

Gender differences in cisgender psychologists' and trainees' attitudes towards transgender people

Damien W. Riggs and Rebecca Sion

Abstract

Research that has explored the attitudes of cisgender people toward transgender people has identified gender differences, with cisgender men commonly reporting more negative attitudes than cisgender women. However, little research has explored whether such differences exist among mental health professionals. This brief report outlines findings from 3 studies focusing on attitudes toward transgender people among 3 samples of Australian cisgender psychologists or psychology trainees. The first explored attitudes toward transgender people among psychology undergraduates in an Australian university. The second 2 explored attitudes toward transgender people among Australian mental health-care professionals (with the specific focus of this brief report being upon participants in each study who were psychologists). The findings from each study suggest that cisgender men reported more negative attitudes than did cisgender women. This brief report concludes by considering the broader context that potentially shapes cisgender men's attitudes and advocates for further research that examines the impact of gender ideology upon attitudes and awareness raising so as to improve service outcomes for transgender people.

This is an Author Accepted version of a manuscript published in *Psychology of Men and Masculinities*. Copyright American Psychological Association.

Introduction

How cisgender people view and respond to transgender people is shaped by gender ideologies (Schilt & Westbrook, 2009). In this paper the term 'cisgender' is used to refer to people who are not transgender. The word is derived from the Latin term 'cis', which means on the same side (Riggs, Ansara, & Treharne, 2015). Cisgender people are thus people who identify with the gender normatively expected of their assigned sex (McGeeney & Harvey, 2015). Cisgender people's attitudes towards transgender people have been explored through application of Hill and Willoughby's (2005) *Genderism and Transphobia Scale* (GTS), using primarily heterosexual samples (although some samples have included lesbian, gay and bisexual participants, and some studies have not reported on participants' sexual orientation). The GTS asks participants to respond to 30 items using a 7-point Likert scale, with each item being a statement about gender norms and/or attitudes towards transgender people, including attitudes that are transphobic (i.e., are dismissive or pathologizing of transgender people). Studies that have applied the GTS have identified gender differences amongst cisgender respondents. For example, Gerhardstein and Anderson (2009) applied the GTS to a sample of undergraduate students in the U.S. Midwest, and found that men reported more negative attitudes towards transgender people than did women. Winter, Webster, and Chong (2008) administered a Chinese translation of the GTS to a sample of 205 students at the University of Hong Kong. Again, in their sample men reported more negative attitudes than did women.

Other researchers have also sought to examine cisgender people's perceptions of transgender people using alternate measures. Tee and Hegarty (2006), for example, explored support for the rights of transgender people amongst a sample of 151 cisgender U.K. participants. They found that women were more likely than men to support the rights of transgender people. In Sweden, Landen and Innala (2000) undertook a similar survey focused on support for transgender people's rights. Like Tee and Hegarty, they found that cisgender men tended to be less supportive of transgender people's rights than were cisgender women.

In the U.S., Nagoshi et al. (2008) developed a measure designed to assess prejudice towards transgender people, and also found that cisgender women tended to report less prejudice than did cisgender men.

Research on the possible causes of negative attitudes towards transgender people suggests that such attitudes are typically underpinned by the desire to maintain existing ‘traditional’ or normative understandings of gender. Witten and Eyler (1999), for example, have theorized that negative attitudes towards transgender people are driven by a desire to maintain rigid boundaries between genders, and moreover to enforce the belief that gender is a direct reflection of assigned sex and thus cannot be changed. This is confirmed in the research of Tee and Hegarty (2006), which found that participants who endorsed a traditional, binary, biologically-based model of gender were more likely to oppose granting rights to transgender people.

Connell’s work on masculinity provides insight as to why cisgender men more than women are likely to be invested in such traditional understandings of gender (Connell & Messerschmidt, 2005). Connell’s account of hegemonic masculinity suggests that cultural norms in relation to gender instruct cisgender men to frame masculinity through comparison with a series of disavowed others: cisgender women, gay men, and transgender people, specifically transgender women. As such, negative attitudes towards transgender people serve to legitimate claims to a normative masculinity. It is of note in this regard that the majority of the items on the GTS refer to transgender women. As such, it is possible that the GTS primarily measures attitudes towards this specific group of transgender people, hence potentially explaining why cisgender men respond more negatively to the measure.

Negative attitudes amongst psychologists can have significant implications for transgender clients. Research overwhelmingly suggests that transgender people have negative experiences with mental health care professionals. For example, Speer and McPhillips (2013) report that the majority of their transgender participants classified psychiatrists as

‘unfriendly’, not ‘understanding’, and ‘aggressive’ (pp. 388-389), a finding echoed in other U.K. research (e.g., Ellis, Bailey, & McNeil, 2015). Australian research with 253 transgender people provides examples of pathologizing responses from mental health professionals, such as “I had an appalling psychiatrist as was his replacement at his clinic. All they wanted to know about was my sexual practices and fantasies. They were not interested in anything else” (Pitts et al., 2007, p. 172). Other Australian research based on a sample of 188 transgender participants has similarly reported that a majority experienced negative interactions with mental health care professionals (Riggs, Coleman, & Due, 2014). Finally, respondents in Bess and Stabb’s (2009) U.S. interview study reported “a lack of competency, overt expressions of hostility, and approaching therapy with an attitude of eliminating pathology rather than facilitating wholeness” (p. 273).

Only a small number of studies have specifically examined mental health professionals’ attitudes towards transgender people. Both Bowers et al.’s (2015) study of school psychologists and Ali et al.’s (2016) study of psychiatrists found that cisgender women were more likely to report positive attitudes towards transgender people than were cisgender men. Relatedly, Nisley’s (2010) study of masters and doctoral student counselors and counseling psychologists found that cisgender men expressed higher levels of anti-transgender attitudes than did cisgender women.

Given findings related to gender differences amongst cisgender people in regards to attitudes towards transgender people; the relative dearth of research on cisgender psychologists’ attitudes towards transgender people; and the potential implications of negative attitudes amongst cisgender psychologists for service provision to transgender people, the present paper briefly reports on findings from three Australian studies, with a specific focus on gender differences amongst cisgender psychologists and trainees with regard to attitudes towards transgender people.

Method

Ethics approval for the first and third study was granted by the first author's institution. Approval for the second study was granted by the second author's institution. Participants in each study were asked to indicate if they identified as transgender. Whilst the projects were not limited to cisgender people, only cisgender people participated. Similarly, despite not being limited to heterosexual people, only heterosexual people participated. All participants were White Australians. The ratio of men to women in the samples mirrors current ratios amongst practising psychologists in Australia, where 77% of registered psychologists are women (DEEWR, 2013). The findings from the first study have been previously reported (Riggs, Webber, & Fell, 2010). The analyses of the second and third study, focusing specifically as they do on a subset of the participants (i.e., only psychologists), were undertaken specifically for the present paper.

Study 1

Method

Participants in the first study were 173 undergraduate psychology students recruited at the first author's institution. Of the participants, 105 were women and 68 were men. Participants completed a version of Hill and Willoughby's (2005) *Genderism and Transphobia Scale* adapted for the Australian context (GTS-RA), on which higher scores equate to more negative attitudes.

Results

A factor analysis indicated three factors shown below in Table 1, accounting for 59.63% of the variance, $\alpha = .94$. In regards to gender differences amongst the sample, men scored higher than women across all three factors, suggesting that gender differences in attitudes towards transgender people were not restricted to one aspect of prejudice amongst the sample.

Study 2

Method

The second project again utilized the GTS-RA, this time amongst a sample of 122 Australian mental health professionals (comprised of psychologists, social workers, and counselors). Participants were recruited via social media and the professional networks of the second author. For the purposes of this report, only the sub-sample of 66 participants who were psychologists were included in the analysis, of whom 15 were men and 51 were women.

Results

A factor analysis of the GTS-RA only identified one factor that explained a considerable proportion of the variance (35.44%), $a = .87$. This factor was comprised of items that constituted the genderism/transphobia factor reported in study one. On this factor (range 5-35), female participants scored lower ($M=22.79$, $SD=6.14$) than did male participants ($M=27.50$, $SD=7.69$), $t = 2.133$, $p < .05$, $d = .67$.

Study 3

Method

The third project was similar to the second, in that it assessed attitudes towards transgender people amongst a sample of 304 Australian mental health care professionals (comprised of psychologists, social workers, counselors, psychiatrists, and mental health nurses). Participants for this project were recruited via advertisements placed in newsletters of the five professional organizations. It was different, however, in that rather than using the GTS-RA, a modified version of the *Counselor Attitude Toward Transgender Scale* (CATTS) (Rehbein, 2012) was utilized. The CATTS uses a 6-point Likert scale to assess responses to 20 items, each of which is a statement about the inclusion and acceptance (or otherwise) of transgender people. As opposed to the GTS-RA, higher scores on the CATTS indicate more positive attitudes. Possible scores on the CATTS range from 20 – 120.

Results

Focusing again just on the subsample of psychologists ($n=73$), of whom 22 were men and 51 women, there were gender differences in terms of responses to the CATTs, $a = .92$. Men reported less positive attitudes ($M=86.53$, $SD=7.23$) than did women ($M=98.70$, $SD=6.23$), $t= 3.831$, $p < .05$, $d = 1.80$.

Discussion

The three studies reported here mirror previous research (e.g., Ali et al., 2016; Bowers et al., 2015; Nisley 2010) in finding more negative (on the GTS-RA) or less positive (on the CATTs) attitudes towards transgender people amongst cisgender men as compared to cisgender women within three Australian samples of cisgender psychologists and trainees. Whilst in each project men's attitudes were still more positive than they were negative (i.e., they were above the midpoint for each scale), the differences (given the large effect sizes) warrant further comment. Importantly, and given the claim that negative attitudes towards transgender people may be the product of a belief in traditional gender binaries (Tee & Hegarty, 2006), it would be an error on our part to reinforce such binaries by claiming a fundamental difference between cisgender men and women. What we can suggest, however, and following Connell and Messerschmidt's (2005) work on hegemonic masculinity, is that cisgender men are encouraged to invest in a particular understanding of masculinity that stands in contrast to a series of disavowed others, especially transgender women. That male psychologists would be susceptible to such an investment is thus not surprising.

The suggestion that cisgender men may be impacted by gender ideologies more so than women suggests that awareness raising in the context of service provision to transgender people must address the potential impact of gender ideologies, including both cisgender men and women. As such, it is a notable shortcoming of the three studies reported here that gender ideology was not assessed. Future research would benefit from including a measure of gender ideology (see Thompson Jr. & Bennett, 2015, for examples) so as to determine whether

differences in attitudes towards transgender people between cisgender men and women are mediated by gender role ideology. Additional potential variables such as religiosity and right-wing-authoritarianism may also usefully be included to determine whether or not variables such as these mediate the relationship between gender and attitudes. Future research will also benefit from larger samples including greater numbers of men. Whilst, as noted above, the gender ratios in the samples of the three studies reported here are similar to those within the profession of psychology in Australia, the overall samples were relatively small and included only White Australians, thus potentially limiting the generalizability of the findings.

To conclude, the findings reported here indicate the merits of an ongoing focus on gender differences amongst cisgender psychologists with regard to attitudes towards transgender people, so as to ascertain the possible causes of such differences. Awareness raising may potentially lead to more inclusive service responses that better meet the needs of transgender people, and thus potentially contribute to a reduction in negative experiences on the part of transgender people.

References

- Ali, N., Fleisher, W., & Erickson, J. (2016). Psychiatrists' and psychiatry residents' attitudes towards transgender people. *Academic Psychiatry, 40*, 268-273. doi: 10.1007/s40596-015-0308-y
- Bess, J. A., & Stabb, S. D. (2009). The experiences of transgendered persons in psychotherapy: Voices and recommendations. *Journal of Mental Health Counseling, 31*, 264-282. doi: 10.17744/mehc.31.3.f624154681133w50
- Bowers, S., Lewandowski, J., Savage, T. A., & Woitaszewski, S. A. (2015). School psychologists' attitudes toward transgender students. *Journal of LGBT Youth, 12*, 1-18. doi: 10.1080/19361653.2014.930370
- Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity rethinking the concept. *Gender & Society, 19*(6), 829-859. doi: 10.1177/0891243205278639

Department of Education, Employment and Workplace Relations (DEEWR). (2013).

Australian Jobs 2013 - Occupation Matrix. Canberra: DEEWR.

Ellis, S. J., Bailey, L., & McNeil, J. (2015). Trans people's experiences of mental health and gender identity services: A UK study. *Journal of Gay & Lesbian Mental Health, 19*(1), 4-20. doi: 10.1080/19359705.2014.960990

Hill, D. B., & Willoughby, B. L. B (2005). The development and validation of the *Genderism and Transphobia Scale*. *Sex Roles, 53*, 531-544. doi: 10.1007/s11199-005-7140-x

Gerhardstein, K. R., & Anderson, V. N. (2009). There's more than meets the eye: Facial appearance and evaluations of transsexual people. *Sex Roles, 62*, 361-373. doi: 10.1007/s11199-010-9746-x

Landen, M., & Innala, S. (2000). Attitudes towards transexualism in a Swedish national survey. *Archives of Sexual Behaviour, 29*, 375-388. doi: 10.1023/A:1001970521182

McGeeney, E., & Harvey, L. (2015). Cisgender - Living in the gender assigned at birth. In C. Richards & M. J. Barker (Eds.), *The Palgrave handbook of the psychology of sexuality and gender* (pp. 149-165). Basingstoke: Palgrave Macmillan.

Nagoshi, J. L., Adams, K. A., Terrell, H. K., Hill, E. D., Brzuzy, S., & Nagoshi, C. T. (2008). Gender differences in correlates of homophobia and transphobia. *Sex Roles, 59*, 521-531. doi: 10.1007/s11199-008-9458-7

Nisley, E. A. (2010). *Counseling professionals' attitudes toward transgender people and responses to transgender clients*. Unpublished doctoral thesis, Western Michigan University, Kalamazoo, MI, United States.

Pitts, M., Couch, M., Croy, S., Mitchell, A., & Mulcare, H. (2009). Health service use and experiences of transgender people: Australian and New Zealand perspectives. *Gay and Lesbian Issues and Psychology Review, 5*, 167-176.

- Rehbein, R. N. (2012). *Transition in conceptualizing the transgender experience: A measure of counselor attitudes*. Unpublished master's thesis, Eastern Illinois University, Charleston, IL, United States.
- Riggs, D. W., Ansara, Y. G., & Treharne, G. J. (2015). An evidence-based model for understanding transgender mental health in Australia. *Australian Psychologist, 50*, 32-39. doi:10.1111/ap.12088
- Riggs, D. W., Coleman, K., & Due, C. (2014). Healthcare experiences of gender diverse Australians: A mixed-methods, self-report survey. *BMC Public Health, 14*, 230-234. doi: 10.1186/1471-2458-14-230
- Riggs, D. W., Webber, K., & Fell, G. R. (2012). Australian undergraduate psychology students' attitudes towards trans people. *Gay and Lesbian Issues and Psychology Review, 8*, 52-62.
- Schilt, K., & Westbrook, L. (2009). Doing gender, doing heteronormativity: 'Gender normals', transgender people, and the social maintenance of heterosexuality. *Gender & Society, 23*(4), 440-464. doi: 10.1177/0891243209340034
- Speer, S., & McPhillips, R. (2013). Patients' perspectives on psychiatric consultations in the Gender Identity Clinic: Implications for patient-centered communication. *Patient Education and Counseling, 91*, 385-391. doi: 10.1016/j.pec.2012.12.009
- Tee, N., & Hegarty, P. (2006). Predicting opposition to the civil rights of trans persons in the United Kingdom. *Journal of Community & Applied Social Psychology, 16*, 70-80. DOI: 10.1002/casp.851
- Thompson Jr, E. H., & Bennett, K. M. (2015). Measurement of masculinity ideologies: A (critical) review. *Journal of Men and Masculinity, 16*, 115-133. doi: 10.1037/a0038609

Winter, S., Webster, B., & Cheung, P. K. E. (2008). Measuring Hong Kong undergraduate students' attitudes towards transpeople. *Sex Roles, 59*, 670-683. doi: 10.1007/s11199-008-9462-y

Witten, T. M., & Eyler, A. E. (1999). Hate crimes and violence against the transgendered. *Peace Review, 11*, 461-468.

Table 1. Gender differences in responses to the GTS-RA amongst a sample of Australian undergraduate psychology students

Factor	Range	Male <i>M</i> (<i>SD</i>)	Female <i>M</i> (<i>SD</i>)	<i>t</i>	Significance	Effect Size
Genderism/ Transphobia	13-91	63.64 (15.74)	53.34 (15.18)	3.50	$p = .01$	$d = .66$
Gender bashing	5-35	19.55 (9.69)	13.64 (7.02)	3.95	$p = .01$	$d = .69$
Gender teasing	4-28	13.95 (5.22)	10.23 (5.27)	3.32	$p = .01$	$d = .70$