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Abstract

Lesbian, gay, bisexual, and transgender (LGBT) individuals are affected by stigma in the workplace, health-care settings, their families, and their communities. Some people believe that being LGB or Tis unnatural. LGBT individuals are commonly stigmatized, which makes them feel rejected and disrespected for who they are. The purpose of this study is to investigate the impact of Eastern Pride & Identity Coalition (EPIC) panels on the LGBT-related attitudes of students at EMU. EPIC is a group of students, faculty, staff, and community members who serve as a panel of individuals and go into classrooms to talk about their own experiences in the LGBT community. What is currently unclear is how these panels influence students' attitudes toward LGBT populations. To discern this I developed a survey that measures LGBT-related attitude change. Students whose classes scheduled an EPIC panel presentation completed the surveys online both before and after they saw the EPIC panel. It was hypothesized that EPIC panels have a positive impact on students' attitudes toward LGBT individuals. The results indicated a significant change in attitude over time, which indicates that attitudes were more favorable after intervention. It was also hypothesized that the attitude toward LGBT individuals would be more positive based on the composition of the panel. The results indicated that the composition of the panel does not increase participants' attitude change toward a particular subgroup. The results of this work should have repercussions for the reduction of stigmatization and acceptance of LGBT individuals by members of the community who might not have contact with such populations.

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EFFECT OF EPIC PANEL PRESENTATIONS ON THE ATTITUDES OF EMU
STUDENTS TOWARD LESBIAN, GAY, BISEXUAL, AND TRANSGENDER
INDIVIDUALS

By

Silvana Alfaro-Bordon

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Abstract

Lesbian, gay, bisexual, and transgender (LGBT) individuals are affected by stigma in the workplace, health-care settings, their families, and their communities. Some people believe that being LGB or T is unnatural. LGBT individuals are commonly stigmatized, which makes them feel rejected and disrespected for who they are. The purpose of this study is to investigate the impact of Eastern Pride & Identity Coalition (EPIC) panels on the LGBT-related attitudes of students at EMU. EPIC is a group of students, faculty, staff, and community members who serve as a panel of individuals and go into classrooms to talk about their own experiences in the LGBT community. What is currently unclear is how these panels influence students' attitudes toward LGBT populations. To discern this I developed a survey that measures LGBT-related attitude change. Students whose classes scheduled an EPIC panel presentation completed the surveys online both before and after they saw the EPIC panel. It was hypothesized that EPIC panels have a positive impact on students' attitudes toward LGBT individuals. The results indicated a significant change in attitude over time, which indicates that attitudes were more favorable after intervention. It was also hypothesized that the attitude toward LGBT individuals would be more positive based on the composition of the panel. The results indicated that the composition of the panel does not increase participants' attitude change toward a particular subgroup. The results of this work should have repercussions for the reduction of stigmatization and acceptance of LGBT individuals by members of the community who might not have contact with such populations.

Effect of EPIC Panel Presentations on the Attitudes of EMU Students toward Lesbian,
Gay, Bisexual, and Transgender Individuals

Lesbian, gay, bisexual, and transgender (LGBT) individuals constitute roughly 4% of the population in the United States (Movement Advancement Project, MAP, 2012). LGBT couples can be found in 93% of counties in the United States and approximately two million children live with LGBT parents (MAP, 2012). LGBT individuals are sometimes our neighbors, coworkers, friends, and even our family members. However, LGBT individuals are affected by stigma in the workplace, health-care settings, their families, and their communities.

Even though most people believe that workers should be treated equally and should be fired only if they do not perform well at work, one in four LGB individuals report being discriminated against at work, and almost half of transgender individuals report experiencing discrimination at work (MAP, 2012). LGBT individuals must consider whether to talk publicly about their sexual orientation, their partners, or their families, because they run the risk of losing their jobs, and although about half the states in the US provide employment non-discrimination laws, the rest of the states do not offer any protection for individuals who identify as LGBT.

Additionally, LGBT people face difficulties in their families and their communities. Some people believe that being LGB or T is unnatural. LGBT people are often first stigmatized in childhood, and that usually continues throughout their entire lives (Herek, Gillis & Cogan, 2009). As a consequence of stigma and discrimination,

LGBT individuals are more likely to present symptoms of depression (Ross, Doctor, Dimito, Kuehl & Armstrong, 2006).

Avoiding disclosure of sexual orientation goes beyond these aforementioned realms. A study conducted by Goode-Cross and Tager (2011) found that college aged African-American gay and bisexual men decided to minimize their sexual orientation when studying in a predominantly white institution in order to cope with being stereotyped by peers. Members of educational institutions are not unique in their perceptions of LGBT individuals. Religious institutions also play an important role in how LGBT people are perceived. Such institutions have the capacity to determine what is morally right and what is morally wrong, what is acceptable and what is not. For instance, the Catholic Church has condemned homosexuality for centuries. Recently, Pope Francis' new view on homosexuality (i.e., he would not judge people for their sexual orientation, as long as they were good Christians) has created great debate among members of the Catholic Church worldwide (Donadio, 2013). This change of emphasis on the issue of gays initiated by the Pope may have an impact on the attitudes of Catholics toward LGBT individuals.

Hostile Attitudes

The impact of rules and norms established by a religious institution on people's behaviors was demonstrated in a research study conducted in a church that faced organizational changes (Sumerau, 2012). This church had traditionally welcomed people of all sexual orientations and gender identities. The responsibilities in the church were evenly distributed among men and women. The organizational changes occurred when a new pastor who identified as gay was hired. This change led gay men in the church to

become leaders of the church. The study revealed that because these gay men were an oppressed group outside of the church, they tried to compensate by marginalizing other members of the organization (i.e., women and children) who were more oppressed than they were. The findings of this study indicate that religious leaders might exert power to oppress people in the church transforming the church into one more place where the oppressed encounter inequality.

Health care settings are places where LGBT people might experience hostile attitudes as well. Often, staff are not trained on LGBT issues and do not provide the most appropriate services for this population (Kelly, Chou, Dibble & Robertson, 2008). For instance, transgender individuals are affected in healthcare settings because quite often insurance policies do not cover the costs of sex transition surgery and hormone treatments (Drescher & Haller, 2012). When transgender individuals change their sex marker on their drivers' licenses (i.e., from female to male or vice-versa), insurance companies do not offer the necessary treatments that the person might require. For instance, a female to male transgender individual might need gynecological services that are not covered because of the sex marker on their drivers' license.

Stigma in the LGBT Community

According to Herek and colleagues (2009), there is a system of institutional practices embedded in our social system that works to disadvantage and discriminate against LGBT individuals in two ways. First, everyone in our society is presumed to be heterosexual. Such assumption perpetuates the invisibility of sexual minorities. Therefore, health care systems, religious systems, and social rules and regulations sometimes fail to take LGBT people's issues into consideration. And second, when

sexual minorities are acknowledged, they are presumed to be abnormal, unnatural, and unworthy of equal or just treatment (Herek et al., 2009). Both the invisibility and the presumption of abnormality make life challenging for LGBT individuals. These typical forms of stigma are difficult to overcome since they are quite often legitimated and perpetuated by social institutions, thus, quite often LGBT people feel rejected. Nevertheless, this system can be changed. At the core of the existing circumstances are individual's attitudes.

Attitudes

Eagly and Chaiken (1993) define attitudes as "a psychological tendency that is expressed by evaluating a particular entity with some degree of favor or disfavor" (p. 1). An entity represents an object, an issue, an individual, or a specific group of individuals. Attitudes are not observable directly, but can be inferred from observable responses (Eagly & Chaiken, 1993). The response of an individual to a specific entity is done on an affective, cognitive, and behavioral basis. The affective component of attitudes consists of feelings or emotions that an individual has toward an entity. The cognitive component corresponds to thoughts that an individual has toward the entity. And the behavior component consists of actions or responses of an individual toward the entity. In regards to LGBT individuals, attitudes are behaviors expressed toward them, coupled with cognitions and emotions that can be expressed in a positive or negative fashion. Individuals construct their attitudes as a function of cognitions, and so persuading someone to change an attitude can be accomplished.

Attitude Theories

Several theories have stemmed from the need to explain the attitude construct. One such theory is the Elaboration Likelihood Model (ELM) developed by Petty and Cacioppo (1986) that explains how individuals can be persuaded to change evaluations of behaviors, emotions, and cognitions through communication processes of persuasion (Petty & Cacioppo, 1986). They affirm that change in attitudes can initiate or influence behavior, affect, or cognitions. For instance, a student who missed a class might begin to like a classmate when the classmate shares her class notes, which would be behavior-initiated change. Affect-initiated change would be if the same student liked the classmate because the classmate reminds her of her sister. And cognitive-initiated change would happen if the student were impressed with the quality of the classmate's notes. Attitude can be influenced also if a person already likes someone. For example, if the student who missed class already likes her classmate, she would agree to return the favor of sharing notes when her classmate misses class, which would be considered behavioral influence. Affective influence would be if she feels happy when she sees her classmate in class, and cognitive influence would be if she agreed with her classmate on issues that were discussed in class just because she liked the classmate. According to the ELM, there are different ways attitudes could be affected through communication processes. Establishing such communication in a structured activity such as a panel interaction in a classroom could help change attitudes.

Cognitive Dissonance Theory developed by Festinger (1957), attempts to explain the inconsistencies between thoughts, behaviors, and emotions. When a person's thoughts and actions are inconsistent, the person feels discomfort. To overcome the emotional discomfort the person feels, she has to regain a sense of consistency. Since behaviors

cannot be changed and cognitions can, the person finds an explanation to justify the behavior as a way to regain consistency between her attitude and her behavior (Festinger, 1957). According to this theory, it can be deduced that attitude change might occur when the person experiences discomfort due to inconsistency. For instance, students might have negative preconceived cognitions regarding LGBT individuals, however, when a panel encourages interaction between panelists who identify as LGBT and students, students may perceive the panelists as far from being unnatural or abnormal. The interaction could lead students to interact more with panelists (i.e., a change in behavior) that may cause some dissonance leading to attitude change.

Role models also have an impact on whether people develop positive or negative attitudes. Taylor, Lord, McIntyre, and Paulson (2011) articulate that a successful in-group role model might decrease the risk of confirming a negative stereotype about one's group as a personal characteristic (i.e., stereotype threat). The experiment in this study consisted of rating the degree to which former Secretary of State Hillary Clinton deserved her success. Later, the same participants—all women—read either Clinton's biography or a story about a successful corporation and immediately performed a math test. They were put under mathematical stereotype threat (i.e., women perform poorly in math). The researchers hypothesized that women who perceived Clinton as deserving her success and read Clinton's biography before the math test would perform better than women who read the story about the successful corporation. The results showed that the more a participant thought that Clinton deserved her success, the higher the participant scored on the math test, proving that a successful role model might help an individual overcome stereotype threat.

These results are consistent with the idea that attitudes can be affected in a positive fashion. In the LGBT community, stereotypes play a significant role in the way LGBT people are stigmatized and discriminated against. Panel presentations would help students to be aware of such stereotypes. In time, students who identify as LGBT might feel inclined to talk about their own coming out stories after watching the panel presentation because panelists could serve as role models. Attitudes, as a psychological tendency, are not fixed. On the contrary, they can change from a negative evaluation to a positive evaluation and vice-versa. In this sense, a negative attitude toward LGBT individuals could be improved or changed through intergroup contact.

According to the Intergroup Contact Theory developed by Allport, the effects of contact between two groups is positive if both groups share the same status in the situation, have common goals, cooperate to achieve these goals, and have the support of the community (Pettigrew, 1998). Though these factors are important, they might not suffice to predict optimal positive outcome amongst groups. Pettigrew (1998) theorized that learning about the group helps adjust or even change preconceived ideas about the group, which leads to change of behavior and offers an opportunity to generate favorable relationships. This was confirmed in a study conducted by Herek and Capitano (1996). The researchers found that people who had contact with lesbians and gay men generally had a more positive attitude toward lesbians and gay men than people who did not know anyone who was lesbian or gay.

Further evidence for the effectiveness of intergroup contact to increase positive attitudes is presented by Walch, Sinkkanen, Swain, Francisco, Breaux, and Sjoberg (2012). They designed a study to examine the impact of a transgender speaker panel

presentation on the attitudes toward transgender individuals among students. Their research consisted of evaluating the effects of a transgender panel presentation in a classroom where four panelists who identified as transgender shared their transition experiences as well as the emotional impact of such experiences followed by a questions and answers session. The reason for their interest in such research was based on the fact that transgender people are often victimized and discriminated against because they do not conform to the binary gender system predominant in our society. Walch and colleagues (2012) found that participants exposed to a transgender speaker panel presentation presented more positive attitudes toward transgender individuals than individuals who attended a lecture on transgender issues. The panel presentation resulted in positive attitude change among participants, which supports the effectiveness of intergroup contact.

Attitudes toward LGBT individuals are frequently based on representations rather than actual facts. It is possible that if people are exposed to LGBT individuals, their actual attitudes toward LGBT populations could change in a positive way. The support of the community plays an important role on how people develop positive or negative attitudes. When the community is supportive of contact amongst members of diverse groups, the attitudes could improve.

The goal of EPIC panels is to contribute to the improvement of attitudes amongst students and the LGBT community. Each EPIC panel is integrated by a coordinator who moderates the panel, and four volunteers who identify as lesbian, gay, bisexual, and/or transgender. Most volunteers are students, however, faculty and staff occasionally serve as panelists too. The panel presentations consist of three activities: the first activity is an

exercise where students in the class are asked to write down what stereotypes are associated with the words lesbian, gay, bisexual, transgender, and heterosexual, followed by a brief conversation about what these stereotypes mean; the second activity consists of personal coming out stories shared by each panelist; and the third activity consists of a question and answer section where students ask panelists questions regarding their personal story, their gender identity, and their sexual orientation. The research presented previously regarding role models, dissonance theory and intergroup contact indicate that the panel could have a positive impact on attitude change between students and LGBT individuals.

Rationale and Hypotheses

For this study, a survey was developed to determine the impact of EPIC panel presentations on a Midwestern university campus. The method used to measure attitude change was a quasi-experimental pre-test/post-test design. More specifically, two assessments were used, one before and one after the EPIC panel presentations. Students whose classes were scheduled for an EPIC panel presentation were invited to participate in the surveys. It was hypothesized that EPIC panels have a positive impact on students' attitudes toward LGBT individuals. Based on Intergroup Contact Theory interactions between different groups might lead to increase positive attitudes. Furthermore, based on Cognitive Dissonance Theory, such interactions could lead to change in behavior, which in turn would lead to dissonance resulting in attitude change.

It was also hypothesized that the attitude toward LGBT individuals would be more positive based on the composition of the panel. Attitudes toward lesbians would be more positive if the panel had at least one lesbian panelist, attitudes toward gays would

be more positive if the panel had at least one member who identified as gay, and the same pattern of positive attitude change was expected for a panel that had a panelist who identified as bisexual or a panelist who identified as transgender.

Method

Participants

A total of 146 students (126 females and 20 males; 71% Caucasian, and 82% between the ages of 18 and 24) from a Midwestern university were recruited from Women and Gender Studies and Social Work classes that had previously scheduled EPIC panel presentations. Data collection consisted of 136 pre-test and 97 post-test surveys. There were 86 participants who took both pre-test and post-test surveys. These 86 participants were included in the following analysis.

Measures

To measure the attitudes toward LGBT individuals, a literature review of scales previously used in other research was conducted. Measures commonly used to estimate the impact of attitudes toward different subgroups of the LGBT community include the *Attitudes Toward Lesbian and Gay Male Scale* (Herek & McLaren, 2011), the *Component Measure of Attitudes Toward Homosexuality* (Kite, 2011), the *Attitudes Regarding Bisexuality Scale* (Mohr & Rochlen, 1999), the *Transphobia Scale* (Tebbe & Moradi, 2012) and the *Attitudes Toward Transgendered Individuals Scale* (Walch et al., 2009). These scales are used to determine attitudes toward a specific subgroup of the LGBT community. There is no tool designed to measure attitudes toward all subgroups at once. In other words, the tools used to measure attitudes toward LGBT individuals only determine attitudes toward lesbians and gay men, or bisexuals, or transgender individuals

separately. To the best of my knowledge, a scale that measures attitudes toward LGBT individuals as a group has not been developed. For the purpose of this study, a tool that would help evaluate attitude changes toward LGBT individuals as a group was developed (see Appendix A) based on the suggestions of a group of experts in the areas of LGBT issues, stigma, and attitudes. Some items were taken from the scales mentioned above, but were reworded to better address the purpose of this research. It is expected that the scale developed to measure attitudes toward LGBT people will provide a quantitative tool for evaluating the impact of EPIC panels. Cronbach's Alpha was used to estimate the reliability of the pre-test and post-test scales. The measures had high pre-test ($\alpha = 0.955$) and post-test ($\alpha = 0.967$) reliabilities. The acronym for the Attitudes toward LGBT Individuals Scale is (ALGBTIS).

The resulting ALGBTIS scale included 37 items that were presented to participants at baseline and after the panel. The first item required participants to indicate whether they have a friend or family member who identifies as lesbian, gay, bisexual, or transgender. The other 36 items were presented in a randomized fashion for pre-test and post-test. Each item was presented on a five-point Likert-type scale (Strongly Disagree=1; Strongly Agree=5). A high score on the answer indicated a more positive attitude toward LGBT individuals. Some items were reversed to increase the validity of the study (see Appendix A). Examples of items that relate to attitudes toward LGB and T individuals are "I avoid LGBT people whenever possible; Being LGBT is a choice." Examples of items that reflect attitudes toward a subgroup in the LGBT community are "Bisexuals are confused; My religious beliefs disapprove of or condemn transgendered people." Following, data related to demographics such as age, sex, gender, sexual

orientation, class, GPA, ethnic/race background, religious background, and political view were collected. At the end of the demographic section, participants were thanked for their participation.

After the panel intervention, participants were invited to complete the post-test survey. They were presented with the same items that were presented at baseline. Additionally, they were asked five extra items regarding their perception of the panel on a five-point Likert-type scale (e.g., "I think the panel was an important contribution to the class; I feel I have a better grasp of how some LGBT people feel"), and two essay questions to give participants the opportunity to provide detailed comments about the panel (see Appendix B). A high score on the scale indicated a positive attitude toward the panel.

Procedure

Participants were recruited in classrooms where the EPIC panel presentations were scheduled. Instructors who had scheduled EPIC panel presentations were contacted to set up a time to recruit participants in their classrooms one week before the panel presentation. Participants were given a brief explanation about the survey and were told when they were expected to fill out the pre-test and post-test surveys online. A recruitment sheet was provided so students willing to participate could sign up for the study by providing name and e-mail address. The recruitment sheet was left in the classroom for students to sign up and retrieved from the instructor by the end of the class. That same day, an email was sent to participants with a direct link to the secure server where an informed consent (See Appendix C) and the initial survey were housed (See Appendix A).

Upon clicking on the link to the survey, participants were presented with the informed consent page. Those who did not agree to give consent were presented a screen thanking them for their interest and access to the survey was denied. Participants who provided consent were directed to the survey, which would take approximately 20 minutes to complete. After completion, participants were thanked for their time. Participation in the survey could be discontinued at any point without penalty. After the panel presentation, participants were invited to complete the final survey via email.

To protect confidentiality of the participants, their names or email addresses were not linked to the data collected in the survey. The link between pre-test and post-test was established through a personal six-digit code created by each participant at baseline. Only the participant had knowledge of this password. A prompt suggested using the last letter of their first name, last letter of last name, and last four digits of their phone number to create the code, yet participants had the option of creating their own six-digit code. To establish the link, the participant was asked for this code at post-test so the link between pre-test and post-test could be established.

Results

To test the first hypothesis, a repeated measures ANOVA that determined whether there was overall attitude change from baseline to post-test as a result of the EPIC panel presentation was conducted. The results indicated a significant change in attitude over time $F(1,85) = 8.87, p = .004$. More specifically, the mean for post-test ($M = 4.042$) was higher than the mean for baseline ($M = 3.973$), which indicates that attitudes were more favorable after intervention, as can be observed in Figure 1.

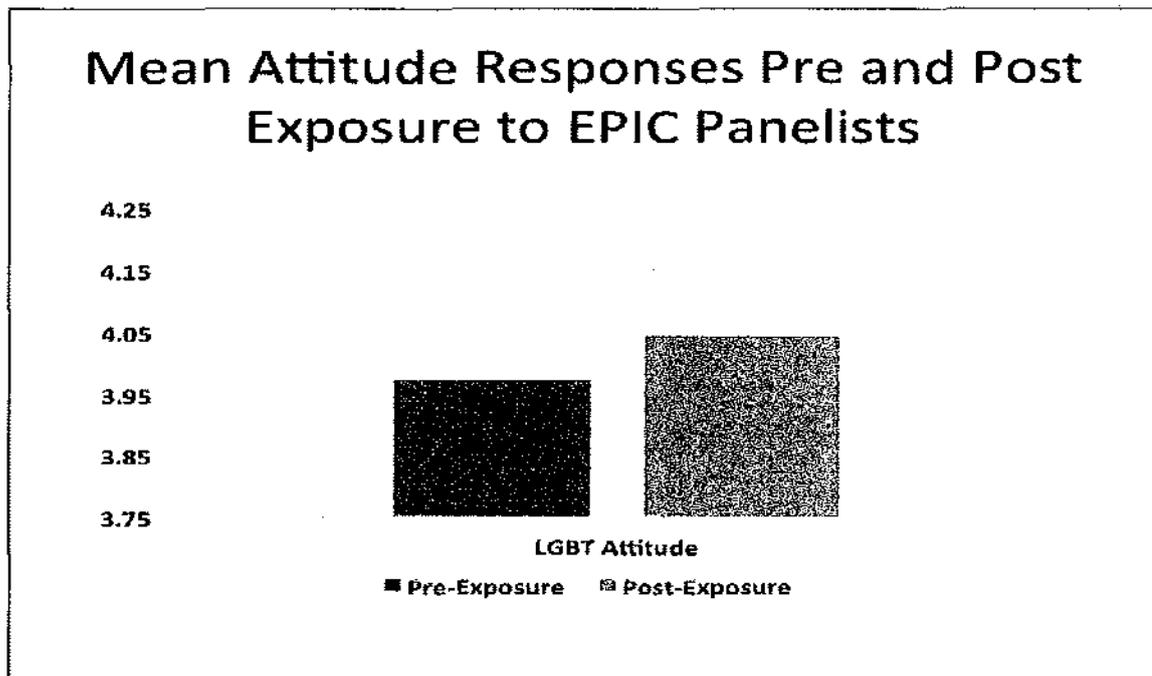


Figure 1. Overall mean attitude responses for pre-test exposure and post-test exposure to EPIC panelists

The second hypothesis stated that the attitude toward a specific LGBT subgroup would be more positive if the panel had a panelist who identified as a member of that particular subcategory. That is, if there was an individual who identified as lesbian, the attitude change toward the lesbian subgroup would be significant, and the same applied for a panel formed by panelists who identified with the subgroups gay, bisexual, or transgender. The results indicated that the composition of the panel does not increase participants' attitude change toward a particular subgroup. More specifically, the results $F(1,85) = .004, p = .947$ indicated that positive attitude change toward the subgroup lesbian was not more significant when there was an individual who identified as lesbian in the panel. Similarly, attitude change toward gays was not more significant $F(1,85) = .093, p = .762$ when there was an individual who identified as gay in the panel. Parallel non-significant results $F(1,85) = 0.07, p = .799$ were obtained when an individual in the panel identified as bisexual. Thus, there does not need to be a lesbian, or gay, or bisexual

individual in the panel for participants to feel more positively toward LGBT individuals in general after intervention.

For the attitude toward transgender individuals, there was attitude change in a positive direction when there was an individual who identified as transgender ($F(1,85) = 5.338, p = .023$) on the panel. However, as can be seen in Figure 2, when there was no one who identified as transgender amongst the panelists, the overall attitude change was more significant than when there was a panelist who identified as transgender $F(1,85) = 6.332, p = .014$. As Figure 2 indicates, the attitude change effect was stronger when no panelist identified as transgender.

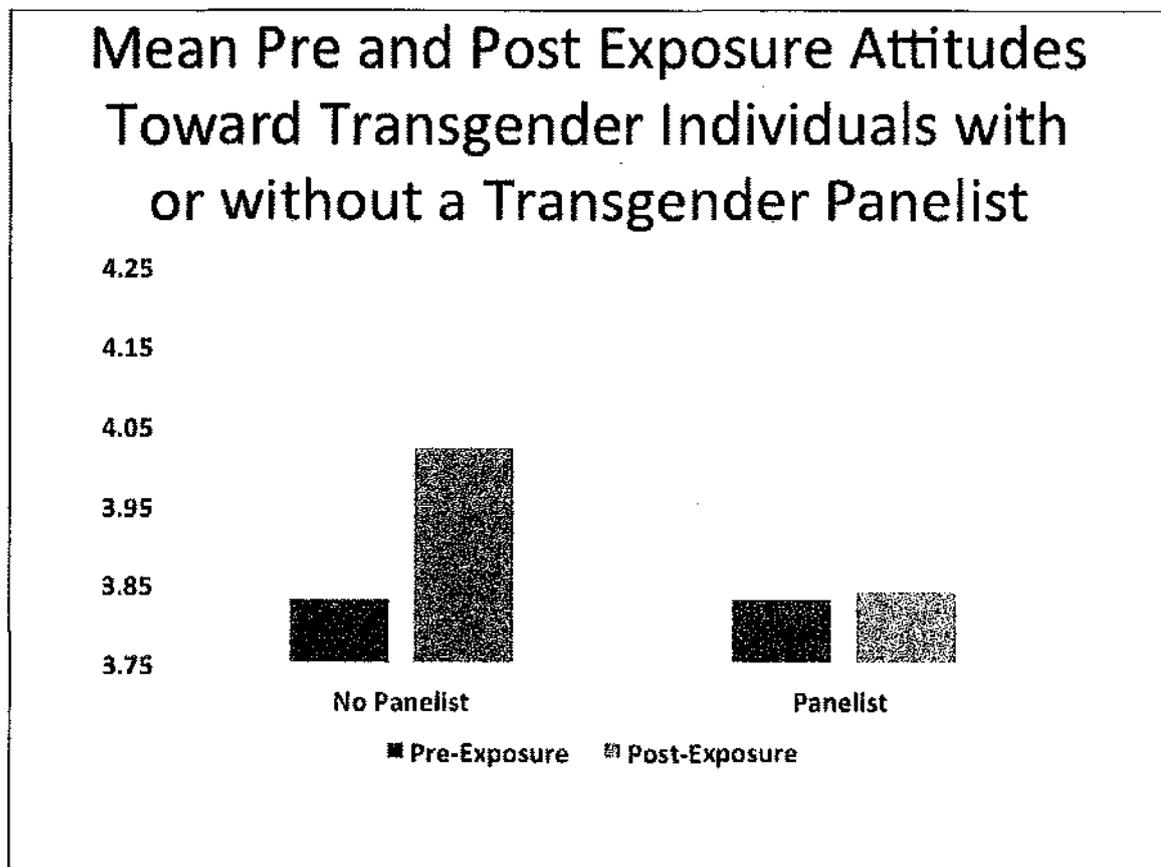


Figure 2. Mean attitude responses for pre-test exposure and post-test exposure to EPIC panelists who identified as transgender

Discussion

The goal of this study was to measure the impact of EPIC panel presentations on the LGBT-related attitudes of students and determine if the composition of the panel had an impact on attitude change. The results of the study support the first hypothesis; EPIC panel presentations have a positive effect on attitude change toward LGBT individuals. Participants reported a more positive attitude toward LGBT individuals after the EPIC panel presentation than before the panel.

The second hypothesis, which stated that attitude change would be significant toward a specific subgroup of the LGBT community when that subgroup was represented in the panel, was not supported. For panels comprised of individuals who identified as lesbians, the attitude change toward the subgroup lesbian was not more substantial. When the panel had an individual who identified as gay, the attitude change toward the subgroup gay was not greater, and neither was the attitude toward the subgroup bisexual when one of the panelists identified as bisexual. However, the attitude reported toward transgender individuals was substantially more positive when there was no individual who identified as transgender in the panel. As a result, it can be concluded that attitude change happened over time and was not a function of seeing specific panelists.

The fact that there was a more positive attitude change when there was no transgender individual in the panel might be related to the participants' perception of the panelists' identity. In our society, people have more exposure to LGB individuals. Moreover, LGB issues have been discussed more openly than transgender issues. The attitude change when there was no individual who identified as transgender in the panel might reflect on one hand, that there was a better understanding of transgender identity

over time, and on the other hand, it might imply the complexity of understanding a transgender identity, which entails comprehending the difference between sexual orientation and gender identity, two concepts that tend to be perceived as one.

In addition, people who identify as LGB have something in common that people who identify as transgender do not. People who identify as lesbian, gay, or bisexual identify as such when they feel sexually attracted to individuals of the same sex. Therefore, being lesbian, gay, or bisexual is intrinsically connected to sexual orientation (i.e., who the person feels sexually attracted to). Transgender people might report sexual attraction toward the same sex or not. Nevertheless, transgender identity encompasses how the individual perceives herself/himself with regard to gender, regardless of to whom the individual feels attracted. Transgender people do not fit into the binary gender category that prescribes that a female must identify as a woman and a male must identify as a man. Such a concept might represent a challenge for participants who observed the panel presentations. This might explain why the change of attitude in a positive direction toward transgender individuals was slightly higher when there was no transgender individual in the panel than when there was a transgender individual. Such nuance might indicate some difficulty participants might have had when trying to understand transgender identity.

To explain why participants may have had difficulty with panelists who identified as transgender, it also might be useful to take a look at the reports prepared by the National Center for Transgender Equality and the National Gay and Lesbian Task Force, which state that transgender individuals are likely to be victims of physical assault (61%), to be victims of sexual assault (64%), to lose their jobs (55%), and to have low income

(Grant et al. 2011). This information indicates that transgender individuals are not accepted or treated equally in our society. Furthermore, 41% of transgender individuals attempt suicide at some point in their lives, compared to 1.6% of the general population (Grant et al., 2011), which might indicate that transgender individuals are trying to escape a life situation that they find impossible to reconcile. Some people have difficulty accepting the way transgender individuals present themselves and accepting the idea that a male might identify as a woman and a female might identify as a man. Understanding transgender identity is a complex task somewhat beyond the scope of the objectives of EPIC panel presentations. The lesser degree of overall positive attitude change when there was an individual who identified as transgender on the panel might be an indicator of this complexity.

Limitations

To better understand the results of the current study, it is relevant to note that the classes that requested EPIC panel presentations were Women and Gender Studies and Social Work courses. Typically, these students have a strong desire to help the community, which might not necessarily be representative of the rest of the students on campus. They might be particularly compassionate and willing to embrace diversity, another aspect that is specifically taught in these classes. The class material could have targeted LGBT issues already, so the change in attitude could be affected by class material they have read and discussed before or after the panel.

Attrition was expected in this study due to the special characteristics of the design. Participants had to complete both surveys on their own time and they had one week before the panel presentation to complete pre-test and one week after the panel

presentation to complete post-test. Most panel presentations were done in the middle of the semester, which might have led participants to do one survey and not the other if they had multiple academic responsibilities. Participants had access to post-test as long as they had signed up for the study, which led some to complete the post-test even if they had not completed the pre-test. Furthermore, the questions asked at baseline were similar to the questions asked during post-test, so participants could have felt pressure to be consistent in the responses or to answer in a more positive manner after the panel because they knew the study intended to evaluate the effectiveness of the panel.

Further Discussion

Even though LGBT people are more widely accepted, we still observe social institutions and policy that promote and support unequal opportunities for the LGBT population. The LGBT community falls into the category of people who have fewer opportunities (i.e. no right to marry in most states in the US, difficulty adopting children, lack of health care benefits for partners, etc.). LGBT individuals face clear difficulties due to stigma and discrimination directed toward the LGBT community. Some social institutions have enacted laws to promote equality of LGBT individuals as a minority. Yet, LGBT individuals are far from being treated equally. This minority is discriminated against at work, in health care settings, and sometimes they are even stigmatized and marginalized by religious institutions. Panels that encourage interaction between the community and LGBT individuals are important because they might help change the way LGBT individuals are perceived, and the communication could lead to a more positive attitude towards said minority.

Based on the complexity of challenges LGBT people face, we deduce that LGBT individuals could benefit from the support of other members of the community. Panel presentations help promote successful interactions between members of different groups which in turn change attitudes (cognitions, behaviors, and emotions) of individuals toward a stigmatized group. EPIC panels intend to persuade students to change their attitudes through communication, which Petty and Cacioppo (1986) indicate is an effective way to persuade individuals to do so. Furthermore, individuals base their attitudes on the perception of their behaviors. Interacting with panelists might lead students who observe the panel to perceive inconsistency between their feelings, cognitions, and behaviors. In such cases, people have the tendency to feel discomfort, which leads them to attempt to justify their behavior as a way to overcome dissonance (Festinger, 1957). EPIC panel presentations could lead students to behave in a positive way, which subsequently would lead students to adjust their attitude in a positive direction to decrease dissonance. Role models also play an important role on attitude change. In this sense, students who observe the panel could perceive panelists as role models whom they could use as inspiration to improve their attitudes and overcome the threat of stereotypes.

Attitudes are frequently based on representations, rather than actual facts. Based on the research presented in this paper, the first hypothesis, which asserts that people's attitudes toward LGBT individuals can be changed in a positive way if people are exposed to LGBT individuals, was supported. Furthermore, intergroup contact leads people to learn about and change preconceived ideas about a particular group. This

approach offers an alternative to embrace behavior change and generate favorable relationships among diverse groups.

Implications and Suggestions for Future Research

There are some practical implications as well as some theoretical implications related to this research. From a practical standpoint, this research aims at finding alternative ways of decreasing stigma and discrimination in minority groups. A panel approach is a resource that could be used in universities, schools, and political and religious organizations as a way to encourage interaction between different groups. The attitude change observed after EPIC panel presentations was small; however, participants had a general positive attitude toward LGBT people before the panel presentation. It would be interesting to conduct a study where individuals have a wider variety of attitudes at baseline to see how the attitudes change after intervention.

From a theoretical standpoint, the effects of the panel presentations represent more evidence for the efficacy of intergroup contact. This research could be used in the future to understand how the malleability of attitudes can be used to reduce stigma toward the LGBT community. It could also lead to developing panels to support intergroup contact of LGBT individuals with members of other groups within a particular community. More specifically, this study could be used to examine attitudes toward LGBT individuals in other settings (e.g., business, hospitals, clinical settings, educational institutions, religious institutions, etc.). Professionals such as doctors, social workers, caseworkers, teachers, therapists, etc. could benefit from gaining some experience interacting with people who identify as LGBT since they are more likely to have to work with people who identify as LGB or T during their career.

This study also provides rationale that might help understand how LGBT individuals are affected by stigma and discrimination and how to develop attitude change interventions. Activities that promote interaction and dialogue lead to acceptance and tolerance amongst individuals. Such activities include intergroup contact, which could lead to more positive attitudes and more equal social rules and norms that will improve the lives of LGBT individuals.

The people who will influence society in the near future are the students who attend universities today. If these students interact and empathize with members of the LGBT community, they will be able to better understand issues the LGBT community faces and they might become allies of the LGBT community in its struggle for equality, which, in the end, could affect policy in an effort to make our society more inclusive and equal.

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APPENDIX A

Attitudes Toward LGBT Survey

- 1) Check all that apply--I have a friend or family member who is Lesbian, Gay, Bisexual, Transgender, Other
- 2) I do (or would) feel comfortable having a friend who identifies as Lesbian
- 3) I do (or would) feel comfortable having a friend who identifies as Gay
- 4) I do (or would) feel comfortable having a friend who identifies as Bisexual
- 5) I do (or would) feel comfortable having a friend who identifies as Transgender
- 6) I do (or would) feel comfortable with my best friend telling me she/he is Lesbian
- 7) I do (or would) feel comfortable with my best friend telling me she/he is Gay
- 8) I do (or would) feel comfortable with my best friend telling me she/he is Bisexual
- 9) I do (or would) feel comfortable with my best friend telling me they are Transgender
- 10) Being LGBT is a choice*
- 11) Adults who don't want to identify as either a man or a woman have a problem*
- 12) Someone can be straight if they decide to*
- 13) I am afraid that a person of my own gender might hit on me*
- 14) LGBT people are perverts*
- 15) Gay people make me angry*
- 16) My religious beliefs disapprove of or condemn Lesbian, Gay, and Bisexual people*
- 17) My religious beliefs disapprove of or condemn Transgendered people*
- 18) If my best friend told me he/she would like to change his/her sex I would freak out*
- 19) I avoid LGBT people whenever possible*

- 20) Sexuality is determined, in part, by our biology and genes
- 21) Being gay (LGBT) is natural
- 22) I like LGBT people
- 23) Being LGBT should not be condemned
- 24) Bisexuals are confused*
- 25) Bisexuality is a phase*
- 26) Biscxuality is a stable sexual orientation
- 27) Adult females should identify themselves as women and adult males should identify as men*
- 28) People who say they were born in the wrong body are wrong. They just need to accept themselves for who they really are*
- 29) A man dressing like a woman is wrong*
- 30) A woman dressing like a man is wrong*
- 31) People are either men or women*
- 32) People should be allowed to freely express their gender identity
- 33) I think a man and a woman kissing or holding hands in public is natural
- 34) I think two women holding hands and kissing in public is natural
- 35) I think two men holding hands and kissing in public is natural
- 36) Sex between two women is as natural as sex between a man and a woman
- 37) Sex between two men is as natural as sex between a man and a woman

Note: Response options range from Strongly Agree to Strongly Disagree on a five-point Likert-like scale

*This item is reverse-coded

APPENDIX B

Perceptions of the panel

Check all that apply--People in the EPIC panel I watched identified as Lesbian, Gay, Bisexual, Transgender

- a) I think the panel was an important contribution to the class
- b) My perspective of LGBT changed after the panel
- c) I feel I have a better grasp of how some LGBT people feel
- d) I can see that people in the panel are normal people like me
- e) I would recommend this panel to other people
- f) What was the most important thing you learned from observing the panel?
- g) Do you have any additional comments you would consider helpful or relevant for this research?

Note: Response options for questions a through e range from Strongly Agree to Strongly Disagree on a five-point Likert-like scale. Questions f and g are text responses limited to 350 characters.

APPENDIX C

Informed Consent

Effect of Eastern Pride and Identity Coalition (EPIC) Panel Presentations on the Attitude of EMU Students

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Natalie Dove, Ph.D., Faculty Sponsor

Department of Psychology, Eastern Michigan University

Purpose of the Study: The purpose of this research is to gain a better understanding of the impact of EPIC panels on the attitude of students.

Procedure: You must be over the age of 18 to participate in this research. Your participation is expected to take approximately 30 minutes. You will be asked to answer questions about your thoughts and behaviors regarding the way you see Lesbian, Gay, Bisexual and Transgender individuals. This information will be collected via a secure, password protected, online domain. Questions will pertain to your previous and post panel reactions. In addition, background demographic information, including sexual orientation, may be asked.

Confidentiality: The information you provide will remain strictly confidential. The only individuals with access to your information will be the investigators of this project. The password protected data will be stored on the Psychology Department's Secure Server. There are two sections to this study. Your responses will be linked through a password that you will create and this information will not be linked to your identifying information. Should you choose to provide contact information for a randomized prize drawing, this information will be stored in a separate file from your responses, thus making it impossible for the investigators to know which responses are yours.

Voluntary Participation: Participation in this research is completely voluntary. You may discontinue your participation at any time without consequences. Additionally, there will be no consequence for refusing to provide any information asked of you throughout the duration of your participation.

Benefits of Participation: There are no direct benefits expected from participation in this research. However, please note that the results of this study may provide new information on how panels affect an individual's attitudes. Additionally, you have the option to obtain compensation by entering a drawing for a chance to win one of four \$25 gift cards.

Dissemination of Results: The findings of this research may be submitted for publication in a peer-reviewed psychological journal, as well as be presented at conferences throughout the nation. Through dissemination, findings will only be presented in aggregate form, with participants' identifying information remaining completely confidential.

Risks of Participation: There are no risks expected as a result of your participation, however you may be asked information of a personal nature. If, for any reason, the subject matter of this research causes you disturbance or distress, you may contact the following campus centers for help:

Counseling and Psychological Services (located in Snow Health building);

734.487.1118

Psychology Clinic (located on Cross St.); (734) 487-4987

Contact Information: Should you have any questions or concerns regarding your participation in this research, please contact the principal investigator, Silvana Alfaro, at salfarob@emich.edu, or the Faculty Sponsor, Natalie Dove, at ndove@emich.edu.

This research protocol and informed consent document has been reviewed and approved by the Eastern Michigan University Human Subjects Review Committee (UHSRC) for use from 04/05/13 to 04/04/14. If you have questions about the approval process, please contact the UHSRC at human.subjects@emich.edu or call 734-487-0042 or contact Dr. Alissa Huth-Bocks, 734-487-0112, ahuthboc@emich.edu.

Consent for Participation: By participating in this research, I am asserting that I have read and agreed to the foregoing information, am 18 years of age or older, and have had the opportunity to have any questions regarding participation answered to my satisfaction. By clicking 'Accept' and continuing, I am providing voluntary consent to participate in this research.