We are witnessing a recent eruption of gay teen suicides across the country, from the East Coast to Indiana, Texas to California, where 13-year-old Seth Walsh, who recently hanged himself.

There is something fundamentally wrong in our culture when our youth is suffering such great levels of despair that they are ending their lives. Those occurrences create many more victims than the obvious ones, families, friends and entire communities are affected. Bullying is not only illegal it is also immoral. It is our moral duty as adults to stop bullying regardless of the cause. Sexual orientation, race, social economic status, popularity, bullying is wrong, there is no justification for it and no place for it in our society.

As educators it is our responsibility to provide a safe environment for all students. It is also our responsibility to prepare our students to be successful in their future personal and professional lives. Teaching tolerance is part of this training responsibility. Young adults who are capable of interacting with respect with those different from themselves, whatever the difference is, are more likely to be successful in all aspects of their adult lives.

Like racism or classism, homophobia has no place in our society. The following article shows that as a consequence of homophobia, 90% of our gay students have being harassed. Understanding root causes of homophobia is one of the resources to be used in controlling this problem. Like discussed in class: understand predict and control is the objective of all disciplines. It all start with understand.
Is Homophobia Associated With Homosexual Arousal?

Henry E. Adams, Lester W. Wright, Jr., and Bethany A. Lohr
University of Georgia

The authors investigated the role of homosexual arousal in exclusively heterosexual men who admitted negative affect toward homosexual individuals. Participants consisted of a group of homophobic men (n = 35) and a group of nonhomophobic men (n = 29); they were assigned to groups on the basis of their scores on the Index of Homophobia (W. W. Hudson & W. A. Ricketts, 1980). The men were exposed to sexually explicit erotic stimuli consisting of heterosexual, male homosexual, and lesbian videotapes, and changes in penile circumference were monitored. They also completed an Aggression Questionnaire (A. H. Buss & M. Perry, 1992). Both groups exhibited increases in penile circumference to the heterosexual and female homosexual videos. Only the homophobic men showed an increase in penile erection to male homosexual stimuli. The groups did not differ in aggression. Homophobia is apparently associated with homosexual arousal that the homophobic individual is either unaware of or denies.

Hostility and discrimination against homosexual individuals are well-established facts (Berrill, 1990). On occasion, these negative attitudes lead to hostile verbal and physical acts against gay individuals with little apparent motivation except a strong dislike (Herek, 1989). In fact, more than 90% of gay men and lesbians report being targets of verbal abuse or threats, and more than one-third report being survivors of violence related to their homosexuality (Fassinger, 1991). Although negative attitudes and behaviors toward gay individuals have been assumed to be associated with rigid moralistic beliefs, sexual ignorance, and fear of homosexuality, the etiology of these attitudes and behaviors remains a puzzle (Marmor, 1980). Weinberg (1972) labeled these attitudes and behaviors homophobia, which he defined as the dread of being in close quarters with homosexual men and women as well as irrational fear, hatred, and intolerance by heterosexual individuals of homosexual men and women.

Hudson and Ricketts (1980) have indicated that the meaning of the term homophobia has been diluted because of its expansion in the literature to include any negative attitude, belief, or action toward homosexuality. Fyfe (1983) has also argued that the broad definition of homophobia threatens to restrict our understanding of negative reactions to gay individuals. Furthermore, Hudson and Ricketts criticized studies for not making the distinction between intellectual attitudes toward homosexuality (homonegativism) and personal, affective responses to gay individuals (homophobia). They indicated that many researchers do not state the operational definition of what they term homophobic. To clarify this problem, Hudson and Ricketts defined homonegativism as a multidimensional construct that includes judgment regarding the morality of homosexuality, decisions concerning personal or social relationships, and any response concerning beliefs, preferences, legality, social desirability, or similar cognitive responses. Homophobia, on the other hand, was defined as an emotional or affective response including fear, anxiety, anger, discomfort, and aversion that an individual experiences in interacting with gay individuals, which may or may not involve a cognitive component. For example, ego-dystonic homosexuality or marked distress about one’s sexual orientation may be a type of homonegativism but does not necessarily imply homophobia. This clarification is consistent with Weinberg’s (1972) definition of homophobia, as well as Haaga’s (1992) suggestion that the term be restricted to clearly phobic reactions.

It has also been argued that the term homophbic may not be appropriate because there is no evidence that homophobic individuals exhibit avoidance of homosexual persons (Bernstein, 1994; Rowan, 1994). Nevertheless, the only necessary requirement for the label of phobia is that phobic stimuli produce anxiety. Whether the individual exhibits avoidance or endures the anxiety often depends on the nature of the stimuli and the environmental circumstances. MacDonald’s (1976) suggestions are consistent with this analysis because he defined homophobia as anxiety or anticipatory anxiety elicited by homosexual individuals. O’Donahue and Caselles (1993) noted that McDonald’s definition parallels the diagnostic criteria of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV; American Psychiatric Association, 1994) for simple phobia and captures the negative emotional reactions toward homosexuality that seem to have motivated use of the term. In a similar analysis, O’Donahue and Caselles described a tripartite model of homophobia consisting of cognitive, affective, and behavioral components that may interact differently with various situations associated with homosexuality.

Although the causes of homophobia are unclear, several psychoanalytic explanations have emerged from the idea of homophobia as an anxiety-based phenomenon. One psychoanalytic explanation is that anxiety about the possibility of being or becoming a homosexual may be a major factor in homophobia.
(West, 1977). An example of the hyper (1993) has assumed that homophobia is the result of the reorganization of homophobia in the interactional relations of the self-sufficient (West). Whereas these notions are vague, they provide theoretical insights into the nature of homophobia as a response to perceived or latent homosexuality. Latent homosexuality may be defined as a homosexual arousal which the individual is unable to recognize or express because he is not aware of or denies his homosexual desires. In fact, West (1977) has shown that homophobia is a result of repressed homosexual urges and is one of the purposes of this study.

Specifically, the present study was designed to investigate whether homophobic men showed greater sexual arousal to homosexual cues than nonhomophobic men as suggested by psychoanalytic theories. This study was to evaluate whether homophobic men are more sexually oriented than nonhomophobic men as suggested by psychoanalytic theories, and whether homophobic men show more sexual arousal to homosexual cues than nonhomophobic men as suggested by psychoanalytic theories. This study was also to evaluate whether homophobic men are more sex-oriented than nonhomophobic men as suggested by psychoanalytic theories, and whether homophobic men show more sexual arousal to homosexual cues than nonhomophobic men as suggested by psychoanalytic theories.

**Method**

**Participants**

Caucasian heterosexual male volunteers (n = 66) recruited from the Psychology Department, Research Subject Pool at the University of Georgia participated in the study. These were consented during a large group testing during which they completed the male version of the Kinsey-Hardon-Homosexual Rating Scale (Kinsey, 1953), and the Aggression Questionnaire (Roth & Perry, 1992). They were consented to the study by a psychologist on the laboratory handout of the study. All participants received partial course credit. The mean age of the men was 28.4 years (range = 18-64). The design of this study was a 2 x 2 x 2 factorial design with the independent variables of sexual orientation (heterosexual vs. homosexual), and the dependent variables of sexual orientation and aggression. The men were divided into two groups on the basis of their scores on the Heterosexual Rating Scale (Kinsey, 1953). The homosexual group was composed of men who scored exclusively homosexual on the Heterosexual Rating Scale (Kinsey, 1953). The heterosexual group was composed of men who scored exclusively heterosexual on the Heterosexual Rating Scale (Kinsey, 1953). The men were divided into two groups on the basis of their scores on the Heterosexual Rating Scale (Kinsey, 1953). The homosexual group was composed of men who scored exclusively homosexual on the Heterosexual Rating Scale (Kinsey, 1953). The heterosexual group was composed of men who scored exclusively heterosexual on the Heterosexual Rating Scale (Kinsey, 1953).

**Screening Measures**

Kinsey Heterosexual/Homosexual Rating Scale A modified version of the Kinsey Heterosexual/Homosexual Rating Scale was used to assess sexual orientation and past sexual experiences. This version of the Kinsey is a 7-point scale on which individuals agree or disagree with their sexual orientation and past sexual experiences. The scale ranges from exclusively heterosexual (0) to exclusively homosexual (7). Participants who repeated this scale were excluded for participation.

**Aggression Questionnaire**

The Aggression Questionnaire (Roth & Perry, 1992) is a 20-item scale developed to assess sexual orientation and past sexual experiences. This version of the Kinsey is a 7-point scale on which individuals agree or disagree with their sexual orientation and past sexual experiences. The scale ranges from exclusively heterosexual (0) to exclusively homosexual (7). Participants who repeated this scale were excluded for participation.

**Stimulus Materials**

The stimuli comprised segments of erotic video materials depicting consensual adult heterosexual activity, consensual adult homosexual activity, and consensual male heterosexual activity by heterosexual men in the video. The video men were rated as exclusive or exclusive heterosexual by heterosexually heterosexual judges.
oral-genital contact (e.g., fellatio or cunnilingus) and intercourse (i.e., vaginal penetration, and penetration on the body in the lesbian film). The lesbian videotape was included because it has been shown to be highly sexually arousing to heterosexual men and is a better discriminator between heterosexual and homosexual men than other stimuli (Mavissikalian, Blanchard, Abel, & Barlow, 1975).

Procedure
The procedure was explained to the participant on arrival at the laboratory. He was informed that he could terminate participation at any time, and he signed informed consent. The participant was accompanied to a soundproof chamber where he was seated in a comfortable reclining chair and was given instructions on the proper placement of the MIR strain gauge. After the experimenter's departure from the experimenter's laboratory and the adjoining equipment room, the participant attached the penile strain gauge. The adjoining equipment room housed the Grass polygraph, the videotape player, an IBM-compatible computer, and the two-way intercom. Since the participant indicated that he preferred being alone, the experimenter left. The intercom line was recorded in the absence of any stimulus. Next, those sexually explicit videos were presented to the participant. Following each videotaped presentation, he rated his level of subjective sexual arousal (i.e., how "turned on" he was) and the degree of penile erection (i.e., from no change to 100% erection) on a scale of 0 to 10. The participant's penile circumference was allowed to return to baseline levels before the next stimulus was presented. The sequence of presentation was counterbalanced across participants to avoid order effects. Following the final presentation, the participant was debriefed and dismissed.

Data Reduction
A change score was used to analyze the penile plethysmographic data where the mean penile circumference (in millimeters) in the first second of time was subtracted from subsequent seconds for each video presentation. These scores were divided into six 40-s time blocks. The average change score in penile circumference for each time block was then analyzed.

Results
Penile Plethysmography
The data were analyzed using mixed model analysis of variance (ANOVA) with one between-subject factor (Groups) and two within-subject factors (Stimulus Type and Time Blocks). The main effect for stimulus type, $F(2, 124) = 23.67, p < .001$; time blocks, $F(5, 310) = 137.46, p < .001$; and their interaction, $F(10, 620) = 21.73, p < .001$, were all significant, as was the Groups X Stimulus Type X Time Blocks interaction, $F(10, 620) = 2.11, p < .05$. No other main effects or interactions were significant. The data for each time block for the two groups are presented separately for each stimulus type in Figure 1. In inspection of this figure suggests that the interaction is due to a difference between homosexual and nonhomosexual men across time blocks for only the homosexual video.

In order to evaluate this impression, we conducted ANOVAs of Groups X Time Blocks for each stimulus type. For the heterosexual and homosexual videos, only time blocks were significant, indicating increases in penile engorgement over time blocks, $F(5, 310) = 115.532, p < .001$; and $F(5, 310) = 64.878, p < .001$, respectively. These results indicate that both groups showed significant engorgement to these videos. For the male homosexual video, there was a significant main effect of groups, time blocks, and their interaction: $F(5, 310) = 21.64, p < .001$; and $F(5, 310) = 5.14, p < .05$, respectively. These results indicate that the homosexual men showed a significant increase in penile circumference over time blocks for the male homosexual video. The nonhomosexual men showed a significant increase in penile circumference over time blocks for the lesbian video.
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