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**SEXUAL ATTITUDES AS PREDICTORS OF HOMONEGATIVITY
IN COLLEGE WOMEN**

JAMES G. ARCHIBALD

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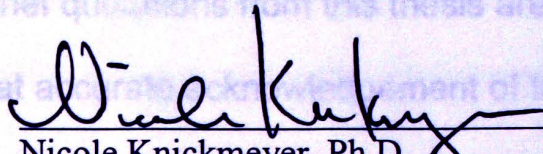
Sexual Attitudes as Predictors of Homonegativity in College Women

James G. Archibald

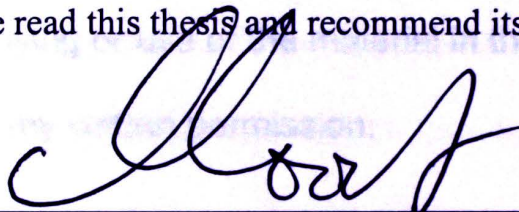
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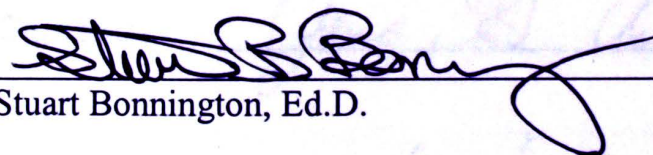
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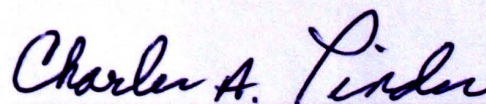

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Acknowledgements

First and foremost, I would like to thank God for blessing me and for His continuous grace and mercy. I would like to extend my gratitude to my advisor, Dr. Nicole Knickmeyer, for her expertise and knowledge throughout this research project. She has truly been a source of true inspiration and it has been a pleasure to work with such an astounding mentor. To Dr. Barry Woods, he has been nothing other than supportive with every idea that has crossed my mind since the beginning of this project. His support has kept my confidence high, and encouraged me to further my education at a higher level. Furthermore, I would like to thank Dr. Stuart Bonnington for his wisdom and guidance throughout my entire graduate education experience. His is a wisdom that money cannot buy and it is greatly appreciated. You all made a wonderful thesis committee and thank you so much for your dedication to excellence.

I would also like to thank Mr. Daniel E. Leland for the library assistance that he provided me throughout this project. I would like to extend my sincere gratitude to my parents, James and Gloria Archibald for being ever-present and supportive in all aspects of my life. I am very blessed to have such a wonderful family, including my sister Desiree Paige Archibald.

Finally, I am proud to make this contribution to scientific literature and serving as a representative of the Community Counseling Program at Austin Peay State University.

Abstract

Negative and malevolent attitudes toward lesbians and gay men are widespread in the United States (Morrison, Parriag, & Morrison, 1999). Homonegativity is any prejudicial attitude or discriminatory behavior directed toward an individual because of his or her homosexual orientation (Morrison, McLeod, Morrison, Anderson, & O'Connor, 1997). Although studies have been conducted regarding heterosexual men's attitudes toward homosexual men and lesbians, little research has been done about women's attitudes towards lesbians. It was hypothesized that females with conservative sexual attitudes would show higher levels of homonegativity, and females with liberal sexual attitudes should show more nonhomonegative expression towards lesbians. A correlation analysis supported the hypothesis ($r = .73$, $p < .01$) indicating a positive correlation between sexual attitudes and homonegativity.

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Sexual Attitudes as Predictors of Homonegativity in College Women (Perez,

Although researchers have investigated predictors of homonegativity in males, little attention has been given to the predictors of homonegativity in females (Kite, & Whitley, 1998). Predictors such as self-esteem, religiosity, and contact with lesbians and gay men have been widely investigated in men but not so much in women (Basow & Johnson, 2000). It has been found that religiosity and religion are common correlates of homonegativity (Basow & Johnson, 2000). However, the findings were mostly of male samples. It has been widely found that males have more negative attitudes towards gays and lesbians than females (Herek & Capitanio, 1999). Negative attitudes towards gays and lesbians are often referred to as homophobia or homonegativity. The term "homophobia" was formed by Weinberg (1973) to refer to the fear or dread of being in close quarters with a homosexual. Homophobia is defined as fear, disgust, anger, discomfort and aversion that individuals experience in dealing with gay persons (Hudson & Ricketts, 1980). Morin and Garfinkle (1978) defined homophobia as any reaction that does not value the homosexual lifestyle equally with the heterosexual lifestyle. Homonegativity is a prejudicial attitude or discriminatory behavior directed toward an individual because of his or her homosexual orientation (Morrison, McLeod, Morrison, Anderson, & O'Connor, 1997). Homonegativity is preferable over homophobia since homophobia can imply dysfunctional. The term "homophobia" is often a misnomer because it frequently is used to refer to nonphobic negative reactions toward homosexuals (Haaga, 1991). Negative reactions toward homosexuals and prejudicial beliefs about homosexuals are defined as homonegativity. Homonegativity can be expressed by means of physical violence, verbal assault, or discriminatory actions. (Williams, 1999).

Consequences of Homonegativity

Anti-gay Violence. Research suggests that men are less accepting of homosexuality than

women, and that men account for the majority of anti-gay violence on college campuses (Perez, DeBord, & Bieschke, 2000).) Anti-gay hate crimes are violent acts perpetrated against an innocent victim either because or on assumption that the person is of a sexually minority group. Anti-gay hate crimes are usually based on actual or perceived sexual orientation or gender identity. According to the Bureau of Justice Statistics (2005), a hate crime is a criminal offense committed against a person or society in which the crime is motivated by the offender's bias against a religion, disability, sexual orientation, ethnicity, or national origin. Herek (1999) indicated that recent hate crime victims showed significantly more symptoms of depression, anger, anxiety, and post-traumatic stress. Hate crime victims show more fear of crime and increased feelings of vulnerability. People who experience same-sex or both-sex romantic attraction are more likely to experience extreme forms of violence than people who have a heterosexual attraction (Perez, DeBord, & Bieschke, 2000). According to Parrot, Adams, & Zeichner (2002), 94% of surveyed gay and lesbian persons reported some form victimization during their lifetime. Nearly 50% of the respondents had been physically threatened (Parrot, Adams, & Zeichner, 2002).

Anti-gay violence can prove to be fatal. The case of Matthew Shepard is prime example of the dangers of homonegativity. Two men pretended to be gay to deceive Matthew Shepard. Matthew Shepard was then taken to a remote area where he was robbed, severely beaten, pistol whipped, tied to a fence, and left to die (Savin-Williams, 1999). Leonard "Lynn" Vinnes was a drag queen that lived in Baltimore, Maryland (Savin-Williams, 1999). Leonard was shot six times by group who felt "faggots" did not belong in their neighborhood (Savin-Williams, 1999). Barry Winchell was a soldier in the United States Army. Barry Winchell was dating a transgender performer at nightclub not far from the army base (France, 2000). Despite the "Don't

Ask, Don't Tell" policy, Barry Winchell receiving severe harassment from the other soldier because of his perceived homosexuality (France, 2000). On July 9, 1999, Barry Winchell died of internal injuries after in a beating with a baseball bat by a homonegative soldier (France, 2000).

Sexual Orientation Discrimination. Verbal harassment and intimidation are the most common forms of victimization of lesbians (Herek & Berrill, 1992). Parrot, Adams, & Zeichner (2002) report that 90% of gay and lesbian persons are targets for verbal abuse. Although researchers, practitioners, and policymakers may be tempted to downplay verbal harassment in comparison to physical harassment, verbal harassment is just as detrimental as physical assault. It has been suggested that slurs such as "faggot," "dyke," and "queer" are used to remind the oppressed of their subordinate status. Such anti-gay verbal abuse represents a form of violence and a reminder of the ever present threat of a possible physical assault (Herek & Berrill, 1992). The psychological effects of verbal abuse may be as brutal as physical assaults. There is always the possibility that victims of verbal abuse may become psychologically scarred. A psychological scar affects how one feels about oneself and expressions of feelings (Herek & Berrill, 1992).

Currently, there is a national debate in the United States regarding legalizing same-sex marriage (Herek, 2006). During the congressional elections of 2006, many states voted on the notion of legalizing same-sex marriage. The results of the polls indicated that the majority of the United States opposed the idea of legalizing same-sex marriage (Herek, 2006). President George W. Bush stated that same-sex marriage undermines the welfare of children and the stability of society (Naples, 2004). Many conservatives believe that same-sex marriage goes against that of traditional marriage (Naples, 2004). However, many gay and lesbians couples believe otherwise and feel that they are being discriminated against. Homonegative persons view homosexuality as a serious social problem with potentially grave physical and mental health consequences.

Mental Health & Counselor Attitudes. Historically, mental health professionals have not always been advocates of the mental well-being of gay and lesbian persons. According to Adams (1987), mental health professionals have not been supportive of gay and lesbians issues. The second edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-II; American Psychiatric Association, 1968) included homosexuality as a mental disorder. This diagnosis was placed in the section on sociopathy and described as crimes against society, along with substance abuse and sexual disorders. In 1973, the American Psychiatric Association removed this diagnosis from the official list of mental disorders. However, the category of ego-dystonic homosexuality remained to categorize distress experienced by individuals who wanted to change their sexual orientation. A survey of 2,500 members of the American Psychiatric Association conducted after the removal of homosexuality as a diagnostic category from the *Diagnostic and Statistical Manual of Mental Disorders* found that the majority considered homosexuality pathological and also perceived homosexuals to be unhappy and incapable of mature and loving relationships compared to heterosexuals (Garnets, Hancock, Cochran, Goodchilds, & Peplau, 1991). It was also found that mental health professionals differed in their use of gay-affirmative practice. In 1987, the American Psychological Association encouraged members not to use this diagnosis (Fox, 1988). The American Psychological Association eventually dropped the diagnosis in the *Diagnostic and Statistical Manual of Mental Disorders-Third edition* (American Psychiatric Association, 1987). These actions helped to counteract the previous association of homosexual sexual orientation as mental disorder. By changing the *Diagnostic and Statistical Manual of Mental Disorders* regarding homosexuality, mental health professionals demonstrated concern and affirmation for gay and lesbian persons.

Since the removal of homosexuality from the DSM, progress of the mental health welfare for gay and lesbian person has been very slow. There is little effort in the training of mental health professionals to understand the prejudice and discriminations that gay and lesbian persons face (Ellis, Kitinger, & Wilkinson, 2002). Mental health professionals must investigate the causes and indicators of negativity towards gay and lesbian persons in effort to assist in alleviating these prejudices. This understanding could also contribute to the development of educational courses that can address negative heterosexual attitudes that could possibly contribute to physical harm, psychological trauma, and social stigmas of homosexual and bisexual students on college campuses.

Unfortunately, counselors are not above expressing homonegativity. In a study of conducted by Eliason (2000), it was found that counselors had very little formal education related to gay and lesbian clients. Nearly half of the counselors held negative or ambivalent attitudes about these clients. The greatest amount of negativity was associated with transgender persons. Fifty-six percent of the respondents had negative attitudes towards transsexuals. Forty-seven percent of the respondents had negative attitudes towards bisexuals. About one-third of the counselors surveyed reported negative attitudes toward gay men (36%) and lesbians (32%). The majority of counselors lacked knowledge about domestic partnership and legal and family issues of importance to gay and lesbian clients.

In a study conducted by Barrett & McWhirter (2002), researchers investigated how client sexual orientation, counselor trainee homophobia, and counselor trainee gender affected counselor trainees' assignment of positive and negative adjectives to clients. The researchers were investigating the premise that heterosexuals experience greater discomfort with individuals who are not heterosexual when they are the same gender than when they are the opposite gender.

The researchers made the following hypotheses: A higher level of homophobia will be associated with the assignment of more unfavorable adjectives for gay and lesbian clients than for heterosexual clients; a higher level of homophobia will be associated with the assignment of fewer favorable adjectives for gay and lesbian clients than for heterosexual clients; the assignment of negative adjectives to gay and lesbian clients will vary by gender of the counselor trained and also by his or her level of homophobia, and counselors trainees with friendships with gay men and lesbians will have lower levels of homophobia (Barrett & McWhirter, 2002). Forty men and 122 women participated in this study. The participants completed the following measurements: the Adjective Check List, the Index of Homophobia, and a demographic questionnaire. The Adjective Check List contains 300 individual adjectives. Seventy-five adjectives are considered favorable adjectives and 75 adjectives are considered unfavorable adjectives. The Index of Homophobia is 25-item scale designed to measure individual's affective responses of fear, disgust, anger, discomfort, and aversion toward gay men and lesbians (Barrett & McWhirter, 2002). A demographic questionnaire was created by the researchers asking for the following information: gender, age, ethnicity, sexual orientation, degree program, number of years of counseling experience, and the number friendships with gay men and lesbians.

The researchers reported the following: higher homophobia scores were related to the assignment of more unfavorable adjectives to lesbian clients but not to gay male clients; homophobia was not significantly correlated with unfavorable adjectives for heterosexual clients; less homophobia counselor trainees assigned significantly more favorable adjectives to gay male or lesbian clients than to heterosexual clients, and there was not a significant difference in the number of friendships a counselor trainee had with gay men and lesbians (Barrett & McWhirter, 2002).

Fischer (1998) examined the training that counseling psychology and clinical psychology students in gay, lesbian, and bisexual issues. The following questions were investigated: what type of training in gay, lesbian, and bisexual issues are counseling psychology and clinical psychology doctoral students receiving; do the students believe their coursework will prepare them to work with gay, lesbian, and bisexual clientele; and does the training in gay, lesbian, and bisexual issues have an influence on attitudes toward gay and lesbian persons (Fischer, 1998). The participants consisted of 25 counseling psychology students and 25 clinical psychology students that were randomly selected from APA accredited counseling and clinical psychology programs (Fischer, 1998). The Survey of Training Experiences was used to assess the student's training experiences and coursework, and the Index of Homophobia was used to assess whether the student had a homophobic or non-homophobic attitude (Fischer, 1998). The results indicated that the counseling psychology students received more training in gay, lesbian, and bisexual issues than clinical psychology students (Fischer, 1998). Overall, neither of the disciplines was sufficiently training their students to work with gay, lesbian, and bisexual clientele as the only training experience the counseling students had over the clinical students was a multicultural counseling course (Fischer, 1998). It was found that counseling psychology students had been encouraged to explore their own possible heterosexist biases (Fischer, 1998). In regards to homophobic attitudes, the majority of the participants scored in the non-homophobic range (Fischer, 1998). The author makes the case that the apprehensiveness of working with gay, lesbian, and bisexual clientele is not due to homonegative attitudes, but rather lack of proper training (Fischer, 1998).

In a study conducted by Lim & Johnson (2001), it was hypothesized that attitudes of male social work students would have more negative attitudes toward homosexuals than female social

homosexual or not. Most of the empirical research in this area is limited due to the fact its focus has been on heterosexuals' attitudes toward gay men and not lesbians (Herek 2000).

In a study conducted by Schellenberg, Hirt, & Sears (1999), researchers investigated attitudes toward homosexuals among a broad selection of undergraduate students. It was hypothesized that students who majored in the Arts and Social Sciences would have more liberal views than students who majored in Business and the Natural Sciences (Schellenberg, Hirt, & Sears, 1999). The researchers also tested a finding of Kite & Whitley (1998) which was as follows: although males' attitudes toward homosexuals tend to be more negative than females; acceptance of homosexuality varies as a function of the gender of the homosexual. Attitudes toward gay men are more negative than attitudes toward lesbians. Approximately 199 undergraduate students participated in this study. The participants' ages ranged from 18-35. The researchers administered the Attitudes toward Gay Men and Lesbians (ATGL) scale developed by Herek. The scale consists of 10 items measuring attitudes toward lesbians and gay men. The results indicated that students majoring in Arts and Social Science had more positive attitudes toward homosexuals than students majoring in Business and Natural Science. Although there were no differences between Business majors and Natural Science majors, the Arts majors had more positive attitudes than Social Science majors (Schellenberg, Hirt, & Sears, 1999). The results supported previous findings that female students had more positive attitudes than male students (Schellenberg, Hirt, & Sears, 1999). Attitudes toward lesbians were more positive than attitudes toward gay men. There were several limitations to this study that the researchers did not address. The researchers made several of generalizations based on one instrument, ATGL. The sample population consisted of less than 8% of non-European descent participants.

Negy & Eisenman (2005) did a comparative study of African-American and Caucasian-American college students' affective and attitudinal reactions to lesbian, gay, and bisexual individuals. Seventy African-Americans and 143 Caucasian-Americans participated in this study. Eighty-nine percent of African-Americans indicated that their religious affiliation was Christianity, and 76% of Caucasian-Americans indicated Christianity as their religion. All participants completed the Index of Attitudes toward Homosexuals (IAH) and the Heterosexual Attitudes toward Homosexuality questionnaire. To determine if African-Americans and Caucasian-Americans differed on demographic variables, a MANOVA was used with ethnicity serving as the independent variable. Age, class standing, SES, frequency of church attendance, religious commitment, and socially desirable responding served as the dependent variables. The results indicated that African-Americans had modestly higher homophobia and homonegativity scores than Caucasian-Americans (Negy & Eisenman, 2005). For both ethnic groups, gender and religiosity variables significantly predicted homophobia and homonegativity. Males in both ethnic groups had significantly higher homophobia and homonegativity scores than females (Negy & Eisenman, 2005).

Gender & Gender Roles as Predictors. In a study conducted by D'Augelli & Rose, M. (1990), the researchers hypothesized that college freshman would have negative attitudes towards gay men and lesbians and would report making homonegative statements regarding homosexuality. One hundred eight heterosexual females and 110 heterosexual males participated in this study (D'Augelli & Rose, 1990). The age range of the participants was 17 to 19 years old (D'Augelli & Rose, 1990). The participants were asked to fill out a background information questionnaire and complete the Attitudes Toward Lesbians and Gay Men Scale (D'Augelli & Rose, 1990). The background questionnaire inquired about the participants' religious affiliation,

living environment, and family upbringing. In regards to the Attitudes Toward Lesbians and Gay Men Scale, 29% of the participants believed that their university would be a better place if only heterosexuals attended there (D'Augelli & Rose, 1990). It was found that 98% had heard homophobic statements about gay men and lesbian (D'Augelli & Rose, 1990). It was also found that 85% of the participants had made recent homophobic comments and that it occurs often (D'Augelli & Rose, 1990). However, it was reported that 24% of the female participants had never had homophobic statements about gay men and lesbians (D'Augelli & Rose, 1990). Thirty-six percent of the female participants did not care about problems concerning gay men and lesbians, and 60% of the male participants did not care about problems concerning gay men and lesbians (D'Augelli & Rose, 1990). The results indicated that males had more homophobic attitudes toward gay men and lesbian than females (D'Augelli & Rose, 1990).

In a study conducted by Whitley (2001), the gender role belief system was investigated as it relates to attitudes towards homosexuality. The gender role belief system holds that people expect others to fit the standard for gender roles, traits, and physical attributes of that deemed by American society (Whitley, 2001). Specifically, a male should behave as man and show masculine traits, and a female should behave as woman show feminine (Whitley, 2001). Hypermasculinity is a personality trait in which a male shows extreme involvement and acceptance of the traditional male gender role (Whitley, 2001). Hyperfemininity is a personality trait in which a female shows extreme involvement and acceptance of the traditional female gender role (Whitley, 2001). Hypermasculinity and hyperfemininity could possibly be used as defense mechanisms to ward off speculations of homosexuality, or to reinforce boundaries of gender roles. Two hundred eleven females and 183 males participated in this study. The participants were from introductory psychology courses at a Midwestern public university. The

following instruments were in this study: the Attitudes Toward Women Scale the Bem Sex-Role Inventory, the Personal Attributes Questionnaire, the Attitudes Toward Feminism Scale, the Attitudes Toward Lesbians and Gay Men Scale, and the Index of Homophobia (Whitley, 2001). The results indicated that gender-role beliefs are closely linked to attitudes toward homosexuality. The results showed that people with homonegative attitudes perceived homosexuals to violate traditional gender role norms (Whitley, 2001).

In a study conducted by Mohipp and Morry (2004), it was hypothesized that individuals would have more positive attitudes toward lesbian women than toward gay men. It was also hypothesized that male participants would hold more negative attitudes toward gay men than lesbian women, whereas female participants would hold more negative attitudes toward lesbian women than gay men (Mohipp & Morry, 2004). The study consisted of 152 participants. The participants were students in introductory to psychology classes at the University of Manitoba. There were 87 women and 65 men. The mean age was 20 years old. Participants were asked to indicate whether they have had any contact with gay men and lesbian women. For gay men and for lesbian women responses were coded as 0 or 1. Zero indicated no and 1 indicated yes. Attitudes toward lesbian women and gay men were measured by the Attitudes Toward Lesbian and Gay scale (ATLG). The ATLG is a 7-point response scale ranging from 1 to 7. A score of 1 indicates strongly disagree and 7 indicates strongly agree. The scale consists of two 10-item subscales. The subscales measure attitudes toward gay men (ATG) and attitudes toward lesbian women (ATL). Responses were summed for each subscale with higher scores indicating more negative attitudes. A repeated-measures ANOVA was conducted on the ATL and ATG subscales with participants' gender as the between-subject variable. The results indicated that attitudes toward gay men were more negative than attitudes toward lesbians (Mohipp & Morry, 2004).

The mean for attitudes toward gay men was 32.78 and the mean for attitudes toward lesbian women was 26.31 (Mohipp & Morry, 2004). The results also indicated that men reported more negative attitudes toward gay men than lesbians.

Religion & Religiosity as Predictors. Research indicates that religiosity and religious beliefs are linked with homonegativity (Schulte & Battle, 2004). Many religions view homosexuality and bisexuality as sins, and do not condone homosexual or bisexual behavior. Hence, the assumption could be made that religion and religiosity may serve as predictors of homonegativity. Schulte & Battle (2004) investigated if there was a relationship between religious attendance and negative attitudes towards homosexuals. Three hundred fifteen students from 5 universities in the Northeast, Midwest, and Southern regions of the United States participated in this study (Schulte & Battle, 2004). The ATLG was used to measure the participants' attitudes towards lesbians and gay men (Schulte & Battle, 2004). The participants were also asked about their religious affiliation and the rate of attendance to religious sessions and events (Schulte & Battle, 2004). The results indicated that those who attended Baptist and Catholic religious services frequently tended to have a more homonegative attitude (Schulte & Battle, 2004).

Schwartz & Lindley (2005) examined if religious fundamentalism was a predictor of homonegativity. It was hypothesized that low religious fundamentalism would predict low levels of homonegativity; whereas high religious fundamentalism would predict high levels of homonegativity. The study was conducted in the "Bible Belt" region (Schwartz & Lindley, 2005). The "Bible Belt" is a region of the United States that strongly adheres to fundamentalist Christianity (Schwartz, & Lindley, 2005). Approximately, 122 women and 96 men participated in this study. The participants consisted of students at a mid-sized Southern university. The

Homophobia Scale and the Religious Fundamentalism Scale were used in this study. The results of the study indicated that religious fundamentalism is a strong indicator of homonegativity.

Rosik, Griffith, & Cruz (2007) investigated religious conservatives and their attitudes towards homosexuals. In this study, it was hypothesized that Christians would have more homonegative attitudes towards gay men and than lesbians (Rosik, Griffith, & Cruz, 2007). Approximately, 155 students from a California Christian liberal arts college participated in this study. One hundred thirteen of the participants were females and 42 of the participants were males. The following instruments were used in this study: the Sexual Orientation and Practice Scale, the Attitudes Toward Lesbian and Gay Men Scale (Revised Version), the Religious Commitment Inventory, and a demographic questionnaire developed by the researchers (Rosik, Griffith, & Cruz, 2007). The Sexual Orientation and Practice Scale is used to assess a person's attitude toward sexual conduct. The scale also evaluates attitudes toward homosexual individuals who are sexually active, homosexual individuals who are celibate, and heterosexual individuals who are sexually active (Rosik, Griffith, & Cruz, 2007). The Religious Commitment Inventory is used to assess to what degree a person adheres to his or her religious beliefs, values, and practices throughout daily life (Rosik, Griffith, & Cruz, 2007). The demographic questionnaire was used to collect information of the participant's age, gender, college classification, and religious identification. It was found that people who strongly endorsed the Christian identity showed tended to have high levels of homonegativity (Rosik, Griffith, & Cruz, 2007). However, there were no significant in regards to attitudes between males and females.

Sexual Attitudes as Predictors. Human sexuality is very complex and varies widely. The concept of sexual attitudes is no different. However, the concept of sexual attitudes has been described as being on a bipolar continuum (Hudson, Murphy, & Nurius, 1983). Attitudes

concerning human sexual expression can be described in terms of a liberal or conservative orientation on a bipolar continuum. At the liberal end of the continuum, people tend to feel that the expression of human sexuality should be open, free, and unrestrained. At the conservative end of the continuum, people tend to feel that the expression of human sexuality should be considerably constrained and closely self-regulated. Although there are people who adhere to extreme forms of a liberal or conservative orientation concerning human sexual expression, most people fall somewhere in between the extreme position (Hudson, Murphy, & Nurius, 1983). According to Leiblum, Wiegel, & Brickel (2003), gender has a significant impact on sexual attitudes. Research suggests that females are more sexually conservative than males. Although women report that they tend to not be frequent engagers of masturbation, pornography, and extra-relationship sex in comparison to men, they tend to be more tolerant towards homosexuality.

Eisenman & Dantzker (2006) investigated gender differences in Hispanics regarding sexual attitudes. It was hypothesized that Hispanic men would have a more liberal sexual attitude, and Hispanic women would have a more conservative sexual attitude (Eisenman & Dantzker, 2006). One hundred twenty-eight men and 199 women participated in the study. A 42-item questionnaire developed by the authors was administered to the participants. Participants responded to the items using a Likert-type scale similar to that of the Sexual Attitudes Scale (Hudson, Murphy, & Nurius, 1983). A response of 1 representing strongly disagree, and a response 5 representing strongly agree. The participants were also given a demographic questions sheet providing information such as age, gender, and marital status (Eisenman & Dantzker, 2006). The results supported the hypothesis indicating that men had more of a liberal sexual attitude, whereas women had more of a conservative sexual attitude (Eisenman & Dantzker, 2006).

In a study conducted Holland, Atkinson, & Johnson (1987), the researchers investigated the effects of sex and sexual attitude similarities on perceptions of counselors. It was hypothesized that subjects would rate a counselor expressing a sexual attitude similar to their own more positively than one expressing a dissimilar attitude. The sample population consisted of 209 college students enrolled in introductory to psychology courses at West Coast University (Holland, Atkinson, & Johnson, 1987). The following instruments were used in this study: Sexual Attitude Scale, Counselor Effectiveness Rating Scale, and the 15 Personal Problem Inventory. Two counselor descriptions were developed that were identical except for the counselor's sex (Holland, Atkinson, & Johnson, 1987). The counselor description included a photograph of the counselor, and a brief description of his or her educational and experiential background. Two counselor transcripts were developed that were identical except for three sentences in which the counselor expressed a conservative or liberal sexual attitude. The transcript depicted an unknown client asking the counselor about his or her opinion on whether or not the client should explore the sexual aspect of a new relationship. The participants were given the counselor description, a transcript, and then the 3 inventories. An ANOVA was used to analyze the data. The results supported the hypothesis. The participants perceived a counselor with a sexual attitude similar to their own more favorably than a counselor with a dissimilar attitude (Holland, Atkinson, & Johnson, 1987). An apparent limitation to this study would be the counselor descriptions and the transcript. The researchers made no mention of the ethnicity of the sample population.

In a study conducted by Olatunji, Lohr, & Meunier (2002), the researchers investigated emotional correlates and predictors of homophobic tendencies. Approximately, 138 participants completed this study. The following instruments were used in this study: the Index of Attitudes

Toward Homosexuals, the Sexual Attitude Scale, the Medical Fears Survey, the Disgust Emotions Scale, Padua Inventory, and the Fear Survey Schedule (Olatunji, Lohr, & Meunier, 2002). The Padua Inventory was used to assess obsessive and compulsive symptoms. The statistical analysis of this study consisted of multiple correlations between the measures, Pearson correlations (Olatunji, Lohr, & Meunier, 2002). The results indicated that the scores from the Index of Attitudes toward Homosexuals were positively correlated with results from the Sexual Attitude Scale, the Disgust Emotion Scale, and the Padua Inventory (Olatunji, Lohr, & Meunier, 2002). The researchers concluded that participants who showed homophobic tendencies or homonegative attitudes on the Index of Attitudes toward Homosexuals tend to have conservative sexual attitudes and high levels of disgust (Olatunji, Lohr, & Meunier, 2002).

After surveying the literature, gender has been found to be a correlate of heterosexual attitudes toward gay, lesbian, and bisexual individuals (Liang & Alimo, 2005). The literature also shows that heterosexual males tend have more negative attitudes toward homosexuals than females. However, the literature is lacking specific attention to women's attitudes towards homosexuals. As attitudes are an important predictor of behavior, it is particularly important that an increased understanding of negative attitudes toward gay and lesbians be sought (Herek, 2000). The purpose of this study is to investigate if sexual attitude expression correlates with levels of homonegativity. This study investigated the following hypothesis: females with conservative sexual attitudes should show higher levels of homonegativity, and females with liberal sexual attitudes should show more less homonegative expression.

Method

Participants

Seventy-five female undergraduate and graduate students at a university in the Southern region of the United States participated in this study. Twenty-nine percent ($n=22$) of the sample were graduate students, 26% ($n=20$) were college seniors, 22.7% ($n=17$) were college sophomores, 12% ($n=9$) were college juniors, and 9% ($n=7$) were college freshman. Ethnically, the vast majority were Caucasian with 70.7% ($n=53$), 18.7% ($n=14$) were African-American, 6.7% ($n=5$) were Asian, and 4% ($n=3$) were biracial. The participant's ages ranged from 18-26 years old.

Instruments

The Sexual Attitude Scale (SAS) is a 25-item summated category partition scale that was designed to measure the extent to which an individual adheres to a liberal or a conservative orientation concerning sexual expression. Each item is scored on a 5-point "agree-disagree" continuum, and all but two items are worded and scored so that a higher score represents a more conservative orientation. The SAS is scored as bipolar agree-disagree continuum, and the total score ranges from 0 to 100 with a midpoint score of 50. A score below 50 indicates a more liberal sexual attitude, and a score above 50 indicates a more conservative sexual attitude. In regards to reliability, the scale has been investigated to have an alpha coefficient of .90 or larger. In regards to validity, the scale has been investigated to have validity coefficients of .60 or greater (Hudson, Murphy, & Nurius, 1983). The following are examples of the items on the scale: "sex education should be restricted to the home;" "I think sex should be reserved for marriage;" and "there is too much sex on television."

The Homonegativity Scale-*Lesbian Version* measures negative attitudes toward lesbians. The scale contains six items and is set up for response on a Likert-type scale with 1 indicating strongly disagree and 5 indicating strongly agree. Scores can range from 6 to 30. A score of 6-17 indicates a nonhomonegative attitude, and a score of 18-30 indicating greater homonegativity. In regards to reliability, the scale has been investigated to have an alpha coefficient of .84. In regards to validity, the scale has been investigated to have an alpha coefficient of .56 or greater (Morrison, Parriag, & Morrison, 1999). The following are examples of items on the scale: "lesbians are immoral" and "lesbians should not be allowed to work with children."

The demographic sheet was developed to assist in describing the sample population. Information concerning the participant's age, ethnicity, and class classification was obtained through the use of the demographic sheet.

Design & Procedure

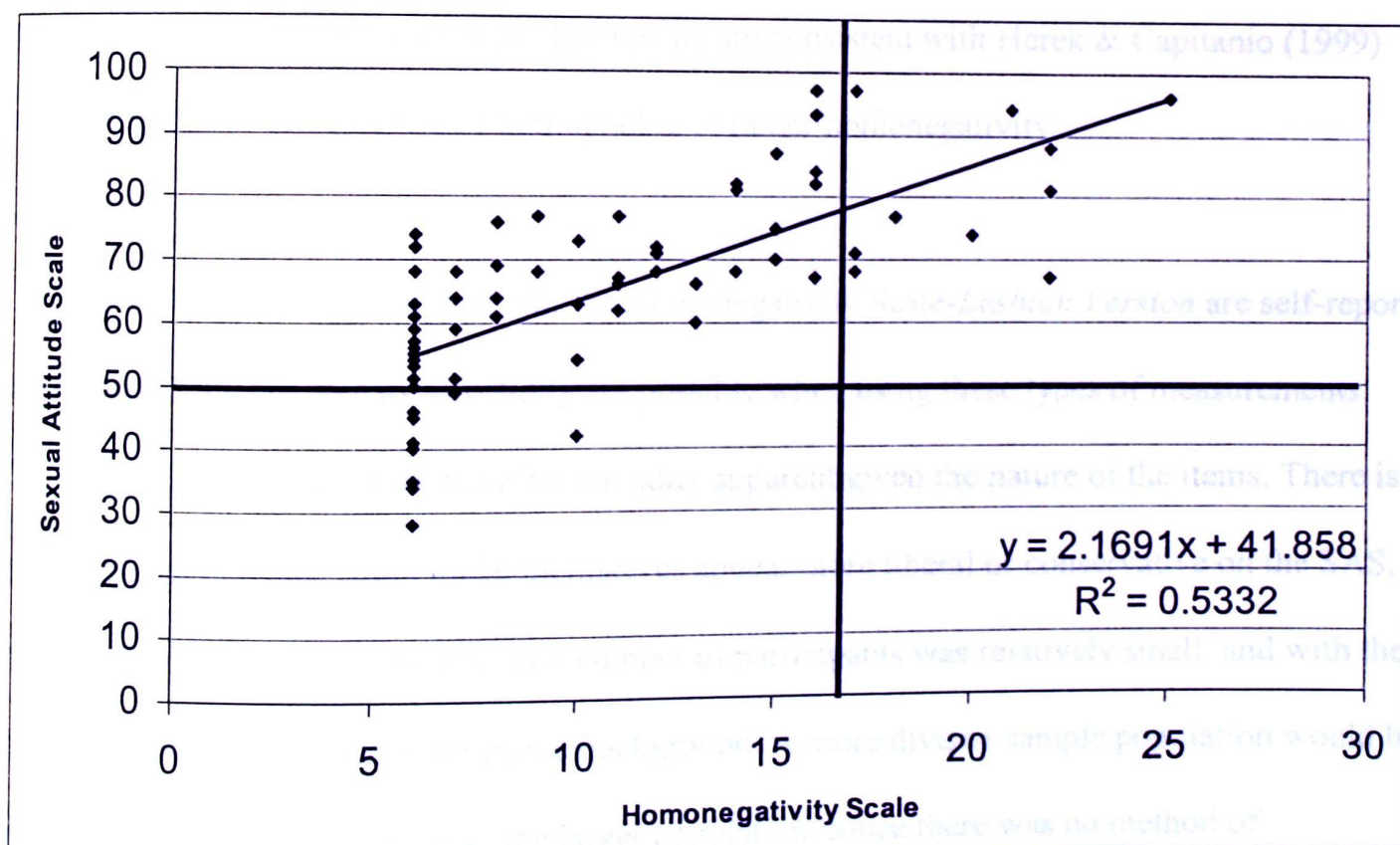
Participants for this study were recruited in undergraduate and graduate courses by the investigator. A written announcement was posted on a research information board indicating the nature of the study, the location of where the study was being conducted, and the investigator's contact information. Participants also had the option to schedule appointments for participation in the study. A time sheet was made available in the departmental office and was managed by the administrative assistant.

After a thorough explanation of the consent form (see Appendix A), participants were administered the inventories and a demographic sheet. Participants completed the inventories and a demographic sheet in individual testing units. All inventories and demographic sheets were coded with a number to indicate which inventories were completed by each participant prior to administration. Upon completion, participants were thanked for their participation.

Results

Scores on the SAS showed that 66 females had conservative sexual attitudes, and 9 females had liberal sexual attitudes. The average score on the Sexual Attitudes Scale was 65. The standard deviation was 15. The statistical mode for Sexual Attitudes Scale was 68. Scores on the HS indicated that 68 females had more non-homonegative attitudes, and 7 females had more homonegative attitudes. The average score on the Homonegativity Scale-Lesbian Version was 10. The standard deviation was 5. The statistical mode for the Homonegativity Scale-Lesbian Version was 6. A Pearson correlation analysis indicated a significant positive correlation between sexual attitudes and homonegativity ($r = .73, p < .01$, see figure below). College women who had higher homonegativity scores had higher conservative sexual attitude scores.

Figure 1.



Discussion

The results supported the hypothesis that there is a relationship between sexual attitudes and homonegativity in females. Although there is a strong positive correlation, this is mostly showing conservative attitudes and homonegativity since only 9 females were considered to have liberal sexual attitudes. There is an issue in regards to external validity with this study. Specifically, there appears to be a biased sample effect. There were not enough participants who had liberal sexual attitudes to distinctly show if there was a relationship between the measures. Looking at the data individually, there is a cluster of scores that are well above the midpoint (50) of the SAS. A score above 50 indicates a conservative sexual attitude. This same cluster of scores also showed low levels of the homonegativity on the Homonegativity Scale. Nevertheless, the findings are consistent with Leiblum, Wiegel, & Brickel (2003) indicating that females have a more sexually conservative attitude. The results are consistent with Herek & Capitanio (1999) that females have lower levels of homophobia or rather homonegativity.

Limitations

The Sexual Attitude Scale and the Homonegativity Scale-*Lesbian Version* are self-report measures. Therefore, threats to validity are possible when using these types of measurements. The purpose of the study may have been readily apparent given the nature of the items. There is a possibility participants could make themselves appear more liberal or conservative on the SAS, and less homonegative on the HS. The number of participants was relatively small, and with the majority being White/Caucasian ethnic background. A more diverse sample population would be needed to generalize the results to the larger population. Since there was no method of controlling for sexuality other than self-identification, there is a possibility that lesbians participated in the study. Lesbians participating in the study produces confounds such as biases

and internalized homonegativity. Internalized homonegativity is the internalized negative attitudes that gay men and lesbians possess about homosexuality (Mayfield, 2001).

In regards to sexual attitudes, the results indicated that the majority of the participants had more liberal sexual attitude. Since majority of the students were in psychology courses, this could account for more humanitarian-type thinking or socially liberal ideology. Since 26% of the participants were graduate students, the rationale for the research may have been easily discovered; therefore, contributing to a willingness to respond accordingly.

This study was conducted in what is known as the "Bible Belt" of the United States. The "Bible Belt" refers to the mid-west and southern regions of the United States which have a strong Christian Protestant influence, and tend to be morally and socially conservative (Ginn, Walker, Poulson, Singletary, Cyrus, & Picarelli, 1998). Should this be the case, there may have been a predisposition to have an unbalanced sample of females with conservative sexual attitudes. Although religiosity is a known predictor of homonegativity, it was not measured in this study.

Implications for Counselors

It is important for mental health professionals to be aware of any biases, prejudices, or discriminations they might have against gay and lesbian clientele. The American Counseling Association has adopted a resolution that states that it: "opposes portrayals of lesbian, gay, and bisexual youth and adults as mentally ill due to their sexual orientation; and supports the dissemination of accurate information about sexual orientation, mental health, and appropriate interventions in order to counteract bias that is based on ignorance or unfounded beliefs about same-gender sexual orientation (ACA, 1998, p. 1-2)." In order to provide gay male and lesbian clientele with effective counseling services, it will be necessary to build trust factors with their counselors.

Classroom interaction with gay men and lesbians has helped reduce homonegativity in heterosexual (Walters, 1994). According to Walters (1994) when audiovisual presentations were combined with lectures about homosexuality and homophobia in a human sexuality course, it was reported that students had more empathy and less prejudice attitudes than in comparison to a class with lectures only. According to Chin & Trimble (2004), an effective counseling relationship with gay and lesbian clients can be established if counselors evaluate and examine their own heterosexism. The authors also suggests the following: mental health professionals need to be aware of gay and lesbians issues; mental health professionals should never assume a client's sexual orientation is heterosexual or homosexual; mental health professionals should be familiar about support groups and centers in the local and regional areas; and mental health professionals should aware of the incidence and prevalence rates of the substance abuse in gay and lesbian populations (Chin & Trimble, 2004).

In regards to hate crime victims, counselors can be active in combating the violence perpetuated by homonegative persons. Mental health professionals can support penalties for discrimination and hate crimes based on sexual orientation. Mental health professionals can also support organizations that work to stop anti-gay hate crimes, and provide support groups for victims of hate crimes. Counselor educators should educate their students on the consequences of discriminating a person based on his or her sexual orientation. Acts of anti-gay violence not only threatens individual victims, but all gay and lesbian persons (Herek & Berrill, 1992). If the client has not reported a crime that has been committed against, the mental health professional should encourage the client to report the crime and offer any assistance. Assisting clients in reporting harassment to the authorities can help the client cope with the situation.

Perez, DeBord, & Bieschke (2000) suggest that mental health professionals should examine whether their theoretical approach allows gay and lesbian people of color to feel supported in the therapeutic process. Mental health professionals need to understand clients from a multicultural perspective, which includes exploration of how the individual is affected by various factors such as societal messages, familial messages, group memberships, multiple social identities, oppression, and power (Perez, DeBord, & Bieschke, 2000).

According to Perez, DeBord, Bieschke (2000), the need for psychology graduate programs to include gay and lesbian related training is documented in studies in which it has been found that students and mental health practitioners believe that their programs have not trained them adequately to work with gay and lesbian clients or perceive heterosexism in their education. Mental health professionals in training have reported feeling incompetent and unprepared to work effectively with gay and lesbian clients (Perez, DeBord, & Bieschke, 2000). It is very important for future mental health professionals to receive proper training in gay and lesbian issues. Mental health professionals in training should be aware of the heterosexism. If psychology graduates programs do not provide proper training in gay and lesbian issues, mental health professionals could possibly do harm to gay and lesbian clients.

It would be a good idea for counselors employed on college campuses to hold seminars about diversity and include sexual orientation. Counselors can provide information to students about the dynamics and consequences of homonegativity. This could invoke students to question and explore sexual prejudices that they may possibly have. If there is a demand, counselors should be ready and able to support a gay and lesbian support group or "safe space" network. By providing a gay and lesbian support group, students will be able to share experiences and possibly feel safe in reporting anti-gay incidences.

It cannot be stressed enough the need for sufficient training in gay and lesbian issues. Graduate psychology and counseling programs should develop courses that specifically address homosexual, bisexual, and transgender issues. More research should focus on dealing with negative attitudes toward homosexual and bisexual persons. Counselor educators should challenge their students to confront their heterosexism. Students should have a rotation at a gay and lesbian center for their practicum and internships so that they may get the much needed experience and exposure to be an effective mental health professional for gay and lesbian clientele.

Effective therapies and counseling techniques are developed through research and application. More research should focus on effective counseling techniques for working with clients of non-heterosexual orientation. Counselor educators should encourage their students to design research protocols that investigate gay and lesbian populations.

Implications for Future Research

The study should be replicated using a more diverse sample population. The sample population in future replication studies should consist of more than 100 participants who are African-American, Hispanic or Latino, or Asian-American. It is important to have proper representation of minority groups. Religiosity would also be a variable that should be investigated. Religiosity has been shown to be a predictor of homonegativity (Schulte & Battle, 2004). The level of contact with gay and lesbian persons is also a variable that should be investigated. The amount of contact and familiarity a person has with gay or lesbian person has also been shown to be predictors of the comfort level with gays and lesbians (Mohipp & Morry, 2004).

Additionally, future research should include a focus on bisexuality. Instead of focusing on homonegativity researchers could investigate negative attitudes towards bisexuals. People often group bisexuals and homosexuals in one group. However, these are 2 distinct sexual orientations. More research on internalized homonegativity in lesbians is needed (Mayfield, 2001). Internalized homonegativity is internalized negative attitudes that gay men and lesbians possess about homosexuality (Mayfield, 2001). Internalized homonegativity is a different concept than that of homonegativity regarding heterosexuality in which this study investigated. More research should be done in the area of homonegativity in order to promote positive attitudinal change in society towards homosexual and bisexual person. Finding the most significant predictor of homonegativity has important implications for the reduction of negative attitudes toward homosexuals, which may require different strategies for men and women (Basow, 2000).

Conclusion

In conclusion, this study has made a contribution to gay and lesbian research. It is possible that the results found in this study will give mental health professionals and researchers more insight on possible predictors of homonegativity in order to promote attitudinal change. More importantly, this research should support the premise that mental health professionals must take an active role in combating homonegativity. Anti-gay violence and discrimination based on sexual orientation are among the many consequences of homonegativity. It has been said that "people fear what they do not understand." If homonegativity is possibly a result of lack of understanding, then mental health professionals should make it their concern to produce information to help homonegative persons understand. Research is an excellent way to find understanding of the many problems and questions of life.

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INFORMED CONSENT FORM

James G. Archibald
Psychology Department
Austin Peay State University
Clarksville, Tennessee

This study is titled "Attitudes Toward Gay, Lesbian, and Transgendered People", which explores sexual attitudes of college students. The study involves responding to items on 2 inventories and providing demographic information. One inventory measures conservative or liberal attitude, and the other measures attitudes toward homosexuality. The demographic information is collected to describe the sample population in order to thoroughly report

the results of the study. It is important to note that the study results are kept confidential. All data collected from this study will be stored in the Department of Psychology files. **APPENDIXES** All rights and privacy will be protected. Data collected from the APSU Department of Psychology will be kept confidential. The records will be kept completely confidential for 5 years. The records will not be revealed unless requested by the court.

You are free to refuse to participate in this study. At any time, the participant may withdraw from the study without penalty or consequence. If there are any questions about this project, contact James G. Archibald at 931-221-2222. All questions of research participants should be directed to the Institutional Review Board's secretary at 931-221-2222. The use of Human Research Subjects at Austin Peay State University is approved by the Institutional Review Board's secretary is

I, _____, understand the above conditions of the study and indicate that you understand the above conditions of the study and indicate that you have had the opportunity to have your questions answered by the researcher.

Date

Date

RESEARCH CONSENT FORM

Sexual Attitudes of Women
James G. Archibald
Austin Peay State University
Psychology Department

Participation in this research project, which explores sexual attitudes of women, is completely voluntary. The study involves responding to items on 2 inventories and providing some brief demographic information. One inventory measure whether a person has a conservative or liberal attitude, and the other inventory investigates attitudes towards sexuality. The demographic information provides descriptive information of the sample population in order to thoroughly report the findings.

Every attempt will be made to see that the study results are kept confidential. A copy of the records from this study will be stored in the Department of Psychology in a secured compartment. Although all rights and privacy will be maintained, research related personnel from the APSU Department of Psychology have access to the study records. The records will be kept completely confidential according to current legal requirements. The records will not be revealed unless required by law, or as noted above.

There are no known risks of participating in this study. At any time, the participant may withdraw from the study without penalty or consequence. If there are any questions about this research project, contact James G. Archibald at 931-221-7446. Concerns about the treatment of research participants should be directed to the Institutional Review Board on the use of Human Research Subjects at Austin Peay State University. The phone number for the Institutional Review Board's secretary is 931-221-7414.

Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researcher.

Participant's Signature

Date

Participant's Name

Researcher's Signature

Date

ID# _____

Participant Background Information Questionnaire

The following questions will help us gather general information about you. Your answers will be kept strictly confidential. Please be complete as possible and feel free to make notations in the margins if necessary for clarification.

1. What is your age? _____

2. What is your current college level?

- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior
- ☐ Graduate

3. What is your race or ethnic background?

- | | |
|---|--|
| <input type="checkbox"/> Black or African-American | <input type="checkbox"/> Latino origin |
| <input type="checkbox"/> Hispanic origin | <input type="checkbox"/> Alaska Native |
| <input type="checkbox"/> Asian or Asian-American | <input type="checkbox"/> White, non-Hispanic |
| <input type="checkbox"/> Native American or American Indian | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Biracial or Multiracial: | |

Please specify ethnicities: _____

► Thank you for providing us with this information. It will be used only to describe study participants in general terms when reporting results and disseminating study findings.