THE LEVEL OF HOMOPHOBIA IN ACADEMIC PERSONNEL AT A UNIVERSITY IN ISTANBUL AND ITS AFFECTING FACTORS



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ABSTRACT

Objective: This descriptive study aimed to evaluate a university academic staff with factors affecting attitudes towards homosexuals.

Material and Method: A questionnaire consisting of Hudson and Ricketts Homophobia Questionnaire, was applied to participants between February 15 and April 15, 2016. Questionnaires were distributed to a total of 200 academic staff working in a university in İstanbul and 132 people agreed to participate.

Results: The present results indicate clearly that women and young people have a more positive attitude towards homosexuality. The homophobia level of homosexual acquaintances was significantly lower than that of those

without homosexual acquaintances. As participants degree of familiarity with homosexuals increased, the level of homophobia was found to be significantly lower. The level of homophobia of those who were aware of a homosexual relative was significantly lower. It was found that those who were familiar with gay individuals considered homosexuality more as sexual orientation.

Conclusion: The findings indicate that culture may affect the attitudes toward homosexuality. Attitudes towards homosexuality can be altered via education and information while improvement of social interaction is possible with communication and acquaintance. It can be concluded that scientific knowledge, communication and social alignment are important topics for a healthy society.

Keywords: Homosexuality, stigma, academic personnel

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İSTANBUL'DA BİR ÜNİVERSİTEDE AKADEMİK PERSONELİN HOMOFOBİ DÜZEYİ VE ETKİLEYEN FAKTÖRLER

ÖZET

Amaç: Bu tanımlayıcı çalışma, bir üniversite akademik personelinin eşcinsellere yönelik tutumlarını ve bunu etkileyen faktörleri değerlendirmeyi amaçlamıştır.

Materyal ve Metot: Katılımcılara "Hudson and Rickett's Homofobi Ölçeği'ni içeren bir anket 15 Şubat - 15 Nisan 2016 tarihinde uygulandı. Anketler İstanbul'da bir üniversitede çalışan toplam 200 akademik personele dağıtılmış ve bunlar arasından 132 kişi ankete katılmayı kabul etmiştir.

Bulgular: Elde edilen sonuçlar, kadınların ve gençlerin eşcinselliğe yönelik tutumunun daha pozitif olduğunu

göstermektedir. Eşcinsel tanıdığı olanlarda da eşcinsel tanıdığı olmayanlara göre homofobi seviyesi daha düşük bulunmuştur. Katılımcıların eşcinsel tanıdıkları ile yakınlıkları artıkça homofobi seviyesinin düştüğü görülmüştür. Eşcinsel akrabası olan katılımcıların homofobi seviyesi anlamlı bir şekilde düşük bulunmuştur. Eşcinsel tanıdıkları olan katılımcıların eşcinselliği daha çok cinsel bir yönelim olarak gördükleri anlaşılmıştır.

Sonuç: Bulgular kültürün eşcinselliğe yönelik tutumlar etkileyebileceğini göstermektedir. Eşcinselliğe yönelik tutumlar eğitim ve bilgi ile değiştirilebilirken, iletişim, tanışıklığın sağlanması ve sosyal etkileşim ile de geliştirilebilir. Sonuç olarak sağlıklı bir toplum için bilimsel bilgi, iletişim ve sosyal gruplaşma önemli başlıklardır.

Anahtar kelimeler: Eşcinsellik, damgalama, akademik personel

INTRODUCTION

Prejudice and discrimination in society are important topics in social psychology. The work done in this regard shows those homosexual individuals comprise one of the groups subject to prejudice and discrimination because of their sexual orientation. Homosexual individuals face social and psychological problems such as exclusion, stigmatization and verbal and physical violence exposure. All of these attitudes negatively affect the lives of homosexual individuals. For this reason, researching attitudes and behaviours towards homosexuality has scientific and social significance.

Sexual orientation is defined as a permanent personal quality that leads the individual to feel attracted in a romantic and (or) sexual manner. The sexual orientation is divided into three categories; heterosexuality, homosexuality (gay/lesbian) and bisexuality. Homosexuality is the feeling that a person of the same gender has romantic or sexual attraction.

The term homophobia was first used by Weinberg. Weinberg described homophobia as a fear of homosexuality involving hostile attitudes towards homosexuals or as a state of homosexual self-hatred. There are also terms that include negative attitudes towards homosexuality, such as sexual stigma and heterosexism.³ Homophobia is frequently used to express negative attitudes toward homosexuality because it has accrued increasingly socio-cultural meanings in addition to its individual and pathological first meaning.⁴

The attitude towards homosexuality began to change significantly in 1973 when the American Psychiatric Association removed homosexuality and bisexuality from the list of mental illnesses.^{2,5} Subsequently, the World Health Organization (1992) stated that sexual orientation alone could not qualify as a disease on the ICD-10 (International Classification of Diseases) list, removing homosexuality from the mental and behavioural illness category.⁶ Despite many positive developments, the review of attitudes and behaviours towards homosexuality requires an update. In this regard, studies conducted in Turkey in general are carried out on university students, while this study examines the attitude of the academic staff and reveals a different point of view. In the study by Wagner et al (2013), due to the sexual orientation of the homosexual people; they have been exposed to verbal contempt and exclusion at their work school and social spaces.7 Prejudice and negative attitudes can create unhealthy business communication among academic staff as well as profoundly harm studentacademic staff communication. Accordingly, this study sought to evaluate the attitudes of the academic staff working in a university towards homosexuals in the society and the factors affecting these attitudes.

MATERIAL AND METHOD

This research is descriptive. Ethical approval to our study was granted by the Ethical Committee of Marmara University School of Medicine (29.01.2016/09.2016.122). All procedures performed in this study involving human participants were in accordance with ethical standards of the institutional

	n (%)	Low Homophobia Level n (%)	High Homophobia Level n (%)	p
Total	132 (100)			
Gender				
Male	55 (41.7)	18 (32.7)	37 (67.3)	<0.001
Woman	77 (58.3)	49 (64.5)	27 (35.5)	
Age				
40>	99 (74.8)	56 (57.1)	42 (42.9)	0.018
≥40	33 (25.2)	11 (33.3)	22 (66.7)	
Marital Status				
Married	74 (56.1)	29 (39.7)	44 (60.3)	0.013
Single	51 (38.6)	33 (64.7)	18 (35.3)	
Divorced	7 (5.3)	5 (71.4)	2 (28.6)	
Paternal Education *				
Primary school	25 (19.2)	9 (36)	16 (64)	0.173
Secondary/High School	44 (33.5)	22 (50)	22 (50)	
College and over	62 (47.3)	36 (58.1)	26 (41.9)	
Maternal Education *				
Primary school	49 (37.1)	17 (34.7)	32 (65.3)	0.005
Secondary/High School	43 (32.5)	23 (53.5)	20 (46.5)	
College and over	39 (29.5)	27 (69.2)	12 (30.8)	
Faculty				
Economics	29 (22)	17 (58.6)	12 (41.2)	0.572
Engineering	19 (14.4)	6 (31.6)	13 (68.4)	
Institute of Health Science	20 (15.2)	10 (50)	10 (50)	
Dentistry	31 (23.5)	16 (53.3)	14 (46.7)	
Pharmacy	19 (14.4)	10 (52.6)	9 (47.4)	
Fine Arts	14 (10.6)	8 (57.1)	6 (42.9)	
Title				
Research Assistants	82 (62.1)	47 (58)	34 (42)	0.143
Lecturers	6 (4.5)	1 (16.7)	5 (83.3)	
Assistant Professors	21 (15.9)	11 (52.4)	10 (47.6)	
Associate Professors	6 (4.5)	2 (33.3)	4 (66.7)	
Professors	17 (12.9)	6 (35.3)	11 (64.7)	

and national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. Subsequently, permission was obtained from Marmara University Faculty of Pharmacy, Dentistry, Economics, Engineering, Fine Arts, Health Sciences Faculty Deans' Offices.

Data were sought from those faculties between February 15 and April 15, 2016. This included 200 people selected haphazard from the academic staff working in these six faculties, and 132 replies and 68 rejections were received. Before the questionnaire was applied, the participants were informed about the research and gave their informed consent. When the questionnaire was applied, the participants were not contacted directly at the beginning and the interviews were inverted and collected to ensure that the participants were more comfortable.

The data were collected by a 43-question questionnaire applied to the participants. The questionnaire consists of two parts. The first part is 19 questions prepared by researchers and sociodemographic questions. Thirteen of these questions seek personal information. The second part of the questionnaire is the Hudson and Ricketts Homophobia Scale; The Hudson and Ricketts Homophobia Scale is a 25-item measure designed by Hudson and Ricketts (1980) to measure attitudes toward homosexual individuals. In the study, a 24-item Turkish form adapted by Sakallı and Uğurlu (2001) was used.8 The Turkish form had high reliability, with Cronbach's Alpha =0.94. On the scale, the participants rated each item on a Likert scale between 1 (no participation) and 6 (agree strongly). 5, 6, 8, 10, 11, 13, 17, 18, 23 and 24 items in the scale were reversed, and total points hence calculated.

The median value of the total score obtained was calculated, and the participants were divided according to the low and high homophobia level based on this score. The Chi-square test was used for statistical analysis.

RESULTS

Of the 132 participants, 58.3% were women, 74.8% were under 40 years old and 56.1% were married. The average age of the participants was 35.4±9.5. The educational status of the fathers of the participants was 47.3% at college-level or above, while the education level of the mothers was 37.1% at primary school or below. While 23.5% of the academic staff participated in the survey was in faculty of Dentistry, 62.1% of the participants were research assistants (Table 1).

Of those surveyed, 55.3% stated that they recognized someone they knew as homosexual in their surroundings. Of the 73 participants who were acquainted with homosexuals, 39.7% said they were not close to the individual they knew. In response to the question "What do you think about homosexuality?", 56.1% of respondents answered "it is a sexual orientation" (Table 2).

Approximately, 56.1% of respondents answered "I would try to understand" to the question "What



would you do if you were a homosexual child or a relative?". Around 87.9% of respondents answered "yes" to the question "Do you think that some people are excluded in Turkish society?". In response to the question "Should gay marriages be legal in Turkey?", 43.9% of respondents answered "no". Approximately, 48% of the respondents said "no" when asked whether "a gay couple should have the right to adopt in Turkey". In response to the question "If you were homosexual, would you hide your identity?", 43.2% of participants also responded "yes" (Table 3).

The median of the scores from the Hudson and Rickett Homophobia Scale administered to participants was found to be 88; the 51.1% of participants who were equal to or below this score were deemed to have lower homophobia; the other 48.9% of participants (who scored above 88) were placed at the high homophobia level. One of the respondents did not complete the scale; 131 did.

When homophobia scores were examined, it was observed that participants' homophobia changed according to sex. When these ratios are examined, it can be said that men are more homophobic than women (p<0.001). Higher levels of homophobia were found to be more common in older age groups (p=0.018). Participants who were married exhibited high homophobia while those who were single or divorced are at low homophobia (p=0.013). There was no significant difference between the educational status of the fathers of the participants and the level of homophobia of the participants (p=0.173). On the other hand, the increase of the mother's education level is effective when the level of the homophobia of the persons is low (p=0.005) (Table 1).

It has been observed that being familiar with homosexual individuals decreased the level of homophobia (p<0.001). It can be said that there is an inverse relationship between the degree of closeness to homosexuals and the level of homophobia; Homophobia was found to be low in those with high affinity to homosexuals (p<0.001). Participants who associate homosexuality with mental disorder or disease showed high homophobia levels; those who associate homosexuality with sexual orientation showed low homophobia levels (p<0.001) (Table 2). Participants who want to force or persuade homosexual relatives to see a doctor are usually at a high level of homophobia; those who are interested in homosexuality are generally at low levels of homophobia (*p*<0.001) (Table 3).

When the relationship between participants' attitudes towards homosexuality was examined, it was

	n (%)	Low Homophobia Level n (%)	High Homophobia Level n (%)	р
Total	132 (100)			
Gay acquaintance				
Yes	73 (55.3)	48 (67.6)	23 (32.4)	<0.001
No	59 (44.7)	19 (31.7)	41 (68.3)	
Homosexual familiarity level				
Very Close	7 (9.6)	7 (100)	0 (0)	< 0.001
Close	11 (15.1)	10 (90.9)	1 (9.1)	
A Little Close	17 (23.3)	13 (76.5)	4 (23.5)	
Not Close	29 (39.7)	19 (67.9)	9 (32.1)	
Not Close At All	9 (12.3)	1 (11.1)	8 (88.9)	
Thought about homosexuality*				
Mental Disorder	16 (12.1)	1 (6.2)	15 (93.8)	< 0.001
Disease	13 (9.8)	2 (15.4)	11 (84.6)	
Sexual Orientation	74 (56.1)	49 (67.1)	24 (32.9)	
Genetic Tendency	17 (12.9)	9 (52.9)	8 (47.1)	
No idea	8 (6.1)	3 (37.5)	5 (62.5)	
Other	3 (2.3)			

found that 69% of participants with homosexual acquaintances considered homosexuality to be "sexual orientation". About 41.7% of the subjects who were not homosexuals believed homosexuality to be "sexual orientation". Findings demonstrate a significant difference between the opinions of the homosexuals and those of the acquaintances of homosexual individuals (p=0.038).

When the participants were asked whether they were close or if their children were homosexual, 74.6% of participants who have homosexual acquaintances answered "tried to understand", 35% of participants who do not have homosexual acquaintances answered "offered to go to the doctor for treatment", 35% "tried to understand", 3% "tried to convince", 1,7% "violent practices". Significant differences were observed (p<0.001), indicating that most of the acquaintances or relatives of homosexual individuals will try to understand their acquaintances or relatives.

Significant differences were found between participants' feelings of homosexuality and homophobia in Turkish society (p=0.013). When the relationship between homophobia levels and the opinion on the legality of homosexual marriages is examined, those who approve of homosexual marriage are found to have low homophobia, and those who do not approve have high homophobia (p<0.001). Positive interpretations

	n (%)	Low Homophobia Level n (%)	High Homophobia Level n (%)	p
Total	131 (100)	2010111 (1.9)	2010111 (10)	
In the aspect of having a homosexual child/relative				
Transfer to the doctor	28 (21.2)	2 (7.1)	26 (92.9)	<0.001
Try to persuade	7 (5.3)	1 (14.3)	6 (85.7)	
Try to understand	74 (56.1)	52 (71.2)	21 (28.8)	
Violent Practices	1 (0.8)	0 (0)	1 (100.0)	
No idea	13 (9.8)	5 (38.5)	8 (61.5)	
Other	8 (6.1)	7 (87.5)	1 (12.5)	
Homosexuals in Turkish society				
Exclude	116 (87.9)	64 (55.7)	51 (44.3)	0.013
Does not exclude	11 (8.3)	3 (27.3)	8 (72.7)	
No idea	5 (3.8)	0 (0)	5 (100)	
Gay marriages in Turkey				
Should be legalised	46 (34.8)	37 (80.4)	9 (19.6)	<0.001
Should not be legalised	58 (43.9)	12 (21.1)	45 (78.9)	
No idea	28 (21.2)	18 (64.3)	10 (35.7)	
Adoption by gay couples in Turkey				
Should be legalised	43 (32.6)	36 (83.7)	7 (16.3)	<0.001
Should not be legalised	64 (48.5)	14 (22.2)	49 (77.8)	
No idea	25 (18.9)	17 (68)	8 (32)	
If I was gay, my identity				
I would hide	57 (43.2)	34 (59.6)	23 (40.4)	0.023
I would not hide	18 (13.6)	12 (66.7)	6 (33.3)	
No idea	57 (43.2)	21 (37.5)	35 (62.5)	

	OR	%95 confidence interval	р
Gender			
Male	3.47	1.53-7.87	0.03*
Age			
≥40	3.17	1.17-8.58	0.023*
Marital status			
Married	1		0.069
Single	4.81	0.72-32.10	0.104
Divorced	2.19	0.30-15.74	0.435
Mother Education			
Primary school	1		0.151
Secondary/High School	0.45	0.17-1.20	0.112
College and over	0.42	0.15-1.56	0,094

of the adoption of homosexual couples are prevalent among low homophobia individuals, while negative interpretations are prevalent among those with high homophobia (p<0.001). When we look at the relationship between homophobia levels of those surveyed and their need to hide their identities if they are homosexuals, more participants with high levels of homophobia indicated "no idea" regarding whether they would hide their homosexual identity compared to participants with low homophobia (p=0.023) (Table 3).

Age, sex, the educational status of the mothers of the participants, marital status were also analysed by logistic regression for the level of homophobia of the participants (Table 4). It has been observed that male participants had higher homophobia scores compared with female participants (odds ratio (OR) 3.479, 95%CI 1,536 – 7,879). Homophobia scores increased significantly when participants were over 40 years old compared with under 40 years old (OR 3.17, 95%CI 1,175 – 8,580). There was no significant difference between the educational status of the mothers of the participants and the level of homophobia of the participants (Table 4).

DISCUSSION

In this study, it is clear that the level of homophobia is related to gender: Men show higher homophobia than women and show more negative attitudes towards homosexuals. These findings are consistent with a number of studies suggesting that women are less homophobic than men.5,9-17 The main reason for males to be more homophobic than females is that males must depend on traditional gender roles and that traditional gender beliefs in society can be effective. 6,13,14,17 In the study by Sakallı (2002), it was found that men who define themselves as traditional and conservative were more homophobic.16 It has also been pointed out that homosexuality in Turkey, which is a male-dominated country, may have affected the attitudes of male participants (male homosexuals) and that male homosexuals were pre-regressed.16 It is clearly shown in the study of Okutan (2012), male anti-homosexual attitudes may be related to economic level: When the economic level is lower, the negative attitudes of men are higher.5 Also in a study that has been conducted on Chinese immigrant families living in Canada it has been stated that the homophobic tendencies of parents are being heavily affected by cultural factors.18 It can be considered that men's attachment to gender roles lead to negative attitudes towards individuals with a different sexual orientation.

In this study, the level of homophobia was found to be lower in younger participants. Anderssen (2002) reported that younger people had a more moderate



approach.¹⁰ Takacs *et al.* (2011) found that younger people have higher social acceptance of homosexuals than older people.¹⁷ It can thus be said that the attitudes of the youth towards homosexuals are more positive.

In this study, the maternal education level was observed to no affect homophobia levels of participants. A number of studies have shown that as the education level increases, the level of the participant's homophobia decreases, and it is observed to induce a more positive attitude. Ayğar *et al.* (2015) reported that the level of homophobia decreased as the university class level increased. According to Takacs *et al.* (2011), social acceptance of homosexuals is higher among people with higher education levels.

Participants who have homosexual acquaintances have positive attitudes towards the possibility that their children or their relatives are homosexual, while those who are not homosexual have resorted to such methods as forcing or persuading them to visit a doctor. As seen from these results, acquaintance with homosexual individuals has an important influence on the formation of positive attitudes. A number of studies, supported by this recommendation, have shown that increasing the number of positive social contacts with homosexuals will reduce homosexual prejudices. 10-12,15,16,19 In this context, it can be said that getting acquainted among different social groups is a very important factor in destroying prejudices and creating positive attitudes in society.

The findings indicate that people with a high degree of closeness to homosexuals had a lower rate of homophobia and exhibited more positive attitudes. Previous research supported this found that the definitions and expressions for homosexuals are related to the level of homophobia of individuals and to the acquaintances of homosexual individuals. ^{10,15} It has also been shown that people who have social relations with homosexuals have positive attitudes towards homosexuality and that these social relations increase the positive attitudes. ¹²

When individuals are familiar with homosexuality, they have expressed the concept of homosexuality by using scientific expressions that define "sexual orientation". Çırakoğlu (2006) pointed out that homosexuality is seen as a psychological disturbance by those who are not acquainted with homosexual individuals or as a personal preference or lifestyle by those who have acquaintances with homosexual individuals. ¹² It can be said that while individuals are in social relations with homosexual individuals, they have come closer to supporting scientific definitions.

Those with low levels of homophobia describe homosexuality as sexual orientation, while those with high levels of homophobia expressed a view of homosexuality as a genetic disorder or mental illness. According to the American Psychiatric Association, homosexuality (gay/lesbian) is one of the three categories of sexual orientation, and is defined as a permanent personal quality that leads the individual to feel attracted in a romantic and (or) sexual manner to others of the same gender. From this, it can be said that those who define homosexuality according to scientific recognition have a positive attitude toward homosexuals.

Individuals with high levels of homophobia respond to homosexuality as a disorder, trying to change them or referring to a doctor, whereas others with low level of homophobia approach with an understanding manner. This can be deduced from the interpretation of individuals as their prejudices diminish, followed by more understanding and calmer attitudes.

It has emerged that individuals with low level of homophobia support homosexual marriage and adoption by homosexual couples in Turkey. According to Article 134 of the Turkish Civil Code, marriage is restricted between men and women, and homosexual couples do not have the right to marry. Again, in Article 306 of the Turkish Civil Code married couples can adopt children together whereas unmarried partners have no rights to adopt children.²⁰ While there is no explicit law for homosexual couples, homosexual couples who cannot get married will not be able to adopt as a couple. It has also been shown that the work done in Europe reduces the anti-homosexual attitudes in countries that have made the legal declaration of homosexual marriages or partnerships equal to those of heterosexual individuals. It can be argued that, rather than expecting the level of homophobia of society to change, institutions may increase their positive attitudes by reducing the prejudice of denying equal rights for homosexuals.¹⁷

In this study, individuals with high homophobia were not able to comment on the possibility of being homosexual. In the study by Sakallı (2001), it is very uncomfortable for such individuals to draw sexual interest from a homosexual.⁸ They also gave negative answers to the homosexuality questions about their families.⁸ It can be understood that individuals tend to have negative attitudes in situations such as closeness, homosexuality or homosexual interest, and remain in uncertain situations.

According to the survey, being a woman, being young, being familiar with gay people, knowing a homosexual

individual closely, and having a high level of maternal education are the factors that are more effective in terms of cultivating positive attitudes of people towards homosexuals. It is understood that those who are acquainted with homosexual individuals have more scientific knowledge, and they appear to have more consistent attitudes towards homosexual acquaintances. This study shows that those who have positive attitudes towards homosexuality support homosexuality and adoption by homosexual couples.

The findings indicate that culture may affect the attitudes toward homosexuality. Attitudes towards homosexuality can be altered via education and information while improvement of social interaction is possible with communication and acquaintance. It can be concluded that scientific knowledge, communication and social alignment are important topics for a healthy society.

Society will contribute to the creation of more permanent solutions in the light of the results of the studies on the attitudes of the different professions, especially the different social groups that comprise people working in the field of education. Due to insufficient number of participants faculties were not analysed for the level of homophobia of the participants; this limits the survey a great deal. Sample does not represent the universal set as it was not chosen randomly.

According to the results, academic staff working in the field of education and research can be informed, and studies on reducing prejudice and negative attitudes can be made by forming educational fields that will provide social communication with homosexuals and enhance their understandings.

*The authors declare that there are no conflicts of interest.



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