

Family violence against gay and lesbian adolescents and young people: a qualitative study

Violência familiar contra adolescentes e jovens gays e lésbicas: um estudo qualitativo
Violencia familiar contra adolescentes y jóvenes gays y lesbianas: un estudio cualitativo

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ABSTRACT

Objective: To analyze the experiences of gay and lesbian adolescents and young people in the process of revealing sexual orientation to their families. **Method:** A qualitative study carried out in a city in the state of São Paulo. Twelve gay and lesbian adolescents and youngsters participated. For the data collection, the semi-structured interview was used and data analysis was performed using the method of interpretation of the senses. **Results:** The family reactions in the process of “coming out of the closet” of the participants were violent, with persecution and even expulsion from home, in addition to the repression of expressions of homoerotic experiences, which impacted on their health and quality of life. **Final considerations:** The family is an essential component of the support network, but also a space that can generate and reproduce forms of violence in the name of heteronormativity. Health services should develop care practices and care for the family and adolescent and homosexual youth victim of violence.

Descriptors: Young Adult; Homosexuality; Family Relationships; Homophobia; Adolescent Health.

RESUMO

Objetivo: Analisar as experiências de adolescentes e jovens gays e lésbicas no processo de revelação da orientação sexual às suas famílias. **Método:** Estudo qualitativo realizado em uma cidade do interior paulista. Participaram 12 adolescentes e jovens gays ou lésbicas. Para a coleta dos dados utilizou-se a entrevista semiestruturada e a análise dos dados ocorreu por meio do método de interpretação dos sentidos. **Resultados:** As reações familiares no processo de “saída do armário” dos participantes foram violentas, com perseguições e até a expulsão de casa, além da repressão das expressões das vivências homoeróticas, o que impactou na saúde e qualidade de vida dos mesmos. **Considerações finais:** A família é componente essencial da rede de apoio, mas também espaço que pode gerar e reproduzir formas de violência em nome da heteronormatividade. Serviços de saúde devem desenvolver práticas de cuidado e atenção à família e ao adolescente e jovem homossexual vítima de violência.

Descritores: Adulto Jovem; Homossexualidade; Relações Familiares; Homofobia; Saúde do Adolescente.

RESUMEN

Objetivo: Analizar las experiencias de los adolescentes y jóvenes gays y lesbianas en el proceso de revelación de la orientación sexual a sus familias. **Método:** Estudio cualitativo realizado en una ciudad del interior de São Paulo. Participaron 12 adolescentes y jóvenes gays o lesbianas. Para la recolección de los datos se utilizó la entrevista semiestructura y el análisis de los datos ocurrió por medio del método de interpretación de los sentidos. **Resultados:** Las reacciones familiares en el proceso de “la salida del armario” de los participantes fueron violentas, con persecuciones e incluso la expulsión de casa, además de la represión de las expresiones de las vivencias homoeróticas, lo que impactó en la salud y calidad de vida de estas personas. **Consideraciones finales:** La familia es componente esencial de la red de apoyo, pero también espacio que puede generar y reproducir formas de

violencia en el nombre de la heteronormatividad. Los servicios de salud deben desarrollar prácticas de cuidado y atención a la familia y al adolescente y joven homosexual víctima de violencia.

Descritores: Adulto Joven; Homosexualidad; Relaciones Familiares; Homofobia; Salud del Adolescente.

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INTRODUCTION

This study sought to understand the experiences of gay and lesbian adolescents and young people in the process of revealing sexual orientation to their families. International studies show that how the family reacts to the disclosure of sexual orientation influences the quality of life and health of gays and lesbians, for example, negative reactions of family members are associated with lower social support and higher incidence of health problems such as anxiety, depression, suicidal ideation, and excessive alcohol consumption⁽¹⁻³⁾. It is not, therefore, a process restricted to the individual field of people, but it involves the collectivity and, consequently, the professionals and health services that serve the LGBT population. The lack of specific knowledge about this public and the violence they suffer can make it difficult to provide health care for them or their families. Thus, empirical studies on the subject can broaden the understanding of professionals and health teams, which has repercussions on the quality of care offered by them.

It should be noted that adolescence and youth correspond to social, cultural, political-economic, territorial and relational processes and constructions that, during different periods and historical processes, have acquired certain meanings and conceptions. Both phases are intersected by social markers of difference, such as class, ethnicity, sexuality, and gender⁽⁴⁻⁶⁾. In the case of gay and lesbian adolescents and youth who publicly expose their sexual desires and identifications, discrimination and prejudice increases the vulnerability to which they are generally exposed⁽⁷⁾. In this respect, it is relevant to point out that the social and sexual structure that generates prejudices and discriminatory acts is based on heterosexual and homosexual dualism, but in order to prioritize heterosexuality through a device that naturalizes and at the same time makes it compulsory⁽⁸⁾.

This binary gender division is related to behaviors and attitudes identified with the feminine or the masculine in coherence with the corresponding biological sex. Those who deviate from this norm usually face difficulties to be accepted by society, and may suffer physical, verbal, sexual aggression, bullying, social stigmatization, discrimination in work, family and public services, as well as unequal access to rights such as education and health⁽⁹⁾. The various types of violence that occur in the daily life of those who deviate from the heterosexual norm, aim, among other things, to produce in these subjects compliance with social rules and hierarchies⁽¹⁰⁾. In this context the so-called internalized homophobia can be developed, which refers to the fear of prejudice because the homosexual subject has internalized the social stigma associated with his sexual orientation⁽²⁾. Internalized homophobia can also promote the social isolation of individuals before their peers when they begin to consider negatively other homosexuals, or situations of exclusion and

violence within the LGBT community that, added to the negative reactions of other individuals in the social life of homosexuals, can affect their quality of life and health conditions⁽¹¹⁾.

When lesbian and gay teenagers are vulnerable to receiving negative reactions or suffering violence is when they reveal their sexual orientation to the people they live with. Generally, disclosure is made to friends and family and the reactions of these people, when negative or aggressive, may, in the short or long term, harm the healthy development of homosexual adolescents and young people. A study of 224 young Americans with the goal of understanding family reactions to their children's sexual orientation and gender expression during adolescence and health impacts found that the adverse, punitive, and traumatic effects of family reactions to disclosure homosexual adolescents were eight times more likely to be suicidal, six times more likely to have depression, three times more likely to use illegal drugs, and three times more likely to have unprotected sex compared to homosexual adolescents which were not rejected⁽¹²⁾.

Problems of coexistence and family relationship can also arise when the family does not host or when it demands that the identity and sexual orientation of other people are not revealed. These kinds of reactions can tear homosexual teenagers and young people from their homes involuntarily or are deliberately expelled from home. In situations of non-acceptance or expulsion, the adolescent or young person, in revealing their sexual orientation, has to construct a new family referential from community resources and/or group of friends, since the former is marked by helplessness and lack of support⁽¹³⁾. To this end, adolescents and young people, gays or lesbians need a meaningful social network that welcomes and supports them. A social network is understood as a structure formed by subjects and services through which social support is provided. It is an organization of subject interactions that are considered significant. It establishes the relations of bond and their functions capable of promoting well-being, health and quality of life⁽¹⁴⁾.

Not being able to count on the social support of other people is also an aspect of vulnerability that can be faced by homosexuals when revealing their sexual orientation, since the reactions of the network can also involve incomprehension and/or violence. In this sense, the various changes that have occurred in the last decades have not been able to deconstruct or eliminate the "closet" that is understood as a device for maintaining the secret of homosexual sexuality, involving contradictions and nuances, in which subjects will constantly negotiate their visibility and the acceptability of their desires and intimate life⁽¹³⁾. Given this scenario, family and social support may represent protection, which increases resilience and reduces the impact of homophobia on the health and well-being of homosexual adolescents and young people by revealing their sexual orientation⁽¹⁵⁾.

A study of 257 homosexual adults about the reaction of their relatives when they revealed their sexual orientation identified that, when the relatives rejected the individual, after the revelation, the psychological suffering resulting from the rejection was maintained over several years⁽²⁾. This relationship, however, was mediated by the social support received by the individuals, demonstrating the importance of having a good support network when it is not promoted by the family. Since we consider the family as an important social support network to strengthen ties of protection and to guarantee the rights of adolescents and young people, and in order to respond better to the complexity of the demands aroused by violence, we ask: What is the experience of family and social support for gay and lesbian adolescents and youth when they revealed their sexual orientation to their families? What is the impact of the family reaction on the process of meaning and sense construction for these subjects?

OBJECTIVE

To analyze the experiences of gay and lesbian adolescents and young people in the process of revealing sexual orientation for their families.

METHOD

Ethical aspects

In all stages of the study, the recommendations and guidelines of Resolution 466/2012 on the ethical aspects that regulated research with human beings were followed, and the project was evaluated and approved by the Research Ethics Committee of the Ribeirão Preto School of Nursing Universidade de São Paulo (EERP / USP).

Theoretical and methodological reference

The research is based on concepts derived from the Queer Theory, which emphasizes the centrality of social mechanisms related to the operation of heterosexual and homosexual binarism for the organization of contemporary social life, giving critical attention to a politics of knowledge and difference⁽⁸⁾. At present, a rupture of the sex-nature and gender-culture connection is proposed, suggesting that both sex and gender are cultural representations understood not only by the production and normalization of masculine and feminine, but also by psychic forms and representative that gender assumes⁽¹⁶⁾. In this way, gender is understood as social performances, the repeated stylization of the body, re-signified as a set of repeated acts within a heteronormative regulatory framework and its substantive effect is performatively produced and imposed by the practices of the coherence between sex, gender, desire and practices⁽¹⁶⁾. Thus, the mobilization of Queer thought has turned to the social knowledge and practices that organize society, sexualizing bodies, desires, identities from the binary relationship between heterosexuality and homosexuality⁽⁸⁾.

Type of study

It is a qualitative study.

Methodological procedures

Scenario study

The study was developed in a medium-sized municipality located in the interior of the State of São Paulo.

Data source

Twelve adolescents and/or young men and women, between 14 and 24 years old, participated in the study. The research subjects were selected using the snowball technique, which begins with a participant or a group of participants who successively indicate new subjects to participate in the study, enabling the researcher to immerse themselves in their social circle⁽¹⁷⁾.

The definition of the group of subjects did not privilege the numerical representativeness, but the deepening of the subject, as well as its capacity to perceive the totality of the phenomenon in its various dimensions and in its theoretical deepening⁽¹⁸⁾.

Collection and data organization

Data collection was performed through semi-structured interviews, in which the participants expressed their thoughts, experiences and meanings built from their experiences⁽¹⁸⁾ of family and social support or violence, in the process of revealing their sexual orientation to your families.

The contact with the participants occurred in the first half of 2015, with the intention of initiating an approximation in the meeting points of the LGBT audience located in the searched municipality, such as squares and malls. In a first contact with each one of the participants were detailed the purpose of the research, the conditions of participation, and the signing of the Term of Free and Informed Consent for the subjects above 18 years of age, the Free and Informed Consent Form for subjects under 18 years of age and the Free and Clear Consent Term for parents or guardians of adolescents under 18 years of age. It was clarified that for this purpose, only adolescents whose conditions of sexual orientation were declared and consenting in their family were accessed, since the researcher and the study could not be configured as a reason for revelation or family conflict. This information was duly and thoroughly discussed with each subject for the possibility of participation.

After the agreement of the participants, the meetings were scheduled to conduct the interviews in places of their choice. Most of the interviews took place in public places, but they ensured privacy. Others were performed in the participants' homes without the presence of other family members. The average interview time was 90 minutes. All interviews were recorded and transcribed in their entirety by the principal investigator. The anonymity of the participants was guaranteed through the use of fictitious names chosen by the adolescents themselves.

Data analysis

In the data analysis, the method of interpretation of the senses was used⁽¹⁹⁾. This method is based on hermeneutic-dialectical principles, which seek to interpret the context, the reasons and the logics of speech, actions and interrelations between groups and institutions. This method responds to the needs of this research, because it seeks, through the principles

of hermeneutics, to understand the historical being immersed in its context and culture and, through dialectics, to interpret, reflect and problematize the facts, languages and symbols present in the investigation. Understanding that subjects reconstitute lived experience, giving it meaning and issues statements about themselves, which give us clues as to how they are constituted as subjects in contexts of violence⁽²⁰⁾, we try to understand what languages are possible to talk about violence, what is said and for whom, as are situations reported from the production of experience at the time of interview⁽²⁰⁾.

In the analytical-interpretative trajectory of the data, it was necessary to have the vision of the set to apprehend the particularities of the research material; identify the meanings attributed by the interviewees; identify and problematize the explicit and implicit ideas in the testimonies; to seek the broader (sociocultural) senses, underlying the lines of the research subjects; to carry out a dialogue between the problematized ideas, information coming from other studies about the subject and the theoretical reference of the study; and finally, to elaborate an interpretive synthesis, seeking to articulate the purpose of the study, the theoretical basis adopted and empirical data⁽²¹⁾.

RESULTS

Characterization of adolescents and young people

Chart 1 allows the visualization of sociodemographic data of the adolescents and young participants.

Twelve adolescents and/or young gays and lesbians between the ages of 14 and 24 participated in this study, three of whom were female and nine were male.

It is noteworthy that the fictitious names were chosen by the participants themselves, from which, they emphasized some aspects of the process of discovering sexuality and its acceptance, as for example, the adolescent who called himself "Normal" carries in his speech the normality and the legitimacy of their sexual desire and practices, however, cannot talk about their sexual orientation with their parents, remaining "inside the closet" in the family context.

The adolescent who called himself "Disturbed" points out how much he likes to question the standards and norms ruled by his family and society, and how much that creates conflicts and difficulties in their relationships. Young Potter, who has experienced numerous experiences of violence in various contexts, such as at school, family and society, poses as a magician (Harry Potter), who can face the challenges of becoming a homosexual. The adolescent "Calculus" revealed the use of his rationality to deal with the adversities of his daily life as well as to deal with his family.

In relation to the family composition of the participants, two families were single-parent, composed by the mother and the adolescent/youngster (Disturbed and Biology), one composed by the uncles and the youngster (Potter), since the father died and the mother abandoned him, (Lipe, Dakota, Aphrodite, Normal, Sam, Calculus, Chanel, and Paulo Gustavo), and the rest of the families is composed by the mother, the father/stepfather and the adolescent.

After the interpretative analysis of the data collected in the interviews, the sense nucleus presented below was extracted.

Chart 1 – Socio-demographic data of the research participants

Participant	Age	Gender	Education level	Skin color or race
Lipe	18 years	Female	Complete high school	White
Duda	20 years	Female	Complete high school	White
Dakota	19 years	Male	Complete high school	Black
Aphrodite	21 years	Male	Incomplete high school	Mulatto
Normal	20 years	Male	Incomplete high school	White
Sam	20 years	Female	Complete high school	White
Potter	22 years	Male	Complete high school	White
Calculus	17 years	Male	Incomplete higher school	White
Disturbed	14 years	Male	Incomplete elementary school	White
Chanel	18 years	Male	Complete high school	Mulatto
Biology	19 years	Male	Incomplete higher school	White
Paulo Gustavo	24 years	Male	Complete high school	White

Experiences of coming out of the "closet": "He said I was crazy, said I was not healthy, I was not too sure"

It can be seen that families had reactions of violence, rejection, repression and silencing in the process of "coming out of the closet", demonstrating that heteronormativity is expressed as a regulatory device for sexuality. According to the participants, the family presented attitudes considered as homophobic in relation to the revealed sexual orientation and gender identity, in addition to control, surveillance, persecution and even expulsion from home, as can be seen in the following reports:

Part of my dad's family, they're homophobic ... they're fake ... [...]. 'Wow, how beautiful you are, Sam, look how cute, too bad you like women!' [...] they bluntly said: 'Your lesbian.' (Sam)

I was asked if I was dating, [...] if I was going to be with a woman, when a bikini girl happened on television, they kept asking me if she was hot, beautiful, I do not know what. [...] I would come with a friend of mine here at home, they would force the bar, 'So, are you staying? Are you going to date?' [...] If I came with a boy at the same time it was controversial, because they wanted me to have more male

friendships, but when I had a male friendship they were suspicious of having any relation, it was a completely distrustful relationship, so everything I did would be bad, and that at fourteen, wanting and being limited by everything I did, then I always had a very low self-esteem [...] I could not have strength [...] was overthrown. (Potter)

One of the participants in the study reports his experience of violence and expulsion from his parents, which broke family ties.

The day I arrived in the morning [from the boyfriend's house] by motorcycle taxi, my mother was washing the yard, then she waited for me to pay for the motorcycle taxi [...] already came hitting me with the hose [...] My father came to me and hit me, hit me a lot! [...] So I was nervous, my head was hot and I ended up yelling at them that I was gay, then my mother was already shocked, my mother: 'I do not want gay in the house and I did not raise a child for that, to keep throwing your ass to the street! Get your things and go away!' (Paulo Gustavo)

The adolescents and young people also revealed that their families had difficulty understanding and accepting homosexual sexual orientation, referring to the homosexual desire as "madness", "lack of doing", "sham" and even "inhuman act".

My father thinks he is lacking in what to do, my father is a bit ignorant of everything, actually. Then he just keeps watching and repudiating in his way. I ignore so as not to get nervous. (Lipe)

They believed very much that homosexuality is shameless, but what it cost them to understand is that since very, very young I already have this desire. (Potter)

He [father] said that I was crazy, said that I was not sane, that I was not sure, and also because I did not have a way of life or because I did not have a vision for the future. (Misrepresented)

We touched once [on the subject of being homosexual] that she, not looking too much at me, scared, shamed, she asked: 'But how did this happen? Did you see it somewhere and find it cool? 'And asked if I wanted some help from a psychologist, and I said' if I need to I'll let you know', but I never got to go. (Dakota)

Participants also reported situations in which the family attempted to suppress the expression of homoerotic experiences, often silencing themselves in front of them and, consequently, making the practices invisible, avoiding approaching the subject, so that the deviant practices were somehow silent or, at least contained.

No one questions me, everyone knows, but does not question. No one even refers to this subject. I think they keep expecting me to say I'm gay. (Normal)

[...] look, I am so far from them [father and brother] that no, they do not ask [about their sexuality], they should distrust,

but I do not know if they distrust or not, I do not know. I think they distrust [...] my brother I think he does, but my father is much closed, I do not know if he suspects, if he knows, what he thinks of me, got it? (Chanel)

It is worth noting that in a less expressive way, in some trajectories of the adolescents and young people participating in the research, the family, especially the mother figure, was warm and understanding at the moment of revealing the sexual orientation of their children.

My mother is super good, super head open, since she was little she always talked to me, accepted me. (Aphrodite)

I assumed for myself and finally, I took over for my family, and they all welcomed me in such a way, so much that when I told my mother she just told me that I was waiting for the right time that I was going to tell her, because she said she already knew! (Sam)

Total, totally supported me [mother], did not have an ounce of recrimination at the time I took over for her, she totally accepted. (Chanel)

However, the paternal figure was the one who most violated, discriminated and charged coherence between sex, gender, desire and sexual practices of their children.

He [Father] thinks that because I was not born a man I cannot be with a woman, so he thinks it's wrong and he has the little things in his head and the relationship is a bit conflicted. (Lipe)

My father made me do things, he said that he wanted me to be a big male, and for him, to be a big male I had to pick up and turn half a glass of pure drips, he forced me to eight years old to drink half a glass of pure drip because for him the male would take a drip of those there and hold on to a good one. (Potter)

There were implications of this process of "coming out of the closet" for the health of the participants. According to the fragment below, the violence suffered in the family context affected the mental health and quality of life of this young man, generating suicide ideation and attempt.

[...] violence affected and brought very serious consequences in my life today, I had a bad environment in the house, unbearable [...] in adolescence I thought about committing suicide, my aunt had medicine and I took medicine from my aunt, that when I was fourteen, I started taking medicine from my aunt who was an antidepressant, I went there and took the medicine [...] all because my head was a pressure cooker, and then I would come home and still I had my uncles charging me because they would not accept me. (Potter)

Expressed in the narratives of the participants, the reactions of family members in the process of revealing their sexual orientations were predominantly not welcoming and violent, enhancing the vulnerability to which they are exposed, with an impact on their health and quality of life.

DISCUSSION

In order to enter into the discussion of the data, it should be pointed out that the questions arising from the Queer Theory were used as a theoretical and epistemological beacon tool for analyzing the empirical material of this study. Thus, it is necessary to recognize that subjects are built within a sociocultural context marked by power relations, in which the normality patterns of being, being and relating to others are determined, from a matrix linearity heterosexual⁽¹⁶⁾, which is based on the binary paradigm of the heterocentered conception of the human⁽²²⁾.

In order to understand the process of revealing homosexual sexual orientation, or "coming out of the closet", it is necessary to understand the negotiation and positioning of the subjects in the spaces of sociability, enabling sexuality to be revealed in certain contexts or to build new cabinets and suffering for the subject who reveals himself⁽¹³⁾. This regime of visibility dictates what models of relationships are recognized and acceptable and controls other forms of relationship through moral vigilance, requiring that it be kept discreet or invisible, not being publicly expressed⁽²³⁾.

In the case of some participants in this research, the negotiation of the "closure" with family members was possible and with others not, characterizing the instability and vulnerability in the manipulation of the knowledge about the sexuality of someone whose "truth" of collective judgment is a regime that is present before and after the revelation of sexuality⁽¹³⁾. It is also worth noting that this negotiation is embedded in the socio-cultural and historical context, in which the hegemony of heterosexuality is predominant and defines social recognition and prestige⁽²³⁾.

In the process of mistrust and inquiry into the sexuality of his son, the family directly or indirectly demands that the homosexual person reveal himself and, after disclosure, establishes that he/she self-annul, this process is understood as contradictory codes of the⁽¹³⁾. Thus, intra-family relationships are defined by means of power structures, through attempts at framing, controlling and monitoring sexuality, seeking to make it compulsorily heterosexual.

Thus, during this process of revelation of sexuality, the family requires the linearity between sex, gender, desire and sexual practices, in order to guarantee and preserve heterosexual order. Many families, faced with the dissidence of the heterosexuality of their members, carry out a series of punishments, ranging from mild verbal offenses to serious physical violence⁽²⁴⁾. Studies show that rejection and family violence in the outcoming process and the non-provision of social support have a direct impact on the health of homosexual adolescents and young people, with consequences such as: social isolation, depression, suicidal ideation and attempt, low performance low self-esteem, higher social exposures and an increase in internalized homophobia^(1-2,25-26).

Data from a survey of ten women living heterosexual-normative dissenting lifestyles with a focus on homophobia in the family context revealed that families exert control over their members in order to maintain the compulsion of heterosexuality. Regarding homophobia in the family context, only those who did not assume their erotic dissidence for their relatives did not suffer direct homophobic attacks. Although, in indirect ways, all of them

perceived that this way of experiencing eroticism was not approved or considered desirable, and that, if revealed, they could be subjected to violence⁽²⁷⁾. Another study, carried out with young male college students between 18 and 24, who identified themselves as homosexuals, seeking to unveil the tensions generated between these young people and their families of origin, in the face of the discovery of homosexuality, revealed that the family presents as a scenario of conflicts and violence, both physical and psychological, from the revelation of homosexuality⁽²⁵⁾.

Results of the research carried out by the Perseu Abramo Foundation point out that the family is one of the largest spaces of homophobic discrimination⁽²⁸⁾. It corroborated other researches carried out in several Brazilian capitals during LGBT parades, in which the family was the first or second space of homophobic violence⁽²⁹⁻³²⁾.

According to the results of these studies, the experiences of the participants of this research highlight the heteronormative positions of the family, legitimizing the production and maintenance of various situations of violence, often culminating in expulsion/removal from the home of origin or submission to violence, explicit or subtle, potentializing the vulnerability in which these adolescents and youth are exposed, generating impacts on their health and life qualities. The situations of violence in the family context are based on devices with psychosocial effects in the life course of adolescents and young people, through subjective mechanisms that maintains silence and impotence in the face of violence, not only physical but, above all, symbolic, through which the heterosexual norm subjects young gay men and lesbians to the biopolitical strategies of control of their bodies.

The narratives about the distancing of the participants with the paternal figure and the proximity of the female figures of the social network corroborate other studies about the parents' difficulty in accepting homosexuality and having an intimate relationship with their children⁽³³⁻³⁴⁾. This detachment from the father and other male figures of the homosexual reinforces the hegemonic masculinity model, which culturally and historically establishes the valorization of white, middle-class, heterosexual masculinity and establishes power relations with both the woman and those who deviate from the patterns of this masculinity⁽³⁵⁾. Faced with this, violence, prejudice and discrimination establish a relationship of maintenance of the status quo of this masculinity, which needs to be reaffirmed and attested.

The family stands out as a network of support, shelter and important protection, mainly to promote well-being and protect against mental suffering and internalized homophobia, but also as a space that can generate and reproduce forms of violence and illness in the name of "heteronormativity"⁽³⁶⁾.

Thus, considering the fragilities and difficulties of families facing the process of revealing sexuality, services and professionals in education, health and social assistance can help strengthen ties and refer cases of violence, in fact working as a support network social, in the sense of deconstruction of the heteronormative and homophobic postures in search of the effectiveness of the rights of these adolescents and young people.

In the area of health, this problem needs to be better qualified and approached by professionals in this area, with a necessary qualification and awareness in both the recognition

and the notification of violence and intervention, aimed at the LGBT population. Due attention must be given, above all to situations of rights violations, with a view to humanized care, based on the integral care and assistance.

Study limitations

Articulations of the theme with other variables such as race, gender and social class are a limitation that can be overcome in other prospective studies.

Contributions to the area of nursing, health or public policy

The study contributes with arguments to problematize the care line for the integral attention to the health of the adolescent and their families, being based on the National Policy of Integral Health of Lesbian, Gay, Bisexual and Transvestites/Transsexuals and to assist in the construction of actions to combat homophobia and health promotion, as well as articulation of the subjects' social network.

It offers contributions to the greater visibility of the phenomenon of violence perpetrated by the family against teenagers and young people, highlighting the implications of the process of "coming out of the closet" for their health and quality of life. In this sense, it broadens the understanding about the problem, pointing to a necessary articulation of health care and integral care for the reception and care, in an intersectoral and interdisciplinary perspective, for a greater resolution of the needs of this population. It is necessary to reflect on work in health and nursing with the LGBT population contributing to the reduction of inequalities and establishment of universal, integral and equitable attention as recommended by the Unified Health System - SUS. The services and health area can also use this study in training and training processes to

counter the culture of institutionalized homophobia and violence against homosexual teenagers and young people, which often make services inaccessible to this population.

FINAL CONSIDERATIONS

This study presented narratives of gay and lesbian adolescents and young people in the process of revealing sexual orientation to their families. It was observed that the reactions of family members when confronted with the 'out of the closet' of the adolescents and young people were violent, with control, surveillance, persecution and even expulsion from home, as well as the repression of expressions of homoerotic experiences, often silencing in front of them. Less expressively, there were situations of understanding and acceptance. The family is an important component of the social support network of these adolescents and young people, which can increase vulnerability or increase resilience through social support.

In the case of the adolescents and young people participating in this study, the family reproduced heteronormative discourses and practices, discriminating the dissidents of their children and seeking to replace them, through violence, within the heterosexual norm. Therefore, it is necessary to build a research agenda for a better understanding of this phenomenon and for the design of public policies capable of sensitizing professionals and practices of care and attention to the family and the adolescent and young victim of violence.

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