

# Impact of a Live Transgender Panel Presentation on Attitudes Toward Transgender Individuals

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## Abstract

Prejudice and discrimination against others within a specific reference group have been found to be related to attitudes and beliefs regarding the reference group (Whitley & Kite, 2006). Sexual minorities are one reference group which may experience significant discrimination and prejudice. Discrimination and prejudice have been widely reported by transgender individuals (Lombardi, Wilchins, Priesing, & Malouf, 2001). Intergroup contact theory predicts that interaction between minority and majority groups can reduce stereotyping and discrimination. The present research examined the impact of exposure to a live panel of transgender individuals on students' attitudes toward transgender individuals. Findings support the value of intergroup contact in reducing stereotyping.

## Introduction

Gay, lesbian, bisexual, and transgender (GLBT) individuals frequently experience prejudice and discrimination. According to Dworkin and Yi (2003), GLBT individuals around the world are targeted for who they are, not what they do. Negative attitudes toward homosexuals may come from religious doctrines, parents, friends, or significant others, yet these attitudes are rarely based on actual contact with GLBT people (Larsen, Reed, & Hoffman, 1980). GLBT individuals are victims of various degrees of prejudice and discrimination, from low family support, verbal abuse, to actual physical assault. As a result of the prejudice and discrimination, GLBT individuals may exhibit increased physical and mental distress and fear about seeking healthcare (Mayer et al., 2008). Transgender individuals are often targets of victimization and discrimination because of their non-conformity with binary gender systems and they are frequently stereotyped as deviants (Grossman & D'Augelli, 2006). Transgender people may experience "transphobia" from other individuals who are disgusted by them or refuse to acknowledge their chosen gender (Carroll & Gilroy, 2002). Lombardi et al. (2001) found that over half of their 402 GLBT participants had experienced harassment or violence. Over a hundred of those experienced violent harassment. Violence against transgender individuals is also thought to be underreported (Lombardi et al., 2001).

Social psychological theories may help to explain why stigma and prejudice exist and suggest ways to reduce these in our community. Studies of attitudes toward ingroup ("us") and outgroup ("them") have suggested that ingroup members are generally viewed as diverse individuals. Individual differences are often underestimated for outgroup members, leading to a tendency to believe that outgroup members share similar characteristics, or stereotyping of outgroup members. Stereotyping can be explained, at least in part, by limited intergroup interactions that restrict knowledge of outgroup members and limit the opportunity for stereotypical beliefs to be challenged (Whitley & Kite, 2006). As early as the 1950s, Allport noted that interactions between groups could, under the right conditions, lead to improved intergroup attitudes (Allport, 1954). Since that time, more than 200 research studies have examined various aspects of what has come to be known as the contact hypothesis or intergroup contact theory (Whitley & Kite, 2006). Evidence suggests that intergroup contact tends to increase knowledge about, decrease stereotyping of, and decrease expectations of negative interactions with outgroup members as well as increase perceptions of unity, decrease intergroup anxiety, and increase empathy for outgroup members (Whitley & Kite, 2006). In short, one of the best ways to reduce stigma and prejudice, including prejudice against sexual minorities and transgender individuals, would involve increased intergroup contact.

## Introduction (continued)

Evidence suggests that educational interventions aimed at stereotype reduction can reduce negative attitudes toward gay and lesbian individuals. For example, Pettijohn and Walzer (2008) found that a Psychology of Prejudice course addressing racism, sexism, and heterosexism decreased prejudice across these areas (compared to an Introductory Psychology course), with greater reductions in prejudice associated with greater course involvement. Van de Ven (1995) found reductions in anger and discriminatory intentions among high school students who completed a six component course addressing homophobia, including a live panel of gay and lesbian people as one component. While these comprehensive educational approaches appear efficacious, there is also some evidence that briefer interventions may show promise. For example, an uncontrolled pre-test/post-test evaluation of a live panel of gay and lesbian individuals found significant reductions in homophobia among college students (Nelson & Krieger, 1997). On the other hand, a study comparing a live panel to a gay pride video and a no-treatment comparison group found no significant change in homophobia scores for either of the interventions versus the comparison group (Cotton-Huston & Waite, 2000). Limited empirical data are available to indicate whether these approaches will generalize to attitudes toward transgender individuals.

## Method

### Participants

The mean age of the sample of 42 participants who completed the study was 22.7 years ( $SD = 6.0$ ). Approximately 79% of participants were female, 71% were Caucasian/White, 86% identified as heterosexuals, 64% indicated Jewish-Christian religious backgrounds, and 88% were upper level students (i.e., juniors and seniors). Table 1 displays the demographic characteristics of participants. Ethnic distributions are comparable to the distributions of UWF students.

Table 1  
Demographic Characteristics of Sample ( $N = 42$ )

	Condition A ( $n = 20$ )	Condition B ( $n = 22$ )	Total ( $N = 42$ )
Age	$M = 23.5 (SD = 8.5)$	$M = 22.0 (SD = 2.3)$	$M = 22.7 (SD = 6.0)$
Female	17 (85.0%)	16 (72.7%)	33 (78.6%)
Male	3 (15.0%)	6 (27.3%)	9 (21.4%)
Caucasian/White	14 (70.0%)	16 (72.7%)	30 (71.4%)
African American/Black	4 (20.0%)	2 (9.1%)	6 (14.3%)
Other	2 (10.0%)	4 (18.2%)	6 (14.3%)
Heterosexual	16 (80.0%)	20 (90.9%)	36 (85.7%)
Non-heterosexual	4 (20.0%)	2 (9.1%)	6 (14.3%)
Jewish-Christian	13 (65.0%)	14 (63.6%)	27 (64.3%)
Non-Jewish-Christian	2 (10.0%)	2 (9.1%)	4 (9.5%)
No religious affiliation	5 (25.0%)	6 (27.3%)	11 (26.2%)

## Method (continued)

### Procedure

Following IRB approval, a total of 45 students enrolled in an undergraduate course on human sexuality participated in the study and were randomly assigned to one of two conditions: A) a live panel presentation followed by a lecture presentation ( $n = 23$ ), or B) a lecture presentation followed by a live panel presentation ( $n = 22$ ). Twenty students from condition A and all 22 students from condition B completed all presentations and assessments. No significant differences in demographic distributions were found between the two conditions.

After written informed consent for the completion of assessment measures was obtained, participants anonymously completed demographic items and self-report questionnaires before the intervention, after the first component of the intervention (panel for condition A or lecture for condition B), after the second component of the intervention (panel for condition B or lecture for condition A), and again at three weeks follow up.

The live transgender panel consisted of four transgender individuals in either phases of the transitioning process. Three panelists were male-to-female transsexuals and one panelist was a female-to-male transsexual. All panelists had some experience with hormonal therapies. Three of the panelists were pre-operative or non-operative (all in their 20s) and one panelist was post-operative (over 60 years old). Panelists discussed their developmental histories as transgender individuals as well as the emotional impact of their experiences. The lecture presentation covered topics including definitions of terminology related to gender incongruence, incidence and prevalence, etiology, diagnostic criteria for Gender Identity Disorder, issues facing transgender persons, and the standards of care for transgender persons.

### Measures

A 20-item, single factor Attitudes Towards Transgender Individuals Scale (ATTI; Walch et al., 2008) was administered along with the two factor, 32-item Genderism and Transphobia Scale (GTS; Hill & Willoughby, 2005). The ATTI assesses respondents' level of agreement with positive and negative statements about transgender individuals using a five point Likert-type scale, with higher scores indicating more positive attitudes and greater acceptance. The GTS assesses attitudes towards gender non-conforming individuals and gender-bashing behaviors using a seven point Likert-type scale, with higher scores indicating greater discomfort with gender non-conforming individuals. There is good evidence of reliability ( $\alpha = .96$  and  $.95$  respectively) and validity for each of these measures.

## Results

A repeated measures analysis of variance was conducted to examine GTS scores as a function of condition and time. Results revealed a significant main effect for time,  $F(3, 38) = 8.083, p < .001$ , and a significant condition by time interaction,  $F(3, 38) = 4.093, p < .05$ . The change in GTS scores from time 1 to time 2 differed as a function of condition,  $F(1, 40) = 5.030, p < .05$ , with significantly greater reductions in transphobia scores occurring for the students exposed to the live panel presentation. The change in scores from time 2 to time 3 also differed as a function of condition,  $F(1, 40) = 4.388, p < .05$ , with further reductions in transphobia scores occurring only for the students who had received the live panel presentation following the lecture presentation. No significant main effects or interaction effects were found for the ATTI scores. Results are depicted in figure 1 and 2.

## Results (continued)

Figure 1

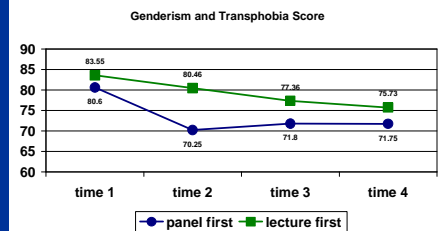
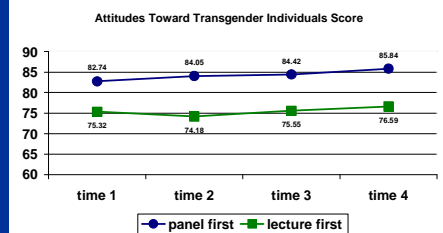


Figure 2



## Discussion

Significant reductions in transphobia scores or negative attitudes toward transgender individuals were found across time for students in both conditions. The live transgender panel presentation evidenced steeper initial reductions in transphobia than a lecture presentation on transgender issues. Further reductions in transphobia scores were seen after the addition of the live transgender panel presentation following the lecture presentation. However, further reductions in transphobia scores were not found after the addition of the lecture following the live panel presentation. Results suggest that live panel presentations evoke greater reduction of negative attitudes and beliefs toward transgender individuals than informational lecture presentations, supporting the potential value of intergroup contact theory for stereotype reduction.

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