual- and couple-level characteristics, such as socioeconomic resources, may affect who can take advantage of the new opportunities (Rault 2020). Higher socioeconomic status is increasingly associated with higher fertility among women in different-sex couples in the Nordic countries (e.g., Jalovaara et al. 2019; Kolk 2022). It has been argued that individuals with higher socioeconomic resources can better afford many costs associated with having children, and high-income families are also better supported by Nordic social insurance systems that compensate for the lost income of a caregiver and enable the combination of work and family (Jalovaara et al. 2022; Kolk 2022). This may be particularly important for women with high incomes and education. While these factors may equally apply to women in same-sex and different-sex unions, the role of socioeconomic resources may be more important for same-sex couples due to their more complicated routes to parenthood, as well as the lower incomes among women in general compared to men (Boye & Evertsson 2021; Mamo 2007; Möllborn & Kolk 2024). Women in same-sex couples often have lower combined incomes than both different-sex couples and male same-sex couples while competing in the same labor and housing market (Möllborn & Kolk 2024; Einiö & Ponkilainen 2025).

Many same-sex couples need medical and, in some cases, legal assistance to have children and secure legal parenthood for both parents (Mezey 2013). Couples with higher education may be better equipped to find and utilize information about different procedures, helping them navigate medical and legal systems more effectively (Bell 2016; Mamo 2007; Mezey 2013; Moore 2011). Furthermore, given that education promotes the ability to critically examine and challenge social norms (Kravdal & Rindfuss 2008), more highly educated couples might be in a better position to deal with stigma regarding their parenthood (Goldberg 2009; Mezey 2008). It is thus possible that female couples with higher socioeconomic status have been pioneers in starting families and acting against heteronormative societal norms, and the lifestyle, including children, has later spread to couples in lower socioeconomic positions. Family demographic theory has in general predicted that novel family behaviors have initially been pioneered by highly educated groups (Lesthaeghe 2010).

Before the Nordic countries legally confirmed female couples' access to MAR and provided them such treatments as part of tax-funded public healthcare, couples who intended to have a child needed to seek MAR in private clinics at their own cost or organize it entirely by themselves. If they were barred from accessing MAR in their home country, they would travel to other countries for treatments (Dahl & Andreassen 2023; Digoix 2020; Moring 2013). These options have required substantial socioeconomic resources, including a broad understanding of different procedures and their requirements, as well as the financial means to cover treatment costs and potential travel expenses. Some couples have instead chosen to form extended families with men willing to act as sperm donors or fathers for their child (Folgerø 2008; Weston 1991), implying lower immediate costs of conception.

Female couples in the Nordic countries received access to MAR in the public healthcare sector in the 2000s. This could in principle have made childbearing more available for female couples across socioeconomic groups. We are not aware of studies exploring socioeconomic differences in MAR usage among women in same-sex unions, but other studies have shown that women conceiving through MAR tend to have higher education and income, even in countries where MAR is covered by public healthcare (Brautsch et al. 2023; Goisis et al. 2020; Goisis et al. 2024). This indicates that these socioeconomic disparities relate to factors beyond financial resources (Bell 2010), such as geographical, behavioral, and cultural factors (Brautsch et al. 2023; Goisis et al. 2020).

Previous research on female couples' childbearing

Research on same-sex couples' families has a long history in the United States covering a wide range of topics including different aspects of couple relationships, parenthood, and the outcomes of children raised by same-sex parents (Biblarz & Savci 2010; Moore & Stambolis-Ruhstorfer 2013; Patterson 2000; Reczek 2020). Early literature focused on family formation amidst prejudices and obstacles deriving from the lack of social and legal recognition of same-sex families (Patterson 2000). Social and legal changes in the 2000s led to a rapid expansion of the literature on families formed by same-sex couples. This research increasingly focused on planned parenthood within same-sex unions, shifting the emphasis away from same-sex parenthood following divorce from different-sex unions (Biblarz & Savci 2010; Moore & Stambolis-Ruhstorfer 2013). Over the last decades, more research has begun to explore the diversity of same-sex families across social locations and identities, expanding beyond white middle-class families, lesbian and gay identities, and binary genders (Reczek 2020).

Both U.S. and Nordic literature have shown that a substantial number of children raised by female couples, particularly among older cohorts of couples, were born within previous different-sex relationships (e.g., Gates 2015; Kolk & Andersson 2020; Reczek 2020). Childbearing within same-sex partnerships has become more common over time, which previous research suggests resulted from improved access to different means of reproduction, decreased social stigma, and earlier ages of self-acceptance and disclosure (Andersson & Noack 2010; Digoix 2020; Reczek 2020). However, because of the scarcity of longitudinal register data on same-sex couples, few studies have assessed the likelihood of childbearing after the formation of same-sex legal unions. Most of these studies are from the Nordic countries, which have administrative data from a relatively long period of legally recognized same-sex unions.

Childbearing in same-sex legal unions was uncommon in the Nordic countries during the 1990s, but the number of female couples becoming parents has increased since the 2000s (Andersson & Noack 2010; Evertsson et al. 2020; Kolk & Andersson 2020). Kolk and Andersson (2020) found that almost 50% of female couples who entered legal unions in 2008 had a child within five years of legal union formation in Sweden, in contrast to very low levels of childbearing among couples who entered legal unions in the 1990s. They indicated that the impact of changing legislation has been pronounced in the family dynamics of female couples

(Kolk & Andersson 2020). Möllborn, Kolk, and Evertsson (2025) showed that the proportion of women in legal same-sex unions who lived with (any) children increased from 9% in 1995 to 57% in 2021 in Sweden. In Finland, female couples' likelihood of having a child increased from 20% in the partnerships registered in 2002–2006 to 45% in the partnerships registered in 2012–2016, aligning with the improvements in female couples' parenthood rights (Ponkilainen et al. 2024). The corresponding information on childbearing trends among female couples in Denmark and Norway has not been available so far. Furthermore, there is a lack of comparative studies that could enhance our understanding of how legislative changes and cultural contexts interact to influence childbearing among female couples.

Female couples with greater socioeconomic resources may often have more options to pursue their parental desires than couples with fewer resources (Mezey 2008; Moore 2011). Yet, research on the association between the level of socioeconomic resources and the likelihood of having a child among same-sex couples is still scarce (Rault 2020; Reczek 2020). We know two register-based studies (Boye & Evertsson 2021; Ponkilainen et al. 2024) that have explored the association among female couples in the Nordic countries. Boye and Evertsson (2021) found that higher education and higher household income predicted childbearing among female couples who entered legal unions in Sweden between 1995 and 2016. Ponkilainen et al. (2024) found that the likelihood of having a child increased clearly among highly educated female couples who registered their partnerships in Finland between 2002 and 2016, and more modestly among couples with medium education, while the likelihood decreased among low-educated couples. Providing a different perspective, Möllborn et al. (2025) presented data on socioeconomic differences among same-sex couples with co-resident children in Sweden and found a stable pattern in which female couples with children had lower incomes than male same-sex or different-sex couples with children. Other recent studies analyzed household earnings of female couples during the transition into parenthood in Denmark, Norway, Sweden, and Finland and found that female couples had higher socioeconomic status than different-sex couples before birth in all four countries (Van Der Vleuten et al. 2024; Evertsson et al. 2025).

The institutional development of same-sex couples' family rights in the Nordic countries

The most important steps of the legal recognition of same-sex couples' partnership and parenthood rights in each Nordic country are presented in timelines in Figure 1. The first step in partnership rights was the introduction of registered partnerships, which became available in Denmark in 1989, followed by Norway in 1993, Sweden in 1995, and Finland in 2002

(Andersson & Noack 2010). In all Nordic countries, the option to register a partnership was later replaced by marriage, and couples in registered partnerships could either continue in a registered partnership or convert it to a marriage (Waaldijk 2020).

<Figure 1>

Adoption rights

The first step in parental rights was the introduction of second-parent adoption, i.e. the right to adopt one's legal spouse's biological child, which established that a child could have two legal parents of the same sex. Again, Denmark was the first one to take this step in 1999 (Jeppesen de Boer & Kronborg 2011), and Finland was the last in 2009 (Valleala 2017). The Nordic countries except Finland later extended the right to second-parent adoption to include same-sex cohabiting couples who are not legally married or registered (Eeg 2017; Evertsson et al. 2020; Justitsministeriet 2008; Valleala 2017).

Sweden was the first Nordic country to introduce joint adoption rights, i.e. the right to adopt a child of whom neither spouse is a biological parent, for same-sex couples in 2007 (Ytterberg 2017), and Finland was the last to do so in 2017 (Valleala 2017). Joint adoptions by same-sex couples are scarce in practice because there are few children to adopt domestically, and in international adoption, many countries do not allow a child to be adopted by a same-sex couple (Digoix 2020; Malmquist & Spånberg Ekholm 2020). Due to the data restrictions and the low number of adoptive same-sex parents in the Nordic countries, we cannot include joint adoptions in this study.

Medically assisted reproduction

In Denmark and Finland, female couples had access to MAR in private clinics before their right to MAR was confirmed by the law. MAR was available for female couples in Denmark before regulation was introduced in 1997 and again since 1999 at one private clinic in the capital (Fallesen & Jepsen 2025). Some private clinics in the capital region of Finland have given access since 1997 (Evertsson et al. 2020; Moring 2013; Rydström 2011). MAR was prohibited for female couples by law in all clinics in Sweden until 2005 (Moring 2013; Rozental & Malmquist 2015; Ryan-Flood 2009). MAR was also unavailable for female couples in Norway until 2009 (Jetha 2023). To access MAR, couples from Sweden and Norway traveled to Denmark or Finland (Dahl & Andreassen 2023; Moring 2013; Rydström 2011). At the same time, various informal versions of assisted inseminations have been common among same-sex couples well before (and after) these reforms (Weston 1991).

The laws granting access to MAR within the public healthcare system entered into force in 2005 in Sweden, 2007 in Denmark, 2007 in Finland, and 2009 in Norway. As a result, the Nordic countries, except for Finland, began to provide MAR for female couples as part of tax-funded public healthcare. MAR has been accessible to female couples regardless of their legal marital status. There is, however, variation in how many cycles of different treatments are offered and reimbursed and for how many children (Rozental & Malmquist 2015). The practical availability of public healthcare also depends, for instance, on geographic location, age regulations, the availability of donated sperm, and the practices of the healthcare sector (Dahl & Andreassen 2023). In Denmark, female couples had access to all public and private clinics from 2007 onwards (Fallesen & Jepsen 2025). In Norway, long distances have posed challenges to the accessibility of publicly funded MAR, as only one hospital in the capital city of Oslo, and intermittently another hospital in the southern part of the country, offered MAR to female couples until the 2020s, when more hospitals in other regions began providing such services (e.g., Gronstad 2012; Vold 2024). In Sweden, the handling of donated gametes was restricted only to public clinics until 2019, which limited the services for female couples at such clinics (Justitiedepartementet 2018; Rozental & Malmquist 2015). As in Norway (Lilleeng et al. 2022), the scarcity of donated gametes has led to long queues in Sweden, which pushed couples to seek services abroad, and also in private clinics since 2019 (Dahl & Andreassen 2023; Leibetseder 2018; Rozental & Malmquist 2015). In Finland, female couples have had access to MAR in some private clinics in the capital region since 1997 and, since their right to MAR was legally confirmed in 2007, in all private clinics (Kuosmanen 2007; Moring 2013). Public clinics only started to offer MAR to female couples from the end of 2019 (Evertsson et al. 2020).

Co-mother recognition

With laws allowing co-mother recognition, both women in a same-sex couple can be recognized as legal parents of their child without the second-parent adoption procedure if the child is born as a result of MAR (Eeg 2017; Maternity Act 2018; Social- og Boligministeriet 2024; Ytterberg 2017). Sweden and Norway introduced co-mother recognition concurrently with the laws granting access to MAR in 2005, 2006, and 2009, correspondingly, whereas it became possible later in Denmark in 2013 and in Finland in 2019 (Evertsson et al. 2020). Co-mother recognition is possible regardless of the legal status of the partnership. Cohabiting female couples have been able to share the legal parenthood of their child since the introduction of the laws (Eeg 2017; Maternity Act 2018; Social- og Boligministeriet 2024; Ytterberg 2017). This arrangement has been argued to not contribute to a link between legal union and childbearing in the way that second-parent adoption does (Kolk & Andersson 2020).

Data

We use individual-level register data from Denmark, Norway, Sweden, and Finland. Through personal identification numbers, individuals are linked to their civil status information, children, and other demographic and socioeconomic characteristics. Same-sex couples are identified based on individuals' marital status and legal sex. Our data include female couples who registered their partnerships or married in Denmark between 1989 and 2018, in Norway between 1993 and 2018, in Sweden between 1995 and 2016, and in Finland between 2002 and 2016. The periods begin with the first year when registered partnerships were introduced in the country and end with the year after which we still have five years of data for a follow-up of childbearing after the legal union.

We restrict the analytical datasets of same-sex couples according to residence, union order, and age. First, we exclude couples in which either spouse was registered as living abroad at the time of the legal union formation to focus on couples in the legal contexts of the Nordic countries. Second, we exclude couples in which either spouse was previously in a legal union of the same type (a previous same-sex union for same-sex couples). Third, we exclude couples in which the youngest spouse was 45 years or older at the time of the legal union formation. Our analytical datasets consist of altogether 11,170 female couples: 3,613 couples from Denmark, 3,214 couples from Sweden, 2,412 couples from Norway, and 1,931 couples from Finland. We compare females couples' childbearing with different-sex couples who married in the same period. We applied the same exclusion criteria for different-sex couples as for same-sex couples, with the difference that we excluded couples in which the woman was 45 years of age or older in the marriage year. Our analytical datasets of different-sex couples include altogether 1,766,778 couples: 539,400 couples from Denmark, 436,724 from Sweden, 529,757 from Norway, and 260,897 from Finland.

We use administrative records on spouses' education and income levels in our analyses of the socioeconomic differences in childbearing. The educational level of a couple is defined as the highest level of education obtained by either spouse by the end of the year of the legal union formation. The couples are categorized into three educational groups according to the International Standard Classification of Education (ISCED). Low education includes primary and lower-secondary education or less (ISCED 0–2), medium education refers to upper-secondary education (ISCED 3–4), and high education consists of tertiary levels (ISCED 5–8). Low education includes missing cases that comprise education completed abroad and not recorded in the national registers of the countries, except for Sweden where the information on education completed abroad is systematically collected. The income level of a couple is defined based on the combined personal taxable earnings of spouses in the year of the legal union formation, adjusted for inflation (to 2015 levels). For Norway, we use the combined personal earnings of spouses after taxes. Couples are grouped into income tertiles, which are formed using the combined population of female couples and different-sex couples in each country.

Methods

We assess the probability of having a child within five years of partnership registration or marriage formation using the Kaplan-Meier estimator. Couples are considered at risk of having a child from the month of entering a legal union until the month of divorce, emigration, death of either partner, or until the end of the five-year follow-up time, whichever comes first. The five-year follow-up periods cover data until the end of 2021 in Sweden and Finland and 2023 in Denmark and Norway. If a same-sex couple converts their registered partnership into a marriage during the follow-up time, this is treated as a stable union in the analysis. All analyses are performed separately for each country, female couples, and different-sex couples. To ensure a sufficient number of observations for the analyses, some yearly marriage cohorts are combined in the Norwegian datasets, as well as in the analyses by educational and income levels across all countries. These groupings differ by country and are indicated in our results figures.

First, we present a descriptive figure showing the proportion of couples in which at least one spouse already had a child by the time of the legal union formation, according to the year of the union formation. Prior children are defined as any children born before the legal union formation, as we cannot separate children born to couples before they have legalized their union from children born within previous relationships. Second, we assess the likelihood of having a child in the first five years following the legal union formation by the year of entering the legal union. Having a child is defined as the birth of a biological child. If both women in same-sex unions gave birth to a child within the follow-up period, the birth of the first child is counted as the outcome. Third, we analyze the likelihood of having a child in the first five years following the legal union formation by educational level. Lastly, we assess the likelihood of having a child by income tertiles.

Results

The sociodemographic characteristics of couples in our data are described in Table 1. In all the countries, women in same-sex couples were on average older than individuals in different-sex couples. Among female couples, the younger spouse was, on average, 30.5 years of age in Finland, 31.0 in Denmark, 31.5 in Sweden, and 31.8 in Norway at the time of their legal union formation. The average ages of the younger spouses in different-sex couples were 28.5 years in Finland, 29.1 in Denmark, 29.9 in Sweden, and 30.2 in Norway. The average ages of the older spouses in female couples varied between 35.0 years in Finland and 36.2 in Sweden and Norway, and the average ages of the older spouses in different-sex couples varied between 30.6 years in Finland and 34.5 in Norway.

To address compositional differences between female couples and different-sex couples in terms of age, we provide the average ages of the younger and older partners over time by the year of legal union formation in Appendix Figure A1. The figure shows that younger and older partners in female couples were clearly older than younger and older partners in different-sex couples in the first union cohorts in all four countries, but the ages have converged to near exact parity with different-sex couples over time, with the partial exception of Finland. Individuals in female couples were more highly educated than those in different-sex couples. Female couples were more likely to include at least one spouse with a tertiary degree in all the countries. The share of such couples was 44.6% (vs. 29.9% in different-sex couples) in Denmark, 59.8% (vs. 56.5%) in Finland, 72.0% (vs. 53.9%) in Norway, and 72.2% (vs. 60.5%) in Sweden. Also, the share of low-educated couples was lower among female couples than among different-sex couples, varying between 2.3% (vs. 2.9% in different-sex couples) in Sweden and 21.5% (vs. 25.3%) in Denmark. The mean total income of spouses was slightly lower among female couples than different-sex couples in the Nordic countries except Norway, where it was slightly higher.

<Table 1>

Figure 2 shows the proportions of couples of whom at least one spouse was a parent at the time of the legal union formation. In all the countries studied, female couples were less likely than different-sex couples to have a prior child by either spouse. Among the first union cohort of each country, the proportions of such female couples were 14.1% (vs. 57.3% in different-sex couples) in Norway, 20.0% (vs. 45.4%) in Denmark, 27.5% (vs. 50.6%) in Sweden, and 28.5% (vs. 34.6%) in Finland. These proportions for female couples have increased over time in Norway and Denmark and remained relatively stable in Sweden and Finland. Among the last union cohort of each country, the proportions of female couples who had a prior child were 30.8% (vs. 58.3%) in Norway, 32.2% (vs. 53.7%) in Denmark, 31.4% (vs. 57.7%) in Sweden, and 28.5% (vs. 40.4%) in Finland.

<Figure 2>

Figure 3 shows the likelihood of having at least one child in the first five years following the legal union formation by the year of the legal union formation. Female couples' likelihood of having a child was low among the first union cohorts: 2.5% (vs. 62.8% among different-sex couples) in the union cohort of 1989 in Denmark, 0% (vs. 65.1%) in the union cohort of 1995 in Sweden, 8.5% (vs. 68.6%) in the union cohort of 1993–1996 in Norway, and 13.2% (vs. 69.1%) in the union cohort of 2002 in Finland. The likelihood was highest among couples who entered legal unions around the turn of the 2000s and 2010s in Denmark, Sweden, and Norway and later in the 2010s in Finland. At its highest, the likelihood was 64.1% (vs. 66.9% among different-sex couples in the same cohort) in the 2012 cohort in Denmark, 59.8% (vs. 60.6%) in the 2009 cohort in Sweden, 54.2% (vs. 54.3%) in the 2012 cohort in Norway, and 52.7% (vs. 62.5%) in the 2015 cohort in Finland. The likelihoods were lower in the last union cohorts studied than in the peak years, as they were 54.6% (vs. 66.1% among different-sex couples) in the 2018 cohort in Denmark, 54.2% (vs. 59.1%) in the 2016 cohort in Sweden, 51.9% (vs. 56.8%) in the 2018 cohort in Norway, and 49.7% (vs. 61.7%) in the 2016 cohort in Finland. In general, the likelihood of having a child as a female couple has been higher in Denmark and Sweden than in Norway and Finland during our study period.

<Figure 3>

The results indicate that childbearing has become increasingly common among female couples, while the likelihood of childbearing has remained stable or declined among married different-sex couples in all the studied countries. We found a strong increase in female couples' likelihood of having a child over time, which has resulted in convergence with different-sex couples in Denmark, Sweden, and Norway at the turn of the 2000s and 2010s. Since then, female couples' childbearing has stabilized at similar levels or slightly declined. Finland has diverged from the other countries in this development as female couples' likelihood of having a child has increased later and more modestly, and it has not reached the same likelihood of different-sex couples by the end of our study period. The corresponding increase has also been more modest in Norway than in Denmark and Sweden, but still, the convergence has occurred in Norway because different-sex couples' likelihood of having a child has declined more than among their counterparts in the other countries.

To better understand the childbearing patterns of female couples in the Nordic countries, Figure 3 indicates the years when each country legalized second-parent adoption, female couples' access to MAR, co-mother recognition at the child's birth, and same-sex marriage (shown as vertical lines). As our follow-up period for childbearing is up to five years from the start of the union, couples who started their union from zero to five years before the reform were eligible. The results indicate a strong increase in childbearing among female couples around the time of the second-parent adoption legislation in all four countries. There also appear to be changes in the behavior of female couples following MAR legislation in Finland and MAR and co-mother legislations in Sweden, whereas the increases in childbearing in Denmark and Norway are not directly attributable to the timing of corresponding legal changes. In Sweden, the likelihood of having a child increased especially strongly among couples who entered legal unions in 2003, the year when second-parent adoption became legal for same-sex couples, and in 2005, the year when MAR and co-mother recognition were legalized. In Finland, a similar sharp rise can be observed among couples who entered legal unions in 2007, the year when female couples' right to MAR was legally confirmed.

The likelihood of having a child among female couples varied by the highest educational level of either spouse, as shown in Figure 4. We found an educational gradient in childbearing among female couples in all the Nordic countries: A higher educational level was associated with a higher likelihood of having a child. There were no clear educational gradients in childbearing in the first union cohorts because the likelihood of having a child was low across all educational groups. Educational gradients emerged among couples who entered legal unions in the early 2000s in Denmark, Sweden, and Norway and in the late 2000s in Finland. We observed larger educational differences in childbearing among female couples in Finland and Sweden compared to Denmark and Norway. In Finland, the educational differences were largest in the 2011–2013 cohort when the likelihood of having a child was 4.0% among female couples with low education, 29.6% among couples with medium education, and 52.1% among couples with high education. In Sweden, the corresponding likelihoods were 0%, 46.1%, and 59.9% when the differences were largest in the most recent 2014–2016 cohort. In Denmark, the educational differences were largest in the 2016–2018 cohort when the likelihood of having a child was 30.2% among low-educated couples, 56.2% among medium-educated couples, and 62.8% among highly educated couples. The results for Norway include only highly and medium-educated couples due to a small number of observations in the low-education group. The difference between these two groups was largest in the 2017–2018 cohort when the likelihood of having a child was 27.3% among medium-educated couples and 61.2% among highly educated couples. Among different-sex couples, those with high education were more likely to have a child than other couples, but the likelihood of having a child did not differ between medium-educated and low-educated couples for most of the observation period in the other countries except in Denmark.

<Figure 4>

The educational differences in childbearing varied during our observation period. The likelihood of having a child increased equally in all educational groups of female couples in the first years of our study period, but the educational groups later diverged, particularly in Finland and Sweden. In Finland, the educational differences became larger over time as the likelihood of childbearing declined among low-educated couples since the late 2000s, while it continued to increase in other educational groups. Similar development occurred in Sweden where the likelihood of having a child dropped among low-educated couples who entered legal unions in the early 2010s, while the likelihood stabilized or continued to increase in other educational groups. In Denmark, the educational gradient appeared in the early 2000s as the likelihood of having a child increased more steadily among highly educated couples than among low-educated couples. In Norway, the likelihood of having a child increased equally among highly and medium-educated couples, and the difference between the groups only emerged in the latest union cohort of 2017–2018 due to a sharp increase in childbearing among highly educated couples and a drop among low-educated couples. Educational differences in childbearing among different-sex couples were more stable compared to female couples. In Sweden, however, the gradient changed between medium-educated and low-educated couples in the early 2000s.

We found that the likelihood of having a child among female couples differed less by income level than by educational level (Figure 5). We did not find an income gradient in the likelihood of having a child among female couples in Denmark, whereas we found some evidence of income differences in the other countries. In Finland and Sweden, the likelihood of having a child was about the same across income groups in the first union cohorts, but female couples with low income appeared less likely to have children than couples with higher income in the two most recent union cohorts, especially in the most recent one. In the 2014–2016 cohort in Finland, the likelihood of childbearing was 32.4% among low-income couples, 51.1% among medium-income couples, and 57.2% among high-income couples. In Sweden, the corresponding likelihoods were 42.4%, 62.8%, and 58.2% in the same union cohort. In Norway, female couples with low income appeared slightly less likely to have children than couples with higher income in all union cohorts. The differences were at their largest in the union cohort of 2014–2016 when the likelihood of having a child was 26.0% among low-income couples, 44.6% among medium-income couples, and 54.2% among high-income couples. Among different-sex couples, higher income was associated with a higher likelihood of having a child in the countries other than Denmark where the income gradient was the opposite. Also, in Sweden, the income gradient was the opposite among the two most recent union cohorts.

<Figure 5>

The results indicate that childbearing trends have been relatively similar across income groups over time, as the likelihood of having a child has increased at the same pace in all groups, except for female couples with low income in Finland and Sweden. In Finland, low-income couples diverged from the other couples at the turn of the 2000s and 2010s when their likelihood of having a child stabilized, while it continued to increase in groups with higher income. In Sweden, the divergence occurred around the same years, but it resulted from a decline in childbearing among low-income couples and continued to increase or stabilize in childbearing in other groups. In Denmark and Norway, childbearing increased steadily across all income groups over our observation period. In Norway, however, income differences prevailed as the likelihood among low-income couples was lower than in the other groups. Among different-sex couples, income differences in childbearing were more stable than among female couples. In Sweden, however, the income gradient changed at the turn of the 2000s and 2010s after a period of decline in childbearing among high-income couples from initially being the highest levels to the lowest.

Discussion

We provided a comparative cross-country perspective on recent childbearing trends among female couples in the Nordic countries, as the first study so far. We demonstrated strong increases in female couples' childbearing within their legal unions over time. This is the first study to show that increases in female couples' childbearing, which have also been observed in prior research (e.g., Andersson & Noack 2010; Kolk & Andersson 2020; Ponkilainen et al. 2024), have led to a full convergence of female couples' and different-sex couples' likelihoods of having children in Denmark, Sweden, and Norway at the turn of the 2000s and 2010s. The finding suggests that legal and social changes have reduced female couples' barriers to parenthood to the extent that the previously significant differences in childbearing with different-sex couples have disappeared. Finland showed a similar but later development, likely explained by later legislative changes and more restricted access to MAR. We observed the most pronounced increases in childbearing among female couples in Denmark and Sweden, which are often ranked ahead of Finland and Norway in terms of public acceptance of sexual minorities and their families (Andersen & Fetner 2008; Pew Research Center 2018; Waaldijk 2020). The strong increase in female same-sex childbearing is notable for having taken place in a context of otherwise falling fertility (Hellstrand et al. 2021).

The childbearing trends of female couples have been relatively simultaneous across the Nordic countries, even though legal changes related to same-sex parenthood have taken place at different times. This indicates that national legal context was less important for the behavior of female couples than wider societal change, i.e. improved public attitudes and a more supportive social environment for same-sex parenthood, in the Nordic region. Legal reforms in the Nordic region as a whole may also have affected female couples' behavior, given that female couples could travel to other Nordic countries when MAR was not yet available in their own country (Dahl & Andreassen 2023; Digoix 2020). However, we observed clear increases in their childbearing following the second-parent adoption legislation in all four countries. The finding highlights the importance of this legal change, as it made same-sex parenthood legally possible. We also observed increases in childbearing following MAR legislation in Finland and MAR and co-mother legislation in Sweden. The results for Sweden align with the prior work by Kolk and Andersson (2020) who showed increased rates of female couples having children at the time of getting legal rights to MAR and second-parent adoption.

This is the first study to show that the increases in the likelihood of childbearing stagnated among female couples who entered legal unions since the end of the 2000s in the other Nordic countries, but in Finland it continued to increase. One possible explanation for the stagnation is that childbearing among female couples reached a saturation point, reflecting couples' improved opportunities to realize their parental intentions. Also, increased opportunities to share legal parenthood of a child outside a legal union may have decreased parenthood-related incentives for legal union formation among female couples. The stagnation might reflect increasing childbearing outside legal unions, which we cannot capture in our study. Female couples have been able to share the legal parenthood of their child in nonmarital cohabiting unions in Sweden since 2005, in Norway since 2009, and in Denmark since 2013. In Finland, the corresponding law was not enforced until 2019, which affects only the two last years of our study period.

It is worth noting that the convergence of female couples' and different-sex couples' likelihoods of having children in Denmark, Sweden, and Norway might be partly explained by compositional differences between the couple types, given that women in same-sex couples are more highly educated and older than individuals in different-sex couples. However, we observed a strong convergence in ages at the time of legal union formation between the couple types, and the age differences largely dissapeared by the end of the observation period. Importantly, as we showed, previous childbearing differs between female couples and differen-sex couples, where different-sex couples more often have children before entering a legal union.

We found that higher education was associated with a higher likelihood of having a child in all the Nordic countries. This finding aligns with prior studies for Sweden and Finland (Boye & Evertsson 2021; Ponkilainen et al. 2024) and is novel for other Nordic countries. Several possible factors might explain the educational gradient in childbearing among female couples. First, more highly educated female couples might be in a better position to act against heteronormative expectations and deal with stigmas related to same-sex parenthood (Goldberg 2009; Mezey 2008). Second, higher education might help couples navigate medical and legal systems related to childbearing more effectively (Bell 2016; Mamo 2007; Mezey 2013; Moore 2011). Third, related to the previous point, our results might reflect previously observed educational differences in MAR usage among women in general, as well as in countries where MAR is offered in publicly funded healthcare (Brautsch et al. 2023; Goisis et al. 2020; Seiz et al. 2023). Educational differences were especially large in Finland, which is likely explained by female couples' restricted access to MAR only in private clinics until the end of 2019, as highly educated couples may be more likely to use private healthcare (Goisis et al. 2024). Fourth, these differences may be related to changes in values and adoption of novel behaviors, with highly educated people often observed to be early adopters (Lesthaeghe 2010).

Educational differences in childbearing seem to have widened over time because low-educated couples have been left behind by couples with higher education. We find it likely that educational differentiation in childbearing among female couples partly reflects wider development in the Nordic countries where childlessness has become more common among low-educated women in more recent cohorts (Jalovaara et al. 2019). Previous research has provided several explanations for this development, including the increased importance of having sufficient socioeconomic resources to sustain a family and uncertainty related to more fragile labor market positions among low-educated individuals (Comolli et al. 2020; Hellstrand et al. 2024; Jalovaara et al. 2019). Also, the general expansion of education has diminished the size and changed the composition of the low-educated groups in the Nordic countries, and their childbearing behavior might partly reflect increasingly negative selection into this educational category (Jalovaara et al. 2019; Kravdal & Rindfuss 2008).

We found that the likelihood of having a child among female couples differed less by income level than by educational level. We did not find an income gradient in the likelihood of having a child among female couples in Denmark, whereas we found some evidence of income differences in the other Nordic countries. Boye and Evertsson (2021) previously found an association between higher income and a higher likelihood of having a child among female couples in Sweden. In general, childbearing trends have been relatively similar across income groups, except for low-income couples in Finland and Sweden. This may be related to the provision of MAR, as part of publicly funded healthcare at minimal cost has made MAR equally accessible regardless of financial resources in the Nordic countries. Finland was the only country that showed a clear income gradient in childbearing, which is likely explained by the unavailability of publicly funded MAR until the end of 2019. The costs associated with MAR in private clinics are high, and unlike different-sex couples, female couples have not been eligible for reimbursement for the costs by the Social Insurance Institution of Finland (Rainbow Families Finland 2024). It is likely that, similar to different sex couples, there is large socioeconomic selection into legal unions among female couples, and that in analyses not conditional on marriage there would be larger differences by income, as among different sex couples (Kolk 2025).

Strengths and limitations

The key strength of our study is the cross-country harmonized register data that include all female couples who have entered legal unions from the first year of legalization of registered partnerships until recent years. This kind of comparative high-quality data is unique in research on same-sex couples. Furthermore, our data allowed us to study differences between socioeconomic subgroups of female couples, which is rare in the datasets of same-sex couples because it requires a sufficient number of couples representing socioeconomic diversity (Festy 2007; Reczek 2020).

Despite the strengths of our data, there are also disadvantages. For instance, we have no direct information on individuals' subjective perceptions, such as their sexual orientation, gender identity, or parental desires. From this follows that we can only study female couples who have registered their partnership or got married. Thus, our study excludes a substantial segment of female couples and lesbians who live in nonmarital cohabiting unions, dating relationships, other forms of non-registered relationships, or alone. Given that legal changes have eased parenthood for nonmarital female couples during our study period, female couples might increasingly have children outside of legal unions, which affects the composition of couples in our data and, thus, our results. In other words, we study an increasingly selected group of couples who have decided to formalize their partnership. This may be particularly true for different-sex couples, among whom marriage rates are declining and the prevalence of nonmarital unions is increasing (Smock & Schwartz 2020). Hopefully, it might be possible to study childbearing among same-sex cohabiting couples in future studies if they could be reliably inferred in the Nordic register data. Similarly, more data sources that include information on sexual orientation are needed in the Nordic countries to better understand selection into legal unions among lesbians and gays. We also leave the important task of documenting parenthood among male same-sex couples to future research.

Conclusions

Our study is the first to show that the previously significant differences in childbearing between female couples and different-sex couples in legal unions have largely disappeared, highlighting how social and legal changes have enabled same-sex parenthood in the Nordic countries. This finding can be seen as a success story of effective legislative and broader societal change that has reduced inequality between the majority population and sexual minority groups. Childbearing trends among female couples have been relatively similar across the Nordic countries, but socioeconomic inequalities in childbearing have been less pronounced in Denmark and more so in Finland than in the other countries. Recent legal changes have reduced the importance of a legal union as the context of childbearing among female couples, but the family life of nonmarital cohabiting same-sex couples is still a highly understudied topic in the current literature. More reliable data and research are needed to gain a more comprehensive understanding of the current union formation patterns and childbearing among female couples across socioeconomic groups. More research on the more complex topic of childbearing among male couples is also urgently needed.

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Tables and Figures

Table 1. Characteristics of female same-sex couples (FSSC) and different-sex couples (DSC) who have entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.[a]

	Denmark		**Sweden**		**Norway**		**Finland**	
	1989–2018		1995–2016		1993–2018		2002–2016	
	FSSC N=3,613	DSC N=539,400	FSSC N=3,214	DSC N=436,724	FSSC N=2,412	DSC N=529,757	FSSC N=1,931	DSC N=260,897
Age (years, mean)								
Younger spouse	31.0	29.1	31.5	29.9	31.8	30.2	30.5	28.5
Older spouse	35.7	33.5	36.2	33.8	36.2	34.5	35.0	30.6
Education (%)[b]								
Low	21.5	25.3	2.3	2.9	5.9	13.6	6.6	4.2
Medium	33.8	44.8	25.5	36.6	22.1	32.5	33.7	39.4
High	44.6	29.9	72.2	60.5	72.0	53.9	59.8	56.5
Income (€, mean)[c]	79,800	84,000	44,900	45,400	66,700	59,400	55,500	57,100
(PPP-adjusted income)[d]	(62,800)	(66,100)	(36,200)	(36,600)	(41,700)	(37,100)	(50,900)	(52,300)

[a] Both spouses resided in the country when entering the legal union, the union was the first of that union type for both spouses, and the younger spouse in the same-sex couples and the woman in the different-sex couples were younger than 45 years of age.
[b] The highest educational level completed by either spouse by the end of the year of the legal union formation.
[c] Combined personal taxable earnings of spouses in the year of the legal union formation. For Norway, earnings after taxes.
[d] Adjusted for purchasing power parity (PPP) based on the 2015 index levels.

Figure 1. The legislative development of same-sex couples' family rights in Denmark, Norway, Sweden, and Finland.

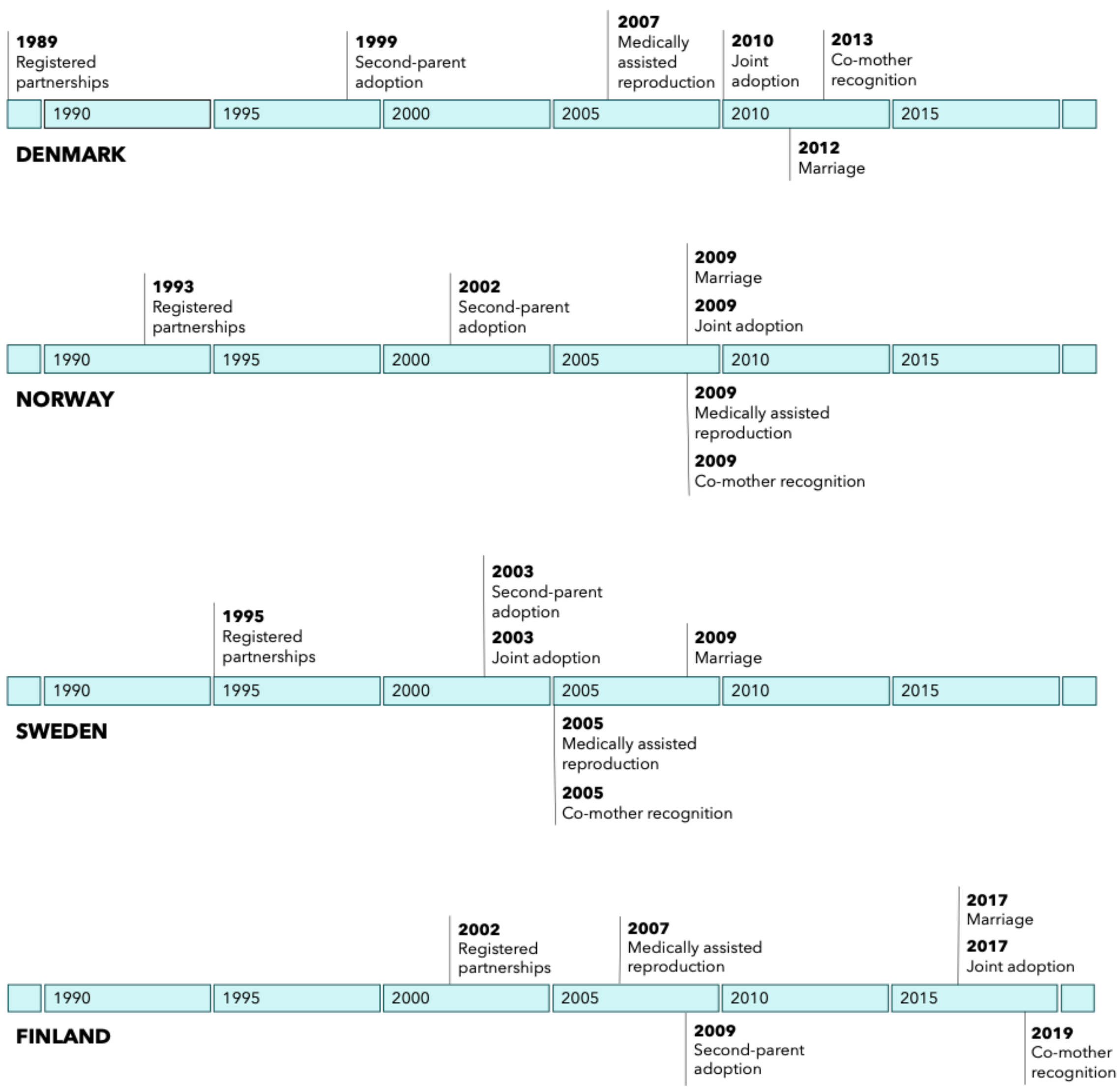


Figure 2. Annual proportions of couples in which at least one spouse was a parent at the time of the legal union formation. Female couples and different-sex couples who entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.

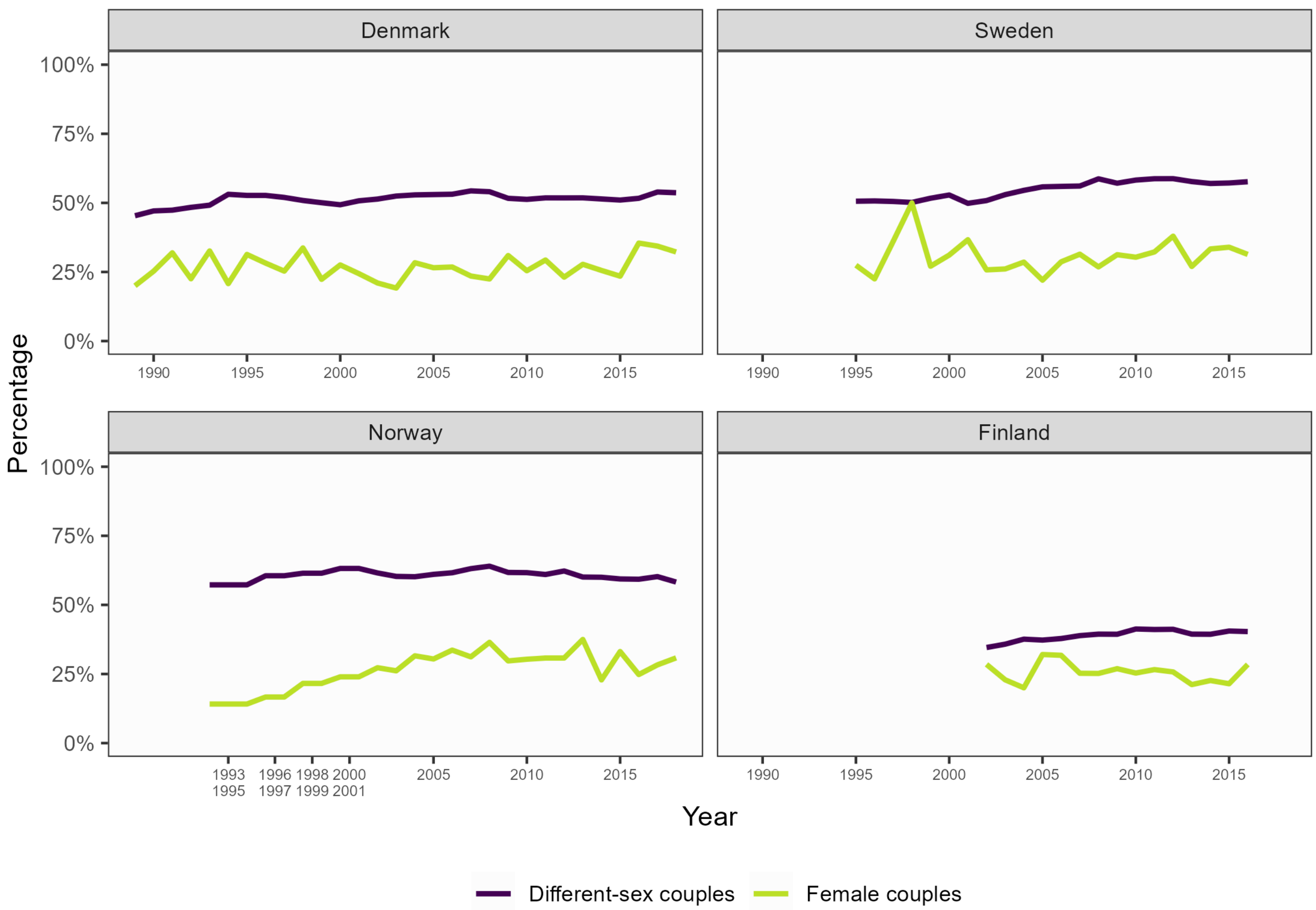


Figure 3. Probability of having at least one child in the first five years following the legal union formation by the year of the legal union formation. Female couples and different-sex couples who entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.

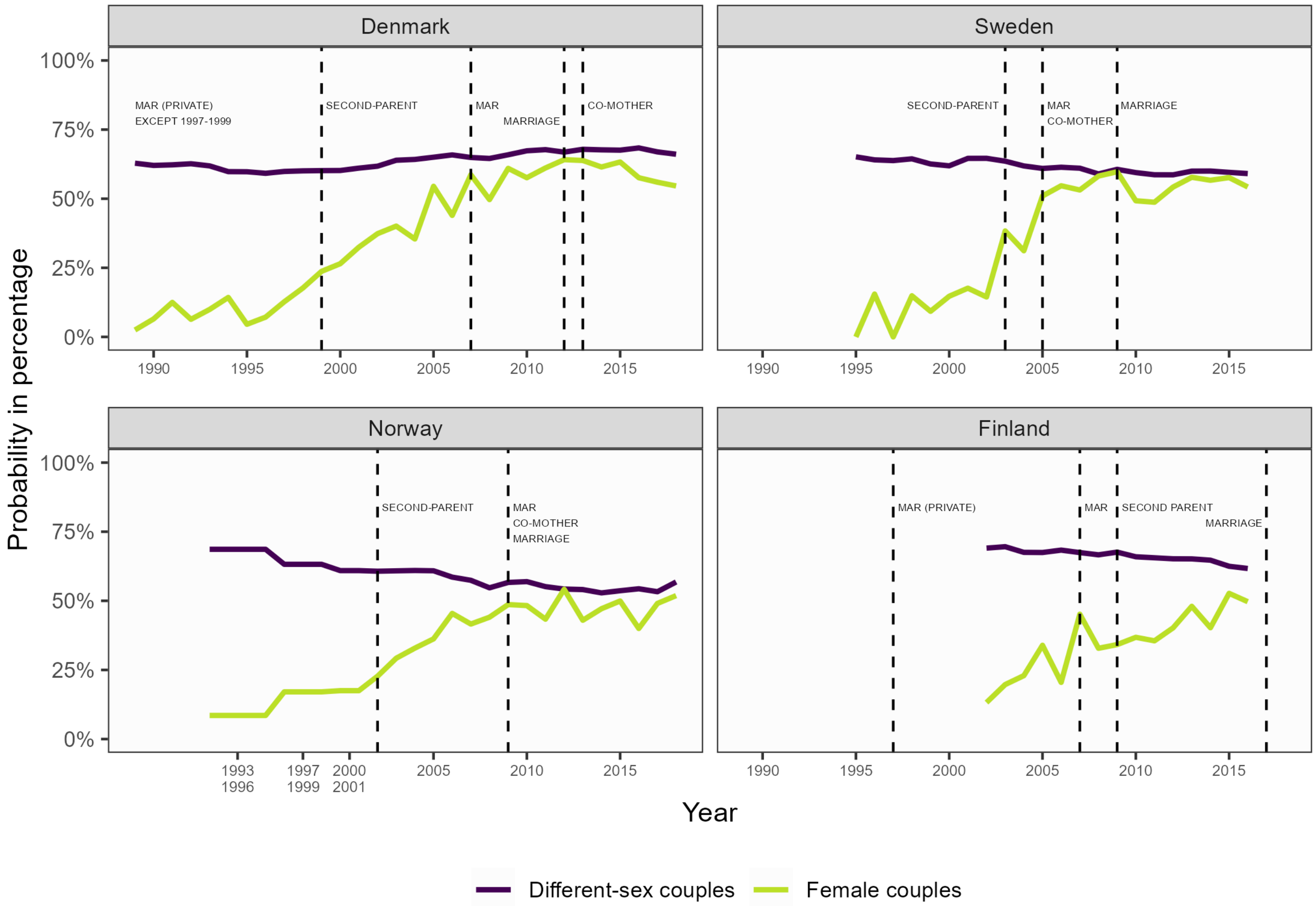
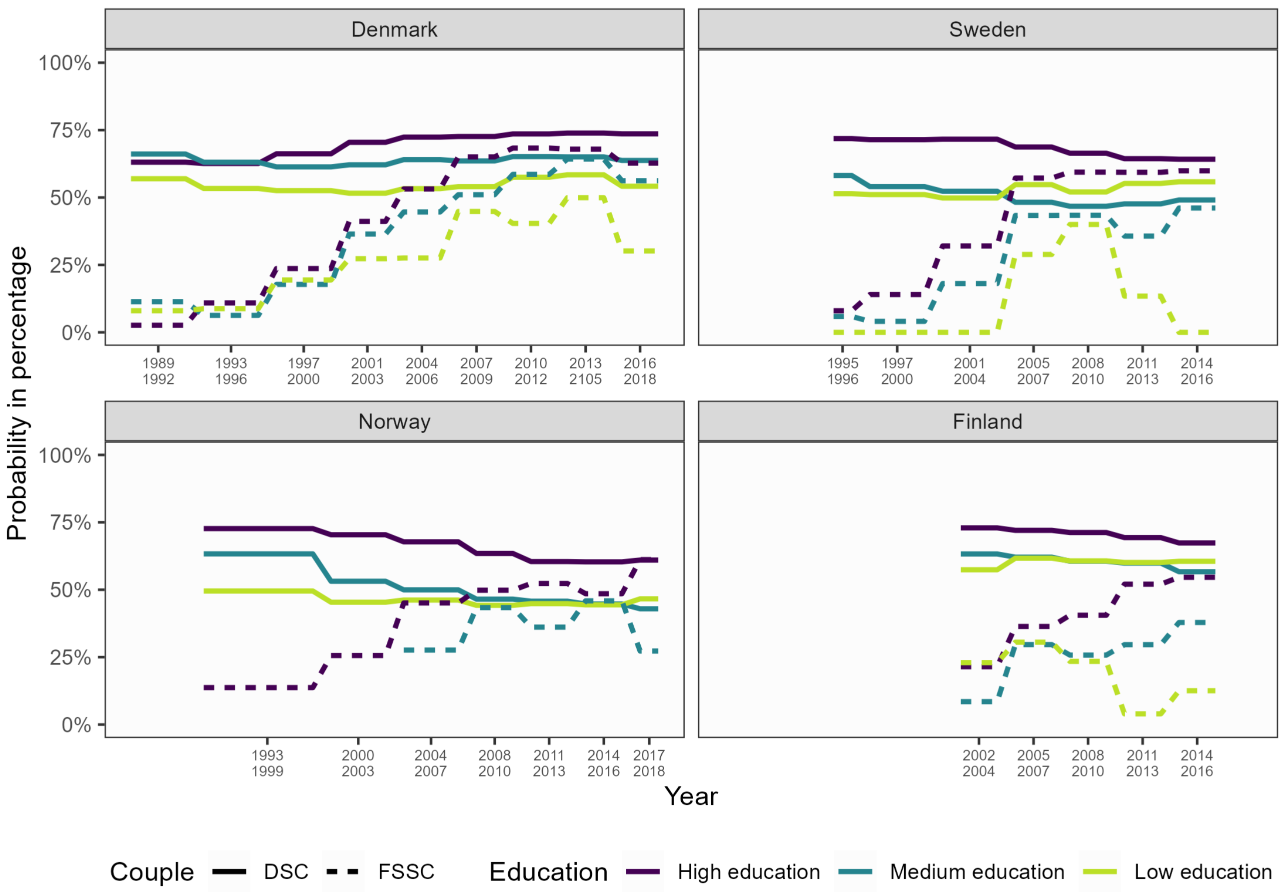
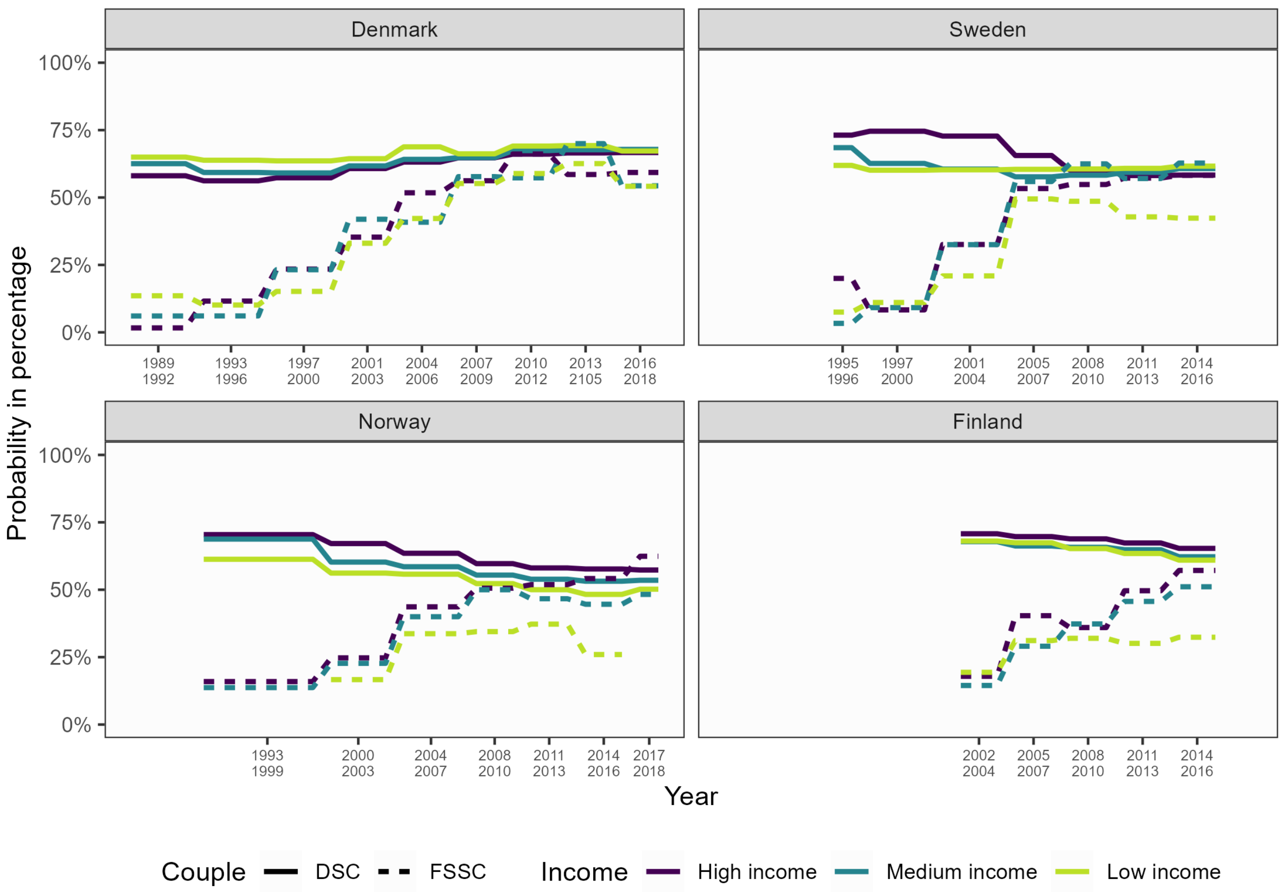


Figure 4. Probability of having at least one child in the first five years following the legal union formation by the year of the legal union formation and the highest educational qualification completed by either spouse. Female couples and different-sex couples who entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.



Note: FSSC = female same-sex couples, DSC = different-sex couples. Low education = primary and lower-secondary education or less (ISCED 0–2), medium education = upper-secondary education (ISCED 3–4), high education = tertiary levels (ISCED 5–6).

Figure 5. Probability of having at least one child in the first five years following the legal union formation by the year of the legal union formation and income tertile. Female couples and different-sex couples who entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.



Note: FSSC = female same-sex couples, DSC = different-sex couples. Income refers to income tertiles of the combined personal taxable earnings of the spouses in the year of the legal union formation. For Norway, earnings after taxes.

Supplementary Material

Figure A1. The average ages of the younger and older partners in female same-sex couples (FSSC) and different-sex couples (DSC) over time by the year of the legal union formation. Couples who entered legal unions in Denmark in 1989–2018, in Sweden in 1995–2016, in Norway in 1993–2018, and in Finland in 2002–2016.