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Homophobic Victimization and Psychosocial Adjustment Problems among Youth of Lesbian and Gay Parents

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ABSTRACT

The associations between psychosocial adjustment problems of 97 adolescents and emerging adults of lesbian and gay parents and their experiences of homophobic victimization were examined. Their psychosocial problems were also compared to their peers from a large-scale representative survey ($n=6,531$). Self-report measures were used. Significant differences between the two groups were found with youth of lesbian and gay parents reporting more psychological distress and hard drugs use but less suicidal ideation. There were significant correlations between psychosocial problems and homophobic victimization. Despite a more positive climate toward sexual minorities, youth from lesbian and gay parent families are still exposed to risk factors that may impact their psychological well-being. The practical implications of our findings are discussed.

KEYWORDS

homophobia;
victimization;
adolescence;
lesbian mothers;
gay fathers

A plurality of family configurations have emerged over the last forty years in Western societies, including lesbian and gay parent families. In 2016, 10,020 children aged 0 to 14 years were living with same-sex parents in Canada (Statistics Canada, 2017a). In the province of Québec, 3,495 same-sex couples (married or common-law partners) were living with children under 15 years of age and 880 same-sex couples were living with children over 15 years (Statistics Canada, 2017b). There are no reliable data on the number of children or teenagers living in a single-parent family headed by a lesbian mother or a gay father.

Although sexual diversity and lesbian and gay parents are now more visible and accepted (e.g., Pew Research Center, 2013), negative attitudes remain widespread and sexual minorities are still stigmatized (Kosciw et al., 2020; Statistics Canada, 2019). Homophobia is a serious problem in school, particularly in high school (e.g., Blais et al., 2013; Chamberland et al., 2011; Espelage et al., 2018; Kosciw et al., 2020). Its negative impact on the psychological wellbeing has been extensively documented (e.g., Bergeron et al., 2015; Coker et al., 2010; Martin-Storey & Crosnoe, 2014; Rinehart et al., 2017; Russell et al., 2011; Saewyc, 2011).

Adolescents of lesbian and gay parents and homophobic victimization

Sexual minority individuals are not the only target of homophobic victimization. Anyone who does not conform to the stereotypes associated with masculinity and femininity or with heteronormativity can be a target (e.g., Bédard, 2013; Pennington & Knight, 2011; Tucker et al., 2016). Adolescents raised by lesbian or gay parents may then be particularly vulnerable to homophobic victimization because of their parents' sexual orientation.

Adolescence is a major transition period. Peer validation becomes more important as well as concerns about sexual orientation and gender identity (Langis & Germain, 2009). It is also during this period that children raised by lesbian or gay parents become more aware of the social norms pertaining to the family and of their minority or marginal status (Rivers et al., 2008). According to the *Minority stress model* (Meyer, 2003), the stigmatization often experienced by members of minorities (e.g., rejection, discrimination) is an important source of stress that can affect their wellbeing. The heteronormative climate may be detrimental to the psychosocial adjustment of adolescents raised by lesbian or gay parents.

According to the U.S. National Longitudinal Lesbian Family Study, 50% of adolescents raised by lesbian mothers ($n=78$; $M=17$ years) had experienced negative reactions from their peers at school such as teasing and exclusion (van Gelderen et al., 2012). Among a national sample of Grades K–12 in the United States, 40% of adolescents of lesbian or gay parents ($n=154$) had been verbally harassed, 12% had been physically harassed or assaulted, and 23% felt unsafe at school (Kosciw & Diaz, 2008). In a study conducted in the Netherlands, girls reported more gossip-type victimization because of their mother's sexual orientation and boys more social exclusion (Bos & van Balen, 2008). In Canada, 65% of adolescents raised by lesbian mothers ($n=50$) had been exposed to various forms of heterosexism (Vyncke et al., 2014). In Québec, 44% of youth ($n=25$) from same-sex parent families drawn from a large-scale survey had experienced bullying, mostly verbal bullying, because of their parents' sexual orientation (Chamberland et al., 2011). Only one of the studies reviewed yielded a low percentage of homophobic victimization: 13.4% of Dutch adolescents from planned lesbian families reported experiences of victimization (van Rijn-van Gelderen et al., 2015).

Homophobic victimization and psychosocial adjustment

Being teased and mocked and experiences of rejection and exclusion appear to be relatively common among adolescents raised by lesbian or gay parents and these experiences are associated with negative outcomes. Associations have been found between perceived stigma and low self-esteem among 10- to 17-year-old children of same-sex parent families (Crouch et al., 2015) and between perceptions of heterosexism and internalizing and externalizing problems among adolescents raised by lesbian mothers (Vyncke et al., 2014). Experiences of stigmatization have also been associated with low self-esteem in girls (Bos & van Balen, 2008; Gershon et al., 1999) and hyperactivity in boys of lesbian mothers (Bos & van Balen, 2008).

Yet a substantial number of studies have shown that the psychosocial adjustment of children raised by lesbian or gay parents do not generally differ from their peers raised by heterosexual parents (for meta-analyses and review, see Fedewa et al., 2015; Short et al., 2007; Tasker, 2005). Moreover, two recent meta-analyses reported more positive outcomes in children of same-sex parent families (Suárez et al., 2022) and in children of gay father families (Miller et al., 2017). The situation may be more complex during adolescence. More conduct problems and drugs and alcohol use have been found among youth from planned lesbian families (Bos et al., 2013; Goldberg et al., 2011). Conduct problems were especially frequent among adolescents who had experienced homophobic victimization (Bos et al., 2013). Moreover, these experiences during adolescence had long-term effects in emerging adulthood (Bos et al., 2021).

The current study

The aim of this study was to further investigate the association between psychosocial adjustment problems and experiences of homophobic victimization among adolescent and emerging adult offspring of lesbian and gay parents. We first compared their psychosocial adjustment problems to their peers' drawn from a large-scale representative survey and examined the correlations between psychosocial problems and homophobic victimization. Based on previous studies, we

hypothesized that youth from lesbian and gay parent families will report experiences of homophobic victimization because of their parents' sexual orientation and that these experiences will be associated with psychosocial problems. Because gender differences have been found in the associations between experiences of homophobic victimization reported by adolescents of lesbian mothers and their psychosocial problems (Bos & van Balen, 2008; Gershon et al., 1999), we also compared the problems reported by girls and boys and examined the moderating effect of gender.

Method

Participants

Youth of lesbian and gay parents

Our sample includes 97 14- to 21-year-old children ($M=17.2$ years) raised by lesbian or gay parents. They were recruited from September 2016 to April 2017. Invitations to answer the online survey were sent to participants of the Quebec Youth's Romantic Relationships Survey (QYRRS),¹ on social networks (e.g., Facebook) and with the collaboration of the Chaire de recherche sur l'homophobie at Université du Québec à Montréal (UQAM) and the LGBT Family Coalition. Each participant received a 20\$ gift. The project was approved by the ethics committee of UQAM.

The sociodemographic characteristics of our participants are presented in Table 1. The sample includes 57 girls and 40 boys. The majority (80.4%) were French speaking, 9.3% were English speaking, and 10.3% spoke both French and English at home. More than half of the respondents (56.1%) were in high school and 43.9% in college (grades 11 and 12 in Québec). Among our participants, 56.7% were born in heterosexual parent families before one of the parents disclosed a lesbian ($n=36$) or gay identity ($n=19$), 27.8% were raised in planned lesbian ($n=12$) or gay ($n=15$) parent families.

Normative sample

To compare the psychosocial problems of youth from lesbian and gay parent families with their peers from the general population, we used a normative sample from the QYRRS survey. This longitudinal survey was conducted among students between 14 and 19 years of age. The Wave 1 of the study was completed through on-stage stratified cluster sampling of 34 high schools randomly selected throughout Québec in 2011–2012. To obtain a representative sample, schools were first classified into strata according to teaching language (French or English) and social economic deprivation index. A total of 8,230 teenagers responded to the questionnaire and 36 of them were excluded because of missing data. The 8,194 participants were then given a sample weight to correct biases in the proportionality of selecting the given grade in the respondent's stratum for our sample multiplied by the probability of selecting the same grade in the same stratum for the general population (for more information, see Hébert et al., 2017). A weighted sample of 6,531 youth aged 14 to 19 years ($M=15.4$ years) resulted and was used in our analyses.

Procedure

Youth of lesbian and gay parents were invited to answer the 30 min online questionnaire. The questions pertaining to psychosocial adjustment were those used in the QYRRS survey. Participants were informed that they could stop responding anytime and that all their responses were confidential. They were asked to leave their e-mail to receive their 20\$ gift but to ensure anonymity, they were clearly informed that personal information would be deleted from our online platform, email provider, and from our database. A list of mental health resources was also provided.

Table 1. Sociodemographic characteristics of youth of lesbian or gay parents ($N=97$) and from the comparative sample (general population with complex sampling).

Characteristics	Youth of lesbian and gay parents						Comparative sample ^c					
	Boys			Girls			Total			Boys		
	M	SD	N	M	SD	N	M	SD	N	M	SE	SE
Age (years)	17.40	1.97	17.16	2.17	17.26	2.08	15.36	.123	15.35	15.35	.103	.109
	N	%	N	%	N	%	N	%	N	N	%	%
	40	41.2	57	58.8	97	100	2754.5	42.2	3776.3	3776.3	57.8	100
Gender												
Language spoken at home	27	67.5	51	89.5	78	80.4	2428.8	88.5	3376.1	3376.1	89.6	89.2
French	6	15	3	5.3	9	9.3	140.1	5.1	179.0	179.0	4.7	4.9
English	7	17.5	3	5.3	10	10.3	174.1	6.3	212.0	212.0	5.6	5.9
Parents' ethnic or cultural group												
Both parents Québécois or Canadian	26	65	47	82.5	73	75.3	2094.7	76.4	2710.8	2710.8	6.1	73.6
One parent Québécois or Canadian and one parent from other ethnic or cultural group ^a	10	25	9	15.8	19	19.6	156.2	5.7	230.1	230.1	72.0	5.9
Both parents from other ethnic or cultural group	4	10	1	1.8	5	5.2	491.0	17.9	821.7	821.7	21.8	20.2
Sexual Orientation												
Homosexual	21	52.5	42	73.7	63	64.9	2452.8	93.2	3248.4	3248.4	88.1	90.3
Homosexual/Gay/Lesbian	5	12.5	2	3.5	7	7.2	46.6	1.7	82.0	82.0	2.3	2.1
Bisexual	8	20	6	10.5	14	14.4	31.2	1.2	109.1	109.1	3.0	2.2
Pansexual	2	5	3	5.3	5	5.2	5	5.2				
Uncertain/Doesn't know	4	10	4	7	8	8.2	99.8	3.8	245.6	245.6	6.6	5.5
Grade level												
High School	23	57.5	32	56.1	55	56.7	2754.5	42.2	3776.3	3776.3	57.8	6504.9
College ^b	13	32.5	22	38.6	35	36.1						
	4	10	3	5.3	7	7.2						
Undergraduate												
Composition of the family												
Born in a heterosexual family, father announced his homosexuality	9	22.5	10	17.5	19	19.6						
Born in a heterosexual family, mother announced her homosexuality	9	22.5	27	47.4	36	37.1						
Have two lesbian mothers and conceived through a sperm bank donation	2	5	0	0	2	2.1						
Have two lesbian mothers, sperm donation from someone from their entourage	6	15	2	3.5	8	8.2						
Adopted by two lesbian mothers	0	0	2	3.5	2	2.1						
Have two gay fathers, conceived through a surrogate mother	7	17.	0	0	7	7.2						
Adopted by two gay fathers	6	15	2	3.5	8	8.2						
Don't know	1	2.5	14	24.6	15	15.5						

^aOther ethnic or cultural group includes Latino American, African American, North African, Middle Eastern, and Asian.

^bIn Québec, college level or CEGEP refers to grades 11 and 12.

^cDecimals and standard errors are derived from complex sampling.

Measures

Sociodemographic characteristics

Information was collected on gender, age, main language spoken at home (French, English, both French and English), sexual orientation, and parents' ethnic or cultural group. Youth of lesbian and gay parents had to choose from a series of nine statements developed with the collaboration of the LGBT Family Coalition which best described their family (e.g., I was born in a two-parent family with a mother and a father, but my parents separated or divorced, and my father came out as gay).

Psychological distress

Psychological distress in the past 12 months was measured using the Psychological Distress Scale (Kessler et al., 2002). This 10 items scale has been used to assess depressive and anxious symptoms within nonclinical and clinical populations (Cairney et al., 2007). Internal consistency was high ($\alpha = .90$). Participants had to respond on a Likert scale ranging from 1 (Never) to 5 (All the time). Mean scores were used, with high scores indicating high levels of distress.

Self-esteem

Self-esteem was assessed using four items from the short version of the *Self-Description Questionnaire* (Marsh & O'Neill, 1984). Internal consistency was high ($\alpha = .89$). Participants had to respond on a Likert scale ranging from 0 (False) to 4 (True). Higher scores indicate higher self-esteem.

Suicidal ideation and suicide attempts

Suicidal ideation and suicide attempts were assessed using two questions drawn from NLSCY (Statistics Canada & Human Resources & Skills Development Canada, 2008): "In the last 12 months, have you seriously thought of committing suicide?"; "In the last 12 months, have you attempted suicide?". Participants had to respond 1 (Yes) or 0 (No).

Alcohol and drugs consumption

The frequency of alcohol, soft drugs (marijuana, hashish), and hard drugs (ecstasy, amphetamines, speed, cocaine) consumption in the last 6 months was assessed using three items from the DEP-ADO (Landry et al., 2004) and a six-point scale ranging from 1 (No consumption) to 6 (Every day).

Delinquent behavior

The frequency of delinquent behaviors in the past 12 months was assessed using six items from the NLSCY (Statistics Canada & Human Resources & Skills Development Canada, 2008). Participants had to indicate how many times they committed delinquent behaviors (e.g., attacking someone, stealing) using a five-point scale ranging from 1 (Never) to 5 (5 times or more). The Cronbach alpha was .77.

Homophobic victimization

Experiences of homophobic victimization related to parents' sexual orientation in the past 12 months were assessed using nine items based on Chamberland and colleagues' (2011) survey on the impact of homophobia and violence among high school students. Different forms of

Table 2. Psychosocial adjustment problems of youth from lesbian and gay parent families and from the normative sample.

Data	Variable	<i>M</i> or %	<i>SD</i>	Skewness	Kurtosis	Min	Max	Alpha	Aggregation
Sample	Victimization ^a	5.31	8.62	1.55	1.10	0	31	.95	Total
	Self-esteem	10.12	3.89	-.52	.09	.00	16.00	.89	Total
	Psychological distress	16.77	7.63	.47	-.19	4.00	37.00	.90	Total
	Alcohol consumption	2.66	1.18	.46	-.47	1.00	6.00		
	Suicidal ideation	15.5%							
	Suicide attempt	5.1%							
	Delinquent behavior	51.5%							
	Soft drugs consumption	49.5%							
	Hard drugs consumption	29.9%							
Normative	Self-esteem	11.56	3.55	-.87	.67	0	16	.88	Total
	Psychological distress	9.35	7.67	1.09	1.06	0	40	.88	Total
	Alcohol consumption	1.29	1.12	.53	-.65	0	5		
	Suicidal ideation	26.4%							
	Suicide attempt	9.0%							
	Delinquent behavior	23.4%							
	Soft drugs consumption	29.2%							
	Hard drugs consumption	9.2%							

^aThis variable was not measured in the normative sample. Comparisons of soft drugs and hard drugs consumption are based on dichotomous scores (no consumption/consumption).

homophobic victimization were assessed: verbal abuse (e.g., to be teased maliciously, mocked, humiliated) exclusion/rejection, physical violence (e.g., to be jostled, hit, kicked, spit on, thrown objects), sexual violence (e.g., to be touched, pinched, kissed against your will), and cyberbullying (e.g., rumors, intimidation, threats on social media, by email). Participants had to respond using a Likert scale ranging from 1 (Never) to 5 (Several times a week). Internal consistency was high ($\alpha = .95$).

Statistical analyses

Descriptive and preliminary analyses were performed using SPSS 23. Means and standard deviations were first computed. Descriptive data for both samples are presented in Table 2. Scores of psychological distress and self-esteem were not normally distributed and were transformed using square root. Scores of delinquent behaviors were dichotomized as 0 (no delinquent behavior) and 1 (at least once). The scale for drugs was also dichotomized for the comparative analyses (0=No consumption; 1=At least once) and recoded as follow for the correlation analyses: 0 (No Consumption), 1 (Occasionally to once a month), 2 (More than once or twice a week). Because there were strong correlations between the different forms of victimization, a composite score was computed with principal component analysis. A single component was retained and explained 71.59% of the variance. The loadings of the component were all above .71. This composite score was used in our analyses.

Bivariate correlations between measures of psychosocial adjustment and age were examined because our sample of youth of lesbian and gay parents was older than our comparison group. No significant correlations were found. Other potential confounding variables (gender, education level, parents' ethnic or cultural group) were examined. Because these variables did not

Table 3. Correlations between Psychosocial Adjustment Problems and Homophobic Victimization.

Variable	<i>r</i>	<i>p</i>	Lower CI	Upper CI
Self-esteem	-.37**	<.001	-.52	-.20
Delinquent behavior	.47**	<.001	.35	.59
Psychological distress	.33**	<.001	.16	.48
Suicidal ideation	-.08	.445	-.32	.16
Suicide attempt	-.12	.351	-.34	.14
Alcohol consumption	.52**	<.001	.35	.66
Soft drugs consumption	.55**	<.001	.37	.69
Hard drugs consumption	.67**	<.001	.49	.81

significantly differ between groups, they were not included in our analyses. The psychosocial adjustment scores of youth from lesbian and gay parent families were then compared to their peers from the normative sample using *z* tests (comparison of means) and Chi-square tests. Age was included as a control variable. Bivariate correlation analyses were also performed to examine the relations between the psychosocial adjustment measures and the composite scores of victimization. To examine the moderating effect of gender, a moderation analysis was carried out to investigate the interaction effect of gender on the associations between homophobic victimization and psychosocial adjustment variables (Caron et al., 2020).

Results

Psychosocial adjustment problems

The comparison of the psychosocial adjustment measures yielded several differences between both samples. A Bonferroni correction was used (Howell, 2012). The *p*-value is .006 (.05/8). Youth of lesbian and gay parents had higher scores of psychological distress than their peers from the normative sample, $z=3.15$, $p = .002$. A higher percentage also reported using hard drugs, $\chi^2(1) = 22.83$, $p < .001$, but a lower percentage had suicidal ideation, $\chi^2(1) = 9.05$, $p = .003$. There were no significant differences for delinquent behaviors, self-esteem, alcohol consumption, soft drugs consumption, and suicide attempts (for those reporting suicidal ideation).

Homophobic victimization

Overall, 46.4% of youth of lesbian and gay parents reported having experienced at least one episode of homophobic victimization because of their parents' sexual orientation. A detailed analysis indicates that 40.2% of youth had been the target of verbal victimization, 27.8% of physical victimization, and 20.6% reported sexual victimization. Experiences of rejection/exclusion were found in 37.1% of our sample and 26.8% reported cyberbullying.

Homophobic victimization and psychosocial adjustment

Bivariate analyses using Pearson's correlations were carried out to examine the relations between measures of psychosocial adjustment and homophobic victimization (see Table 3). Effect sizes were interpreted using Cohen's (1992) guidelines. Significant positive correlations were found between homophobic victimization and psychological distress, delinquent behavior, alcohol consumption, and soft drugs and hard drugs consumption. A negative moderate correlation was also found between self-esteem and victimization. There were no significant correlations between homophobic victimization and suicidal ideation and suicide attempt. Using Bonferroni correction, the *p*-value was .006 (.05/8).

Gender was also found to moderate the association between homophobic victimization and the measures of psychosocial problems. Except for hard drugs, the relations were significant for boys only (see Table 4).

Table 4. Moderation of Gender on the Association between Homophobic Victimization and Psychosocial Adjustment Variables.

Variable	<i>p</i>	Effect
Self-esteem	.001	-.75
Delinquent behaviors	.003	-1.02
Psychological distress	.028	.44
Suicidal ideation	.587	.48
Suicide attempt	.365	-1.16
Alcohol consumption	.005	.43
Soft drugs consumption ^a	<.001	(-1.83; -1.25)
Hard drugs consumption ^b	<.001	(-.61; .93)

Note: The *p*-value with a Bonferroni correction is .006 (.05/8).

^aModeration compared to the frequent drug use for boys. There was no difference between the no drug group and the occasional drug group.

^bModeration compared to frequent drug use for boys. There was a difference between the occasional and the no drug use and the occasional and the frequent drug use, but not between the frequent use and the no drug use.

Discussion

To further investigate the association between psychosocial adjustment problems and experiences of homophobic victimization among adolescent and emerging adult offspring of lesbian and gay parents, we compared their psychosocial problems to their peers' drawn from a large-scale representative survey and examined the correlations between psychosocial problems and homophobic victimization. Based on Meyer's (2003) *Minority stress model* and on several empirical studies, we hypothesized that homophobic victimization experiences will be associated with adjustment problems.

Youth of lesbian and gay parents reported higher levels of psychological distress than their peers and used more hard drugs. However, they had less suicidal ideation and their self-esteem, delinquent behaviors, soft drug consumption, and suicide attempts did not differ from their peers'. Note that two studies reported more problems in adolescents of lesbian mothers when compared to their peers from heterosexual parent families or to normative samples. Goldberg et al. (2011) found more alcohol and drugs use and Bos et al. (2013) higher scores of conduct problems but no differences in affective and anxiety problems.

The studies conducted by Goldberg et al. (2011) and Bos et al. (2013) were both based on the same sample of 78 adolescents from planned lesbian families. Alcohol and drugs use was reported by adolescents whereas their behavior and affective problems were assessed by their mothers using the *DSM-Oriented Scales* of the CBCL. Because they are usually less obvious than externalizing symptoms, parents often misinterpret and underestimate child internalizing symptoms (e.g., Bouvard et al., 2007). Alcohol and drug use is generally associated with psychological distress as it is the case in our study. Adolescents who had reported using more alcohol and drugs in the Goldberg et al. (2011) study may have also reported more psychological distress than their mothers did.

Several factors could account for the higher levels of psychological distress and hard drugs consumption in our sample of youth, but homophobic victimization is probably among the most important of these factors. As predicted, a high percentage reported experiences of victimization related to their parents' sexual orientation. Moreover, in accordance with the *Minority stress paradigm*, there were significant correlations between homophobic victimization and psychological distress, delinquent behaviors, and consumption of alcohol, soft drugs, and hard drugs. Significant correlations between psychosocial problems and homophobic victimization related to parents' sexual orientation have been reported in other studies (e.g., Bos & van Balen, 2008; Gershon et al., 1999).

However, gender was found to moderate the association between homophobic victimization and psychosocial variables. Significant correlations were found with boys' psychological distress, delinquent behavior, and consumption of alcohol, soft drugs, and hard drugs. Social pressures to conform to gender norms are generally stronger for boys than for girls (e.g., Egan & Perry,

2001). Boys may therefore experience higher levels of stress when they are the target of homophobic victimization. For girls, a significant correlation was found between homophobic victimization and hard drugs consumption only. Although girls seemed to be less affected than boys, their hard drugs consumption is alarming.

Surprisingly, homophobic victimization was not correlated with suicidal ideation and suicide attempt. Yet, experiences of homophobic victimization among sexual minority youth have been consistently associated with suicidal thoughts and/or suicide attempts (Coker et al., 2010; Herba et al., 2008; Saewyc, 2011). Youth of lesbian and gay parents may experience less severe forms of victimization than their lesbian and gay peers. They may also receive more support from their parents, which could contribute to alleviate some of the negative impact of these experiences.

Following other studies, verbal abuse and rejection/exclusion were the most frequent forms of victimization in our study (e.g., Chamberland et al., 2011; Kosciw & Diaz, 2008; van Gelderen et al., 2012; van Rijn-van Gelderen et al., 2015; Vyncke et al., 2014). Physical victimization was also reported by 27.8% of youth and sexual victimization by 20.6% of them. Previous studies have found lower percentages. For instance, only two adolescents out of 67 reported physical victimization in the van Rijn-van Gelderen et al. (2015) study and no adolescents reported being threatened with violence or physically hurt because of their mothers' sexual orientation in Vyncke et al. (2014). Cyberbullying was also relatively frequent with more than 26% of youth reporting at least one episode. Despite the social context of tolerance toward sexual diversity and laws and policies supporting the rights of sexual minorities, these findings seem to confirm that homophobic victimization is still an important issue.

Although the psychosocial adjustment of youth of lesbian and gay parents is clearly related to their experiences of homophobic victimization, other factors could account for the differences found with their peers. Our sample is larger than the samples included in many other studies increasing statistical power and the probability of detecting significant differences. The characteristics of our comparison group, a normative sample drawn from a large-scale representative survey, could also in part account for our findings. Moreover, because a large number (56.7%) of youth were born before the coming out of one of their parents, the conflicts and separation/divorce that often follow the coming-out are likely to affect their psychosocial adjustment, especially in the first few years (Chamberland et al., 2003).

Also note that studies conducted with young children generally show better outcomes than those conducted with adolescents. The importance of peer validation and acceptance increases in adolescence as well as the need to fit in a group. Anything that deviates from the norms may be a potential source of victimization. Adolescents are also more aware of the heteronormativity related to parenthood (Rivers et al., 2008). Adolescents from gay and lesbian parent families may then be more vulnerable to homophobic victimization and more likely to experience the minority stress than young children. Moreover, experiences of homophobic victimization related to parents' sexual orientation in emerging adulthood also seems to have a negative impact on psychosocial adjustment. Bos et al. (2021) already reported a long-term impact of homophobic victimization experienced during adolescence on emerging adult offspring of lesbian parents. Our findings suggest that these experiences may have a cumulative effect and increase the vulnerability in emerging adulthood.

Strengths, limitations, and future studies

As already pointed out, our sample size is relatively large compared to other North American and European studies. It also includes youth from different family configurations. Most of the previous studies were carried out with children of lesbian mothers. Our comparison with a normative sample drawn from a large-scale representative survey is also an important strength as it provides more accurate and valid data (Howell, 2012). Most of the studies reviewed were

based on paired-matched samples. Various psychosocial problems and various forms of homophobic victimization were also assessed.

Several limitations should however be mentioned. As it is the case for other studies on sexual minority groups, our study relies on a convenience sample. Assessments of psychosocial adjustment and homophobic victimization were exclusively based on self-reports. Data collected from multiple informants, such as parents and peers, could provide a more comprehensive picture and enhance reliability and generalizability. Our measure of homophobic victimization focused on school and college settings but other settings, such as sporting clubs, may have a significant impact on well-being. The correlational nature of our study is also a limit. The impact of homophobic victimization on youth's adjustment should be further investigated using a longitudinal design.

Implications for policy and practice

In Québec, as in many other Western societies, along with legislative policies against homophobia, various programs have been developed to reduce homophobic victimization and to promote the safety and well-being of sexual minorities (e.g., Chamberland & Richard, 2017). Despite these efforts, our results show that the fight against homophobia must continue. Youth from lesbian and gay parent families seem to be particularly vulnerable to homophobic victimization during adolescence and in emerging adulthood. Educators and other professionals working with youth and families should be alerted to these problems. The impact of protective factors such as personal coping skills and support from parents and allies should also be emphasized (e.g., Kosciw et al., 2020; Rivers et al., 2008; Saewyc et al., 2014; Vyncke et al., 2014). These protective factors also deserve to be further investigated.

Conclusion

Almost half of our sample of youth from gay and lesbian parent families reported experiences of homophobic victimization in the last six months and these experiences were related to their psychosocial problems, especially among boys. Despite a more inclusive and open social context to sexual minorities, these findings clearly show that changing attitudes toward lesbian and gay parent families is still a challenge. More efforts are needed to promote the well-being and security of their offspring.

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