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Terri D. Fisher, Clive M. Davis, William L. Yarber, Sandra L. Davis

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Internalized Homophobia Scale

GLENN J. WAGNER, New York State Psychiatric Institute

The Internalized Homophobia Scale was developed for use with gay men and is intended to measure the extent to which negative attitudes and beliefs about homosexuality are internalized and integrated into one’s self-image and identity as gay. The significance of measuring internalized homophobia is its negative impact on the mental health of gay and lesbian individuals as it is often associated with guilt, shame, depression, and feelings of worthlessness. Several clinical reports documenting the effects and dynamics of internalized homophobia have been published, but research studies in which internalized homophobia has been systematically measured have been confined (by and large) to studies of gay men with Human Immunodeficiency Virus (HIV). In research conducted by our group, and others, we have found that internalized homophobia is associated with demoralization, depression, and general psychological distress, as well as low self-esteem and avoidant coping.

Description

The Internalized Homophobia Scale consists of 20 items, 9 of which are from the Nungesser Homosexual Attitudes Inventory (Nungesser, 1983), with the other 11 items developed by the HIV Center for Clinical and Behavioral Studies at the New York State Psychiatric Institute. A principal components factor analysis with a varimax rotation was performed on a sample of 142 gay men who completed the IHS and a 22-item scale of demoralization (Dohrenwend, Shrout, Egri, & Mendelsohn, 1987), and the 7-item depression subscale of the Brief Symptom Inventory (Derogatis & Melisaratos, 1983). Using all items a two-factor solution resulted, with all but one (Item 4) of the IHS items loading on Factor 1. All of the items from the depression scale loaded on Factor 2, as did 17 of the items from the demoralization scale. None of the items from the three factors loaded on discrepant factors (Wagner, Brondolo, & Rabkin, 1996).

Response Mode and Timing

Each item is scored on a 5-point Liker-type scale with 1 = strongly disagree and 5 = strongly agree, and each response represents the degree to which the respondent endorses the statement or item. The scale requires approximately 5 minutes to complete.

Scoring

There are 10 items that are positively keyed and 10 that are negatively keyed. The range for the total score is 20 to 100, with higher scores representing greater internalized homophobia.

Reliability

The scale was tested for internal consistency reliability in a sample of 142 gay men, yielding a Cronbach alpha of .92 for the total score (Wagner, Serafini, Rabkin, Remien, & Williams, 1994). Based on this statistic and the previously described factor analysis, it is recommended that the total summed score of the 20 items be regarded as a homogeneous measure of internalized homophobia.

Validity

Research using the Internalized Homophobia Scale has revealed the construct to be positively correlated with mental health measures including demoralization (r = .49), global psychological distress (r = .37), and depression (r = .36; Wagner et al., 1994, 1996). Other correlates include age at which one first accepted being gay (r = .46), and degree of integration into the gay community (r = .54; Wagner et al., 1994). In a study of HIV+ gay men in which the scale was completed twice, with a 2-year interval, results indicated that greater internalized homophobia, specifically among those who had not yet experienced any HIV-related physical symptoms, predicted higher levels of distress over time; within this subgroup, internalized homophobia at the first assessment was correlated .61 with distress 2 years later.

These research findings indicate that internalized homophobia may have a negative impact on mood, self-esteem, and quality of life. Mental health professionals working with gay men, regardless of HIV status, may be more effective in targeting resources and interventions aimed at improving mental health and overall quality of life if they address issues related to internalized homophobia.

References


Address correspondence to Glenn J. Wagner, RAND Corporation, 1776 Main St., Santa Monica, CA 90407; e-mail: gwagner@rand.org
Exhibit

Internalized Homophobia Scale

Instructions: The following are some statements that individuals can make about being gay. Please read each one carefully and decide the extent to which you agree with the statement, then circle the number that best reflects how much you agree or disagree with the statement.

Response format: 1 Strongly Disagree
2 Disagree
3 Neutral
4 Agree
5 Strongly Agree

1. Male homosexuality is a natural expression of sexuality in human males.
2. I wish I were heterosexual.
3. When I am sexually attracted to another gay man, I do not mind if someone else knows how I feel.
4. Most problems that homosexuals have come from their status as an oppressed minority, not from their homosexuality per se.
5. Life as a homosexual is not as fulfilling as life as a heterosexual.
6. I am glad to be gay.
7. Whenever I think a lot about being gay, I feel critical about myself.
8. I am confident that my homosexuality does not make me inferior.
9. Whenever I think a lot about being gay, I feel depressed.
10. If it were possible, I would accept the opportunity to be completely heterosexual.
11. I wish I could become more sexually attracted to women.
12. If there were a pill that could change my sexual orientation, I would take it.
13. I would not give up being gay even if I could.
14. Homosexuality is deviant.
15. It would not bother me if I had children who were gay.
16. Being gay is a satisfactory and acceptable way of life for me.
17. If I were heterosexual, I would probably be happier.
18. Most gay people end up lonely and isolated.
19. For the most part, I do not care who knows I am gay.
20. I have no regrets about being gay.

Self-Identified Lesbian Internalized Homophobia Scale

STACY WEIBLEY1 AND MICHELLE HINDIN, Johns Hopkins University

The Self-Identified Lesbian Internalized Homophobia Scale (SLIHS) was developed to gain a greater understanding of internalized homophobia in the lives of women who identify as lesbian and to address significant gaps in the literature regarding this topic. It has been hypothesized that internalized homophobia is linked to the elevated rates of mental health and substance abuse issues experienced by gay, lesbian, bisexual, and transgender (GLBT) individuals, including the disproportionately high rates of suicide among GLBT youth. However, although previous research suggests internalized homophobia is a statistically significant and distinct factor in the lives of gay men (Meyer, 1995), there is a dearth of research regarding this issue among other GLBT groups, including lesbians.

Of the few existing empirical studies regarding internalized homophobia among lesbians, many rely on

1Address correspondence to Stacy Weibley; e-mail: sweibley@msn.com