

Determining The Attitudes of Nurses Towards Lesbians and Gays and The Factors Driving Their Attitudes

Hemşirelerin Lezbiyen ve Geylere Yönelik Tutumlarının ve Tutumlarını Etkileyen Faktörlerin Belirlenmesi

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ABSTRACT

This study was conducted to determine the attitudes of clinical nurses towards lesbian and gay individuals and the factors affecting these attitudes. The universe of the research consisted of 254 clinical nurses. The data collection tools used were "The Personal Information Form" and "Attitude towards Lesbians and Gay Men Scale (ATLG)". In addition, the mean scores of the nurses who encountered lesbian/gay individuals, wanted to meet lesbian/gay individuals, and knew lesbian/gay individuals from the Attitudes towards Lesbian and Gays Scale were found to be statistically significant and high ($p<.05$). In order to lesbian and gay individuals to receive equal health services without discrimination, nurses should be informed and their awareness should be increased. Qualitative and quantitative studies are needed to evaluate nurses' prejudices and attitudes towards lesbian and gay individuals from a wider perspective.

Keywords: Attitude, Gays, Lesbians, Nurse, Nursing

ÖZ

Bu araştırma, klinik hemşirelerinin lezbiyen ve gay bireylere yönelik tutumlarını ve bu tutumları etkileyen faktörleri belirlemek amacıyla yapılmıştır. Araştırmanın evrenini 254 klinik hemşire oluşturmuştur. Kullanılan veri toplama araçları "Kişisel Bilgi Formu" ve "Lezbiyen ve Gey Erkeklerle Yönelik Tutum Ölçeği (ATLG)" dir. Ayrıca lezbiyen/gey bireylerle karşılaşan, lezbiyen/geylerle tanışmak isteyen ve lezbiyen/gey tanıyan hemşirelerin Lezbiyen ve Geylere Yönelik Tutum Ölçeği puan ortalamaları istatistiksel olarak anlamlı ve yüksek bulunmuştur ($p<.05$). Lezbiyen ve gay bireylerin ayırım gözetmeksizin eşit sağlık hizmeti alabilmeleri için hemşireler bilgilendirilmeli ve farkındalıkları artırılmalıdır. Hemşirelerin lezbiyen ve gay bireylere yönelik önyargı ve tutumlarını daha geniş bir perspektiften değerlendirecek nitel ve nicel çalışmalara ihtiyaç vardır.

Anahtar Kelimeler: Tutum, Geyeler, Lezbiyenler, Hemşire, Hemşirelik

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INTRODUCTION

Gender is usually determined using the male and female genitalia, but chromosomes and sex hormones can also be used to determine gender.¹ According to this distinction, there are two genders, male and female. Gender is defined as the roles imposed on men and women by society.² Gender identity is the inner self-concept of a person. That is, a person is defined as male, female, both, neither nor another gender.¹ Sexual orientation is the desire to be with someone of the opposite sex, same sex, or both sexes. This attraction is classified as heterosexual (attraction to the opposite sex), homosexual (attraction to the same sex), bisexual (attraction to both sexes) or asexual (no interest or sexual attraction to either sex) However, the terms lesbian and gay are generally used to describe the sexual identity of people in society. The terms lesbian and gay, on the other hand, refer to men and women who have an emotional, physical and sexual orientation towards their own gender.³

The general opinion in society is that all people are emotionally and erotically attracted to the opposite sex.³ However, it should be accepted that there are people in society who are sexually attracted to one or both sexes as well as people who are not sexually attracted to both sexes. In a study by the Global Market Research and Opinion Expert (IPSOS) covering 27 countries, it was found that 7% of people are attracted only or mostly to the same sex, 4% are equally attracted to both sexes and 83% are attracted only to the opposite sex. It was found that 6% of people do not know or do not indicate to which sex they are sexually attracted.⁴ In Turkey, it is not clearly known to which sex persons are sexually attracted, as only the biological sex of persons is accessible through the basic statistics of the Turkish Statistical.⁵ However, according to IPSOS data from 2021, this rate is 1% in Turkey.⁴

Despite important socio-economic developments in the world, research shows that most societies have negative attitudes towards homosexual people.⁶⁻⁹ These

negative attitudes result in these individuals being discriminated and stigmatised against in many areas such as education, health and the economy. In the studies by Goçmen and Yılmaz and Acar-Erdur and Ozgunlu it was found that homosexual people are denied equal rights in the workplace and discriminated against in hiring/firing.^{10,11} Sears et al., reported that 45.5% of workers were fired or not hired in the past five years because of their sexual orientation or gender identity during the COVID-19 pandemic. In the same study, many workers reported changing their appearance to hide their sexual identity to avoid discrimination and harassment.¹²

One of the main areas in which LGBT individuals, who experience fear and distress in many areas of their lives because of their sexual identity, face discrimination is in health services.¹³ Although these individuals need similar health services as all other individuals, they may delay or refuse treatment because of the discrimination they experience. As a result, it has been reported that the risk of developing diseases such as obesity and cancer, as well as the risk of smoking and alcohol and drug use, increases among these individuals. In addition, the risk of depression and suicide has been reported to be higher among these individuals.^{14,15}

Nurses play a key role in ensuring that individuals who are discriminated against on the basis of sexual identity receive equal and appropriate services. This is because nurses are health professionals who are in direct contact with people and provide uninterrupted care. In particular, it plays an educational role in raising awareness of society and other health workers. In this context, it is important to identify the emotions, behaviors, and attitudes of nurses and the factors that influence these attitudes. However, in our country, there are few studies that explain nurses' attitudes toward lesbians and gays.^{7,9} Therefore, this study aims to identify nurses' attitudes toward

lesbians and gays and the factors that | influence these attitudes.

MATERIAL AND METHOD

This study is a descriptive and cross-sectional study. The sample of the study, which has a descriptive design, consisted of 254 clinical nurses who were actively working in a university hospital in the Mediterranean region of Turkey between 18 March and 10 April 2017 and agreed to participate in the research.

The research population consists of 355 nurses working at a university hospital. The research sought to study the entire population rather than select a sample. 330 nurses actively working in clinics were contacted (14 nurses were on maternity leave and 11 nurses were on sick leave), but 44 nurses refused to participate in the study. In addition, 32 nurses who had participated in the preliminary application of the survey questionnaire developed by the research team were excluded from the study sample. The research sample in the descriptive design consisted of 254 clinical nurses who were actively working and agreed to participate in the survey between March 18 and April 10, 2017.

The Personal Information Form” developed by the researchers by scanning relevant literature and the “Attitudes Toward Lesbians and Gay Men (ATLG) Scale” were used together data. The preliminary application of survey form was carried out with 32 nurses working at a university hospital. Survey questions were not changed as a result of the preliminary application. The data were collected between 18 March and 10 April 2017. It took approximately 25 min for the data collection forms to be filled out by the participants.

The Personal Information Form

This form contains information about the identification information about nurses (age, gender, marital status, place of birth, longest lived settlement place, educational attainment, the way how they define themselves traditionally), their characteristics which are considered to affect their attitudes

towards lesbians and gays (family type, the way how they define their families traditionally, length of professional service, incidence of encountering lesbians/throughout their career, incidence of providing service to lesbians/gays throughout their career, whether they are eager to meet lesbians/gays, whether they know any lesbian/gay man in their close circle and, if yes, how they met each other, their views about the marriage of lesbians and gays). The personal information form includes 13 questions.¹⁶⁻¹⁸

The Attitudes Toward Lesbians and Gay Men (ATLG) Scale

This scale was developed by Herek (1988) to determine the attitudes of nurses towards lesbians and gays and was adapted to Turkish by Duyan and Gelbal (2004) by conducting a validity and reliability study. ATLG Scale, which consists of 10 articles in total, is a five-point Likert scale including the options of (1) Strongly disagree; (2) Disagree; (3) Neither agree nor disagree; (4) Agree; (5) Strongly agree. The scale which is intended to determine the attitudes of individuals towards female and male homosexuality includes 10 articles, of which 5 are for male homosexuality and 5 are for female homosexuality. Six of these articles have negative meaning and four have positive meaning. When scoring the positive articles, the answer “Strongly agree” is given “5” points and the answer “Strongly disagree” is given “1” point. When scoring the negative articles, the answer “Strongly disagree” is given “5” points and the answer “Strongly agree” is given “1” point. High scores received from the scale imply positive attitude towards homosexuality, while low scores imply a negative attitude. The Cronbach’s alpha reliability coefficient for the scale is 0.91.¹⁹ The Cronbach’s alpha reliability coefficient for the scale has been found as 0.89 in our study.

Ethical Aspect of Research

In this study, written permission was obtained from the Non-Interventional Clinical Research Board (2017/16, March 15), the dean of the faculty where the study was conducted, and the owner of the scale used in the study. In addition, the study was conducted in accordance with the ethical standards of the 1964 Declaration of Helsinki. Thus, the scientific use of the data is guaranteed. Nurses who agreed to participate in the study were informed of the purpose and method of the study, and written informed consent was obtained from the nurses. Participants did not receive any financial compensation for participating in the study.

Limitations and Future Studies

This study, limited to students of carried out in a hospital in Turkey between 18 March and 10 April 2017 and the sample was randomly selected. The results of the research cannot be generalized to any institution other than the institution in which

the study was conducted. We also recommend that undergraduate nursing curricula include topics related to the health needs of people with different sexual identities. In addition, there is a need for quantitative and qualitative studies that assess nurses' biases and attitudes toward people with different sexual orientations from a broader perspective.

Data Analysis

All data were evaluated using the SPSS (Statistical Package for the Social Science) version 20.0 software (IBM, Armonk, NY, USA). Descriptive statistics in the form of percentage, mean, standard deviation, and number of frequencies were used. The normality of variables and the homogeneity of variances were evaluated with the Shapiro-Wilk and Levene's test. The independent samples t-test was used for comparison of two groups, and one-way analysis of variance and Bonferroni's multiple comparison test were used for comparison of three or more groups in statistical analyses. A p value of less than $p < .05$ was assumed for the significance level.

RESULTS AND DISCUSSION

The mean age of the nurses participating in the study was 30.92 ± 6.83 years, the vast majority of them were female (83.1%), more than half of them were married (56.3%), and 68.1% of them had a bachelor's degree. 34.3% of the nurses participating in the study described themselves as traditional. The mean score of the participating nurses on the ATLG scale was 30.14 ± 8.92 , with a minimum score of 10 and a maximum score of 50. (Table 1).

Table 1. The Nurses' Mean Scores on The Lesbian/Gay Attitude Scale

Attitudes Towards Lesbian and Gays (ATLG) Scale	n	Mean \pm SD	Min.-Max.
Total Score	254	30.14 ± 8.91	10-50

The average scores of nurses on ATLG scale, as broken down by their specific characteristics, are shown in Table 2.

The study finds that female nurses participating in the study had higher scores on ATLG Scale than the participating male nurses (30.74 ± 8.57 , 27.20 ± 10.03) ($p < .05$). As a result of the one-way ANOVA analysis, it has been found that the average scores of nurses on ATLG Scale statistically varied by their levels of educational ($p = .004$). According to the Bonferroni post hoc analysis, the average score of nurses with master's degree on the ATLG Scale (35.96 ± 7.50) is higher than the average scores of nurses who are graduates of Health Vocational High School (28.61 ± 7.81), nurses with associate degree (28.13 ± 9.11) and nurses with bachelor's degree (29.88 ± 8.95), and the difference is statistically significant ($p = .006$, $p = .002$, $p = .004$). For the other group comparisons, post-hoc analysis showed no statistically significant difference.

As a result of the one-way ANOVA analysis, it was found that the average scores

of nurses on ATLG Scale differed by whether they defined themselves as being traditional. According to Bonferroni post hoc analysis; the difference was due to non-traditional nurses, and mean ATLG Scale scores were significantly higher than non-traditional nurses ($F=15.360$ $p<.001$). For the other group comparisons, post hoc analysis showed no statistically significant difference.

It was found that the mean ATLG scale score of nurses who encountered lesbian and gay individuals (31.83 ± 8.53) was higher than the mean ATLG scale score of nurses who did not encounter lesbian and gay individuals (27.89 ± 8.95), and the difference was statistically significant ($t=3.560$ $p=.001$).

The mean ATLG scale score of nurses who cared for lesbians and gays (32.98 ± 7.60) was higher than that of nurses who did not care for such persons (29.06 ± 9.16), and the difference is statistically significant ($t=3.186$ $p<.001$).

The average ATLG Scale score of participating nurses who know lesbian and

gay individuals in their acquaintances (32.77 ± 9.47) is higher than that of nurses who do not know lesbian and gay individuals in their acquaintances (29.31 ± 8.59) and the difference is statistically significant ($t= -2.668$ $p=.008$).

Nurses with lesbian or gay schoolmates (38.71 ± 6.84) and close friends (36.62 ± 8.66) had higher mean ATLG scale scores ($p=.007$). According to the Bonferroni post-hoc analysis, the mean ATLG scale score of nurses with lesbian/gay classmates (38.71 ± 6.84) was higher than that of nurses with lesbian or gay neighbors (28.36 ± 9.79) and the difference was statistically significant ($F=4.476$ $p=.002$). For the other group comparisons, post-hoc analysis revealed no statistically significant difference

It was found that the ALGT scores of the nurses (24.57 ± 7.42) who stated that lesbians and gays could not marry each other were lower than the other nurses (33.70 ± 7.93), and the difference between them was significant ($t=9.167$ $p<.001$) (Table 2).

Table 2. The Mean Scores on The Nurses From The Attitude Scale Towards Lesbian/Gay According to Some Characteristics (n=254)

Some Characteristics of Nurses	n	Mean±SD	t-F/p
Gender*			
Female	211	30.74±8.57	t=2.391
Male	43	27.20±10.03	.018
Marital Status*			
Single	111	31.10±8.13	t=1.519
Married	143	29.39±9.37	.130
Degree of education **			
Health vocational high School ^a	26	28.61±7.81	
Associate's Degree ^b	30	28.13±9.11	F=4.537
Undergraduate degree ^c	173	29.88±8.95	.004
Graduate Scholl ^d	25	35.96±7.50	
Bonferroni post hoc d-a,b,c			
Traditionally Defining Themselves **			
Non-traditional ^a	84	33.98±8.36	F=15.360
No idea ^b	83	29.69±7.43	<.001
Traditional one ^c	87	26.86±9.39	
Bonferroni post hoc a-b,c			

Table 2. (Continue)

Some Characteristics of Nurses	n	Mean±SD	t-F/p
Lesbian/Gay Encounters*			
Encountered	145	31.83±8.53	t=3.560
Didn't encounter	109	27.89±8.95	<.001
Care giving for Lesbians/Gays *			
Cared	70	32.98±7.60	t=3.186
Didn't care	184	29.06±9.16	.001
Status of Wanting to Meet with Lesbians/Gays*			
Wanted	153	33.16±8.25	t=7.307
Didn't want	101	25.56±7.91	<.001
Existence of lesbian/gay acquaintances *			
Yes	61	32.77±9.47	t= -2.668
No	193	29.31±8.59	.008
Intimacy Levels with Lesbian/Gays ** (n=61)***			
Colleague ^a	20	31.25±8.88	F=4.476
Schollmate ^b	14	38.71±6.84	.007
Close Friend ^c	8	36.62±8.66	
Neighbour ^d	19	28.36±9.79	
Bonferroni post hoc b-d			
Opinions Regarding Lesbian/Gay Marriage*			
They can marry	155	33.70±7.93	t=9.167
They can't marry	99	24.57±7.42	<.001

* Student t, ** ANOVA test, *** Nurses with a lesbian/gay acquaintance (n=61)

Lesbian and gay individuals face negative attitudes in societies and are reluctant to reveal their sexual identity both in social areas and within the family²⁰. The obstacles they face, lesbians and gays who decide to visit a health facility should receive health services without prejudice and negative attitudes. In this process, it is very important to identify the attitudes of nurses who provide equal health services regardless of religion, language, race, and sexual identity. However, there are few studies in the literature that address nurses' attitudes toward lesbian and gay individuals. For this reason, our research findings are discussed with the attitudes of nurses and nursing students who will be the nurses of the future.

The finding in our study that female nurses have more positive attitudes toward lesbian and gay individuals than male nurses is quite remarkable. Riggs and Bartholomaeus' study with nurses found that

female nurses have more positive attitudes toward lesbian and gays individuals.²¹ In addition, similar results have been found in studies with student nurses.²²⁻²⁴ These studies are comparable to our study. In contrast to the results of our study, there are also studies that found that there is no relationship between gender and attitudes towards lesbian and gay people.^{25,26} In our study, the fact that female nurses and nursing students have more positive attitudes toward lesbians and gays than men can be explained by gender stereotypes that determine attitudes and beliefs about femininity and masculinity.

In our study, it was determined that as the level of education increased, positive attitudes towards lesbian and gay individuals increased. If we look at the studies conducted with nursing students of different years, there are studies that show that older students have more positive attitudes towards lesbian and gay people.^{22,23,27} In contrast to our research findings, Yuksel et al. (2020) and Soner and

Altay (2020) found that education level did not affect attitudes towards lesbian and gay individuals in their studies with nursing students.^{22,24} Considering that our study included clinical nurses, our research findings demonstrate the importance of postgraduate education and lifelong learning in clinical settings in changing negative attitudes and prejudices to effect change toward positive behaviors.

The cultural, political and social structure of the society in which we live affects the attitudes towards individuals with different sexual orientations, either positively or negatively. In this context, in traditional societies, people are limited to only men and women, and other sexual orientations are ignored and discriminated against. Discrimination against these individuals, especially nurses, in the provision of health care services contradicts the fundamental principle of "respect all values and religious beliefs of the persons served".²⁸ For this reason, whether or not the nurses participating in our study define themselves as traditional is an important factor in determining their attitudes toward lesbian and gay individuals. Our study found that nurses who describe themselves as traditional tend to have negative attitudes toward lesbians and gays. In the study conducted by Soner and Altay with nursing students, it was found that there was no relationship between traditionalism and negative attitudes toward lesbians and gays, in contrast to our study.²² According to our research findings, the negative attitude of nurses who express themselves traditionally can be associated with their experiences in social and working environments.

In our study, nurses who knew a lesbians/gays in their immediate environment were found to have more positive attitudes toward lesbians and gays. The literature review shows studies with similar findings to our study. Some studies suggest that communicating or interacting with lesbian and gay individuals outside of work is

associated with positive attitudes toward them.^{23,24,29} In addition to these studies, studies conducted by Soner and Altay and Pinto and Nogueira among nursing students found that students who do not know lesbians or gays in their immediate environment are more likely to think negatively.^{22,30} In our study, nurses' social relationships with lesbian and gay individuals could help to change their prejudices toward them and develop positive attitudes toward them. In addition, this finding is important in demonstrating that prejudice against lesbians and gays can change.

For this reason, it is important that nurses are aware of the health needs of persons with sexual identities other than heterosexual gender identity and provide equitable care to meet those needs.²⁸ The 2016 study by Riggs and Bartholomaeus with psychiatric nurses also supports our research.²⁰ In another study conducted with nursing students, the majority of students indicated that their view of lesbians and gays persons was no different than their view of other persons.²³ The finding in our study that nurses who care for lesbian and gay individuals tend to have more positive attitudes toward homosexuality can be explained by nurses' increased awareness of homosexuality with education.

In the Turkish Civil Code No. 4721, the union of same-sex couples is not legally recognized, and there is no expression such as sexual orientation or gender identity.³¹ In addition, the religious structure of the society and moral norms may cause other marriages other than male and female marriages not to be considered normal. When the studies conducted in our country were examined, no study was found that determined the attitudes of nurses towards the marriage of lesbian and gay individuals. In our study, it is a remarkable finding that those who advocate that lesbian and gay individuals can marry (n=155) have a positive attitude towards lesbian and gay individuals. This result can help to break the prejudices in the society.

CONCLUSION AND RECOMMENDATIONS

In our study, it was determined that the attitudes of the clinician nurses who were female, graduate, caregiver with lesbians and gays, who stated that they could meet, who had lesbian and gay acquaintances, and who thought that these individuals could marry each other, were positive.

Lesbian and gay individuals should benefit from equal health services to protect and improve their health. In order to prevent discriminatory attitudes towards lesbian and gay individuals in the health sector, it is important that nurses who provide uninterrupted health services exhibit positive attitudes. In line with the results obtained, it is thought that education may be important in

improving the attitudes of nurses in a positive way. In this direction, it is necessary to inform nurses and increase their awareness. It is thought that awareness towards lesbian and gay individuals can be increased by planning in-service trainings. In addition, it is recommended that individuals' health care needs be included in the nursing education curriculum, regardless of sexual orientation. In addition to all these, qualitative and quantitative studies are needed to evaluate nurses' prejudices and attitudes towards lesbian and gay individuals from a wider perspective.

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