



## FlashReport

## Beyond generalized sexual prejudice: Need for closure predicts negative attitudes toward bisexual people relative to gay/lesbian people<sup>☆</sup>



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## HIGHLIGHTS

- We surveyed heterosexual students from a random sample of US medical schools.
- Need for Closure (NFC) predicted negative evaluations of bisexual people.
- NFC contributed unique information even beyond evaluations of gay/lesbian people.
- NFC predicted an evaluative preference for gay/lesbian over bisexual people.

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## ABSTRACT

Increasing evidence suggests that bisexual people are sometimes evaluated more negatively than heterosexual and gay/lesbian people. A common theoretical account for this discrepancy argues that bisexuality is perceived by some as introducing ambiguity into a binary model of sexuality. The present brief report tests a single key prediction of this theory, that evaluations of bisexual people have a unique relationship with Need for Closure (NFC), a dispositional preference for simple ways of structuring information. Participants ( $n = 3406$ ) were heterosexual medical students from a stratified random sample of 49 U.S. medical schools. As in prior research, bisexual targets were evaluated slightly more negatively than gay/lesbian targets overall. More importantly for the present investigation, higher levels of NFC predicted negative evaluations of bisexual people after accounting for negative evaluations of gay/lesbian people, and higher levels of NFC also predicted an explicit evaluative preference for gay/lesbian people over bisexual people. These results suggest that differences in evaluations of sexual minority groups partially reflect different psychological processes, and that NFC may have a special relevance for bisexual targets even beyond its general association with prejudice. The practical value of testing this theory on new physicians is also discussed.

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Increasing evidence suggests that bisexual people are evaluated more negatively, on average, than heterosexual and gay/lesbian people

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(Burke & LaFrance, 2016; Herek, 2002). The present research investigated the hypothesis that a dispositional preference for simple, discrete categories may be one reason why some people evaluate bisexual people more negatively than gay/lesbian people despite both being stigmatized minorities. This prediction abounds in the literature on bisexuality but heretofore lacks clear empirical support (Mohr & Rochlen, 1999; Rust, 2000; Worthen, 2013).

One of the tasks of living in a complex social environment is to make sense of a wealth of information, and people differ in the extent to which they seek quick answers and avoid changing those answers. Specifically, Need for Closure (NFC; Webster & Kruglanski, 1994) reflects a

motivated tendency to structure information simply, avoid ambiguous mental representations, and maintain established patterns of thinking even in the face of new information (Kruglanski et al., 1997; Neuberg, Judice, & West, 1997). NFC helps explain some discomfort with situations and people that seem to deviate from expectations and norms, and as a result, it is associated with negative attitudes toward a wide variety of marginalized groups (Roets & Van Hiel, 2011), including gay/lesbian people (Soenens, Duriez, & Goossens, 2005). In fact, in line with Allport's (1954) assertion that prejudice reflects a basic cognitive tendency to think in simple terms, it has been argued that NFC is a basic motivational feature underlying prejudice generally, regardless of the target group (Hodson & Dhont, 2015; Roets & Van Hiel, 2011). By this line of reasoning, NFC predicts generalized prejudice because it implies a desire for clear distinctions between social categories, a preference for a predictable social order, and a tendency to listen to established authorities when they provide clear rules and expectations (Hodson & Dhont, 2015; Roets & Van Hiel, 2011).

However, beyond its association with generalized prejudice, NFC may predict especially negative reactions to groups that are seen as "complicating" a system of social categorization by adding unwanted categories. We test the hypothesis that, because bisexuality challenges a conventional binary system of sexual orientation (Worthen, 2013), people high in NFC will evaluate bisexual people especially negatively, not only compared to heterosexual people but also compared to gay/lesbian people. Including gay/lesbian people as a point of comparison for negative evaluations helps distinguish responses to bisexual people from responses to other sexual minorities. Prior research showing a link between NFC and evaluations of bisexual targets (Mohr & Rochlen, 1999) did not include gay/lesbian targets, leaving open the possibility that NFC simply predicts generalized sexual orientation bias.

Some studies on attitudes toward sexual orientation groups have employed a between-subjects manipulation, exposing each participant to only one target group in order to avoid asking participants to make overt comparisons between groups (Burke & LaFrance, 2016). The present research question pertains directly to such overt comparisons, though, so we used a within-subjects design instead: participants evaluated several sexual orientation groups at once on the same measure, in order to capture intentionally expressed preferences for some groups over others. We predicted that, among heterosexual participants, NFC would be associated with negative evaluations of both gay/lesbian and bisexual people. However, we anticipated that NFC would also explain unique variance in evaluations of bisexual people even accounting for evaluations of gay/lesbian people, such that higher levels of NFC would be associated with particularly negative evaluations of bisexual people relative to gay/lesbian people.

As a supplementary test of the specificity of our reasoning about bisexuality and NFC, we predicted that NFC would predict negative evaluations of bisexual people even accounting for three other individual differences available in the dataset, political conservatism, Social Dominance Orientation (SDO; Pratto, Sidanius, Stallworth, & Malle, 1994), and dispositional perspective taking (Davis, 1983). All three provide examples of constructs related to generalized prejudice. Political conservatism is a well-established predictor of higher levels of prejudice (Jost, Federico, & Napier, 2009), including sexual prejudice, in part because sexual minorities are sometimes viewed as groups pushing for social change (Herek, 2000, 2002; Stephan, Ybarra, & Morrison, 2009). SDO captures a chronic, ideological preference for inequality among social groups (Pratto et al., 1994). It predicts higher levels of prejudice against low-status social groups because people high in SDO prefer to maintain hierarchies (McFarland, 2010; Pratto et al., 1994). Perspective taking is a cognitive form of empathy marked by efforts to understand the experiences of other people and groups, and it often results in lower levels of prejudice because it provides an avenue for people to appreciate the concerns of low-status groups (McFarland, 2010; Todd, Bodenhausen, Richeson, & Galinsky, 2011). Because conservatism, SDO, and perspective taking are examples of explanatory factors in

generalized prejudice, including them presents a test of the idea that there is a special relationship between NFC and attitudes toward bisexual people. In other words, if NFC relates specifically to a preference for simple sets of social categories with as few groups as possible and clear distinctions between groups, then NFC should predict negative evaluation of bisexual people over and above these three more general predictors of prejudice.

We tested our predictions in a nationally representative sample of heterosexual medical students, shortly before they became physicians. Although it is not essential to our theory, this method has practical value because physician biases contribute to unequal medical care disadvantaging sexual minorities including bisexual people (Institute of Medicine, 2011).

## 1. Method

Participants ( $n = 3406$ ) were medical students from a stratified random sample of 49 U.S. medical schools in the Medical Student Cognitive Habits and Growth Evaluation (CHANGE) Study (van Ryn et al., 2014, 2015). The present report uses data from the students' fourth year of training (Spring 2014), because this is the only timepoint so far that has measured evaluations of bisexual people.

### 1.1. Sample

In the first stage of sampling, we stratified all MD-granting U.S. medical schools into 11 strata defined by their geographic region and public/private status. Schools were randomly sampled from each stratum in roughly the same proportion (43%) using a proportional to (first-year class) size sampling method (Sarndal, Swensson, & Wretman, 1992). In the second stage of sampling, we sent recruitment materials to the 5823 first-year students at these 49 schools whose e-mail or mailing address we were able to obtain. The baseline response rate was 81% ( $N = 4732$ ). In 2014, we invited all baseline participants to complete the followup measures, and 3959 (84%) responded. Details about the sampling procedure can be found in other reports (e.g., Burke et al., 2015; Phelan et al., 2015b; Przedworski et al., 2015; van Ryn et al., 2014, 2015).

In line with our focus on new medical practitioners, and for consistency with other published reports on the CHANGE sample (e.g., van Ryn et al., 2015), we excluded participants who had left medical school or delayed their training by more than one year ( $n = 203$ ). Also, because we were interested in heterosexual people's bias against sexual minorities, we excluded 259 participants who identified themselves as non-heterosexual at either timepoint and 91 participants who declined to specify their sexual orientation. We excluded an additional 42 participants for declining to respond to some of our items of interest, leaving a sample size of 3364. Of these, 1699 were male and 1665 were female. Most ( $n = 2078$ ) were White; 709 were Asian, 144 were Black, 136 were Latino/a, and 297 indicated more than one of the aforementioned identities or indicated another racial or ethnic identity. The approximate mean age was 26.80 ( $SD = 2.49$ ).

### 1.2. Measures

The present report focuses on a subset of items from a longer web-based survey instrument, which has been described in detail elsewhere (e.g., Phelan et al., 2015a; van Ryn et al., 2014, 2015).

#### 1.2.1. Attitudes toward sexual orientation groups

In line with our within-subjects design, each participant evaluated all of the groups of interest. Participants responded to several feeling thermometers measuring self-reported attitudes toward various groups (see Alwin, 1997; Kinder & Drake, 2009). The response scales ranged from 0 ("very cold or unfavorable") to 100 ("very warm or favorable"). The target groups of interest for the present report were "bisexual

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