



AMERICAN
PSYCHOLOGICAL
ASSOCIATION

STATEMENT OF

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on behalf of

THE AMERICAN PSYCHOLOGICAL ASSOCIATION

before the

JUDICIARY COMMITTEE

HOUSE OF REPRESENTATIVES

COMMONWEALTH OF PENNSYLVANIA

THOMAS R. CALTAGIRONE, CHAIR

on the subject of

AMENDING THE ETHNIC INTIMIDATION ACT TO INCLUDE SEXUAL ORIENTATION

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Mr. Chairman and Members of the Committee:

I am Dr. Anthony R. D'Augelli, Associate Professor of Human Development at the Pennsylvania State University. I have conducted research relevant to sexual orientation and the effects of prejudice, discrimination and violence on lesbians, gay men, and others with homosexual feelings. I have been trained as a clinical psychologist oriented toward community mental health, and I am a licensed psychologist in the Commonwealth of Pennsylvania. I have been a member of the American Psychological Association (APA) since 1974 and a Fellow of the APA since 1983. I was a member of the Association's Committee on Lesbian and Gay Concerns from 1986 to 1989. I am pleased to testify today on behalf of the APA's over 114,000 members on the subject of amending the Commonwealth of Pennsylvania's Ethnic Intimidation Act to include sexual orientation.

The APA, a nonprofit, scientific, and professional organization founded in 1892, is the major association of psychologists in the United States. Its members include the vast majority of psychologists holding doctoral degrees from accredited universities in the United States. APA's major object is to advance psychology as a science and profession and as a means of promoting human welfare. To that end, the Association works to encourage psychological research, improve research methods, and disseminate information regarding human behavior. A substantial number of APA's members are concerned with the collection of data, development of research, and provision of therapy pertaining to interpersonal prejudice and violence. In particular, APA members have contributed much of what is known about sexual

orientation, about prejudice and discrimination, and about the extent and effects of prejudice and hate violence on gay men and lesbians.

APA Policy on Hate Crimes

Because of APA's concern with reports of increased crime and violence motivated by prejudice, the Association adopted a policy statement on "Hate Crimes" in 1988 (Attachment A) that condemns harassment, violence, and crime motivated by prejudice based upon race, ethnicity, religion, sexual orientation, gender, or physical condition and supported government actions to prevent hate violence.

Anti-Gay and Anti-Lesbian Violence

While the topic of homosexuality often generates considerable controversy in our society, we feel that the topic of violence against lesbians and gay men should not be controversial. As citizens of this country and human beings, lesbians and gay men deserve all of the rights and privileges enjoyed by heterosexual Americans. No one in our country has the right to brutalize another human being or group of human beings, to assault them, to cause them injury. When we become aware of such violence, it is our duty as responsible citizens to do what we can to prevent it and to minimize its effects. In my testimony today, I will offer the American Psychological Association's best efforts to provide scientific understanding

of anti-gay violence and our professional recommendations of ways to eliminate or ameliorate its effects.

Empirical Research on Violence Against Lesbians and Gay Men

The available data on violence against lesbians and gay men come primarily from two sources. The first source is surveys conducted by community and state organizations concerned with preventing such violence; the National Gay and Lesbian Task Force has done an admirable job of collecting many of these reports and summarizing their results. The Philadelphia Lesbian and Gay Task Force has also produced excellent surveys of the anti-gay and anti-lesbian violence in Pennsylvania. The second source of data is scholarly investigations by criminologists and other social scientists, which have been published in academic journals. Using data from both sources, we can form a preliminary impression of anti-gay violence (Berrill, 1990).

First, the violence is surprisingly common across the United States. Surveys have been conducted in seven states and seven major cities. Five studies with regional or national samples have been published. All indicate that a significant minority of lesbian and gay respondents have been punched, kicked, or hit because of their sexual orientation; the proportions range from 9% to 24%. The data indicate some differences by gender -- victimization of all types is higher for gay men than for lesbians, except abuse by one's own family for which either no differences or higher rates

for lesbians was reported. However, lesbians report more fear and more modification of behavior to avoid harassment and violence. Thus the differences may be the result of lesbians greater tendency to restrict their movements. In the one study providing comparisons among ethnic groups, higher rates of victimizations for people of color, and particularly higher rates in gay/lesbian-identified areas (Comstock, 1989). Most attacks seem to be perpetrated by young males in groups. The assailants usually do not know their victims personally; they are often armed, very frequently with knives. However, this finding may not hold true for younger people. In a sample of lesbian and gay youth, 18% reported gay-related assaults of which 61% occurred within the family (Hunter, 1990). Attacks against gay people often are characterized by an intense rage on the part of the attackers; thus they tend to be more violent than other physical assaults. Commenting on this phenomenon, sociologists Brian Miller and Laud Humphreys observed, "Seldom is a homosexual [murder] victim simply shot. He is more apt to be stabbed a dozen times, mutilated, and strangled" (Miller & Humphreys, 1980). The frequency of attacks seems to have increased during the last few years, apparently fueled by public reaction to Acquired Immune Deficiency Syndrome (AIDS). Many attacks since the beginning of the AIDS epidemic have included spoken references to AIDS by the attackers, usually accusing the victim of spreading AIDS to others. AIDS may thus be providing a convenient excuse for violent expressions of hostility against gay people. Although organized hate groups are not responsible for much homophobic violence, the number of anti-gay attacks perpetrated by Ku Klux Klan and neo-Nazi groups seems to be growing.

Substantial research has been done in Pennsylvania by the Philadelphia Lesbian and Gay Task Force. I will not summarize that data since Rita Adessa of the Task Force is testifying in this hearing. However, I will comment specifically on my own research which focussed on the Pennsylvania State University campus. Based on surveys done in 1987 (D'Augelli, 1989) and in 1990, I found that over three-quarters of the lesbian, gay, or bisexual undergraduates surveyed had been verbally insulted at Penn State and one-quarter had been threatened with physical violence. As to actual versus threatened attacks, 13% had personal property damaged, 8% had objects thrown at them; almost one-quarter (22%) reported being chased or followed. Probably because they escaped some intended attacks, few experienced personal assault, although some three students said they were physically attacked and one said he was assaulted with a weapon. Most of the harassers were other students. A climate of fear exists on the Penn State campus for lesbian, gay and bisexual young people; nearly all students surveyed expected to be harassed on campus. These results have been replicated on other campuses, suggesting that not even college campuses are safe places for people who are lesbian, gay, or bisexual (Berrill, 1990).

What are the problems faced by lesbian and gay survivors of assaults? Clearly they must cope with medical, legal, and police personnel who often themselves hold many prejudices against gay people. In this sense, survivors of anti-gay violence can find themselves in a situation comparable to that of women who have been raped. They are likely to be blamed by others for their assault, accused of inviting the attack or deserving it.

Because most people are psychologically vulnerable after an assault, such responses from others can significantly lower self-esteem and evoke strong feelings of guilt, shame, or depression in the lesbian or gay survivor. Another frequent consequence of assault is unique to lesbians and gay men: if the attack happens to be reported in the local news media, the survivor's sexual orientation may become public knowledge and she or he may experience subsequent harassment or discrimination from a variety of sources. Lesbians and gay men in most jurisdictions today can legally be fired from their jobs, evicted from their homes, and denied services simply because they are gay. Anticipating all of these negative consequences, many lesbians and gay men probably never report their assaults to law enforcement officials; community violence surveys suggest that as many as 80% of attacks go unreported. (Garnets, Herek, & Levy, 1990; Berrill & Herek, 1990)

Although the empirical data does not allow us to draw very firm conclusions about the exact frequency of anti-gay violence, its forms, or its consequences, one inescapable conclusion, however, is that violence against gay people is a serious national problem, sufficiently widespread to warrant close scrutiny and government intervention.

Social Psychological Bases of Anti-Gay Violence

Why does anti-gay violence occur? To answer this question requires understanding that violence against lesbians and gay men is only one manifestation of a larger problem: that of prejudice, discrimination, and

hostility directed against the estimated 24 million homosexual persons in American society. The term homophobia has come to be used to describe this phenomenon. Scientific research on homophobia suggests numerous social and psychological sources for the prejudice.

Most heterosexuals who are homophobic have not developed their attitudes on the basis of interacting with gay people. National public opinion polls show that only 25–30% of Americans know an openly gay man or lesbian woman, and the majority of them have formed positive feelings as a result of those contacts.

Instead, most Americans' hostility, fear, and ignorance reflect our society's institutional homophobia—the anti-gay ideologies prevalent in our government, our schools, our churches, and our mass media. These societal institutions effectively create a cultural climate in which individual expressions of homophobia are tolerated or even encouraged. Within this cultural climate of prejudice, homophobic violence and even murder are condoned through public indifference, blaming of the victim rather than the perpetrator, lack of serious attention by police and prosecutors, and minimal sentencing if offenders are convicted. Society's message is clear: bias on the basis of sexual orientation has few social or legal penalties.

Homophobia appears to be particularly acute among adolescents and young adults. There are many possible explanations for this pattern, including the need for adolescents to establish a sense of adult identity, which

Includes sexual and gender issues. For some, such an identity is elusive and they try to affirm who they are by physically attacking a symbol of what they are not or don't want to be. Young adults also have particularly strong needs for acceptance by peers; attacking an outsider (such as a gay man or lesbian) can be a way of proving one's loyalty to the in-group. Adolescent perpetrators of homophobic violence are typically tried as juveniles and consequently receive light sentences, if they are sentenced at all.

In order to reduce violence against gay people, we must attack the underlying homophobia expressed through the violence. Thus, any intervention strategies must include public education concerning gay men and lesbians. Stereotypes and misconceptions about homosexual persons must be eliminated from our culture. Such education is particularly important in middle and secondary schools, where information about gay people should be coupled with inculcation of traditional American values concerning respect for individual rights and recognition of the basic humanity and worth of all members of society.

An important strategy for educational programs is to permit heterosexual persons an opportunity to interact freely with their gay and lesbian friends, family members, neighbors, and coworkers. This sort of personal contact appears to be the most effective remedy for homophobia. It requires, however, a social climate in which gay people can comfortably disclose their sexual orientation without fears of reprisal. This cannot

occur while discrimination based on sexual orientation remains legal. Until protective legislation is enacted the majority of lesbians and gay men are likely to hide their orientation, and so the elimination of homophobia and its consequent violence will be delayed.

APA Policy on Discrimination Against Homosexuals

In 1975, the American Psychological Association adopted a policy statement "Discrimination Against Homosexuals" that deplored discrimination and supported the enactment of legislation at all levels of government to provide lesbian and gay citizens the same protections now guaranteed to others on the basis of race, creed, and color (Attachment B).

Homosexuality Is Not a Mental Disorder

Although persons with homosexual feelings have suffered a history of adverse treatment, the major mental health professions have gone on record in opposition to discrimination and have specifically rejected the conception that homosexuality is a mental disorder. In 1973, the American Psychiatric Association declared that "homosexuality per se implies no impairment in judgment, stability, reliability, general social or vocational capabilities." In 1975, the American Psychological Association passed a resolution supporting the Psychiatric Association's declaration and urging all mental health professionals to help dispel the stigma of mental illness

that long had been associated with homosexual orientation. The National Association of Social Workers took a related position in 1977.

The declassification of homosexuality as a mental disorder was the result of a long reevaluation of the "illness model" of homosexuality and was based on extensive scientific findings by a large number of independent researchers. The psychological research, conducted over almost three decades, conclusively established that homosexuality is not related to psychological adjustment or maladjustment. Research has also demonstrated the natural corollary of these findings: gay people have an overall potential to contribute to society similar to that of any other people, and discrimination against them is not justified.

Sexual Orientation Is Highly Resistant To Change

Some opponents to extending legislative protections to gay people have argued that sexual orientation is a choice, that homosexual feelings can be easily eradicated. The evidence indicates, to the contrary, that sexual orientation is highly resistant to change. All available information indicates that sexual orientation emerges at an early age, for some in early childhood and for most by early adolescence. Single causes have not been identified, and simple biological, social, and environmental explanations have remained unproven. Since sexual orientation is a fundamental characteristic acquired at a very early age, it makes little sense to argue that it can be readily changed or is under voluntary control.

Once established, homosexual orientation is highly resistant to change. Although some therapists have reported that their clients have changed their sexual orientation in treatment (from homosexual to heterosexual), closer scrutiny has shown that such changes were more likely to occur among bisexuals who were highly motivated to adopt a heterosexual behavior pattern. Rates of failure for such therapy are high and the duration of the change—even in that small group for which changes have been claimed—is uncertain. Thus, at a minimum, the majority of gay and lesbian people are unable to change their basic orientation, even if they wish to do so.

The Lack of Protection Against Discrimination Is Harmful to Mental Health

The exclusion of gay and lesbian people from laws protecting minorities — such as the Ethnic Intimidation Act — perpetuates prejudice, discrimination, and violence with real social and psychological costs. In order to adjust to prejudice and discrimination, lesbians and gay men develop coping mechanisms, common to most persecuted groups. For the majority of gay people, the coping is positive — they come to terms with their sexual orientation and share it with family and friends. Studies demonstrate that these people are the most psychologically well-adjusted. Those who fail to accept themselves are much more troubled. For them coping may include denial that one is lesbian or gay, self-hatred, hatred of lesbians and gay men, and acting out negative stereotypes about lesbian and gay people. The existence of unjustified discrimination and unprovoked

violence promotes concealment, which worsens self-doubt and interferes with psychological development.

Prejudicial Attitudes that have been Barriers to Ending Discrimination

Some opposing opinion has associated homosexuality with child molestation. However, research on the sexual abuse of children indicates that most perpetrators are male and their victims female. The research clearly shows no association between lesbian and gay status and child molestation. One study of a sample of men convicted of sexual assault against a child (Groth & Birnbaum, 1978) found none who had an exclusively homosexual adult sexual orientation. 22% were classified as bisexuals, but in none of those did the homosexual orientation exceed the heterosexual orientation. This false belief that adult homosexuality is associated with child sexual abuse is perpetuated by several factors. One is that it requires some sophistication to distinguish between adult homosexual orientation and sexual molestation of male children by other males. Sexual molestation of male children is not being perpetrated by gay men. With such an emotional and serious issue as child sexual abuse, it is hard for people to see the difference. They react from stereotypes and ignorance. Further, this belief is frequently engendered deliberately by political groups for their political advantage. This idea about homosexuality and child sexual abuse is not unique. The "blood libel" of Jews in Europe -- that they stole Christian children, sacrificed them, and used the blood in rituals -- was a common aspect of pogroms well into the late 19th Century (Herek, 1990).

Another concern that has been raised is that the presence of openly lesbian and gay people as role models for children might cause homosexuality in children. The evidence on early development of sexual orientation makes it exceedingly unlikely that role models outside the home could so profoundly influence such a deep psychological characteristic. Even within the home, research on children of lesbian mothers has found no impact of mothers' orientations on their children's sexual orientation.

A third concern raised has been that gay people are a risk to the public health from sexually transmitted diseases, such as AIDS. APA's position is that eliminating discrimination promotes the public health by reducing concern about discrimination for those who may be at risk for AIDS and other sexually transmitted diseases. With protections against discrimination in place, persons at risk will be more likely to seek preventive counseling and education, and treatment, if needed. Research has shown that successful participation by gay men in HIV infection prevention is related to their positive self-image. Decreasing discrimination thus has the effect of increasing the well-being of gay and lesbian people and thus reducing the spread of sexually transmitted diseases, at least in those communities where major educational efforts are underway.

Conclusion

Legislation in this area will not in itself eliminate discrimination and violence against lesbians and gay men any more than it has for the other

groups currently included in the Act. But eliminating discrimination in the laws of the Commonwealth of Pennsylvania can ameliorate the devastating effects such discrimination and violence can have on the mental and physical health and well-being of its victims.

Based on psychological research documenting the negative effects of discrimination on lesbians and gay men, the substantial level of hate violence that lesbians and gay men suffer, and the lack of any justification for discrimination on the basis of sexual orientation, the APA strongly supports House Bill 1352 which amends the Ethnic Intimidation Act to include sexual orientation. We commend Chairman Caltagirone and the members of the Committee for their attention and commitment to addressing this very serious problem. The American Psychological Association appreciates this opportunity to express our views.

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Hate Crimes

At its February 1988 meeting, the APA Council of Representatives voted to approve the following resolution on hate crimes: (Fox, R.E. (1988). Proceedings of the American Psychological Association, Incorporated, for the year 1987: Minutes of the annual meeting of the Council of Representatives. American Psychologist, 43, 527-528).

WHEREAS, the experience of criminal and violent victimization has profound psychological consequences; and

WHEREAS, the frequency and severity of crimes and violence manifesting prejudice have been documented; and

WHEREAS, the American Psychological Association opposes prejudice and discrimination based upon race, ethnicity, religion, sexual orientation, gender, or physical condition.

THEREFORE BE IT RESOLVED that the American Psychological Association condemns harassment, violence, and crime motivated by such prejudice.

BE IT FURTHER RESOLVED that the American Psychological Association encourages researchers, clinicians, teachers, and policy-makers to help reduce and eliminate hate crimes and bias-related violence and to alleviate their effects upon the victims, particularly those victims who are children, youth, and elderly,

BE IT FURTHER RESOLVED that the American Psychological Association supports government's collection and publication of statistics on hate crimes and bias-related violence, provision of services for victims and their loved ones, and interventions to reduce and eliminate such crimes and violence, and policies that perpetuate them.



DISCRIMINATION AGAINST HOMOSEXUALS

At its January 1975 meeting, Council [Ed. note: The Council of Representatives, the governing body of the American Psychological Association] adopted a statement of policy regarding homosexuals, recommended by BSERP [Ed. note: The Board of Social and Ethical Responsibility for Psychology, a Standing Board provided by the American Psychological Association's Bylaws] and amended by the Board of Directors and Council, and adapted from a statement adopted by the Association of Gay Psychologists Caucus Meeting in New Orleans in September 1974. Further, Council voted that the Association's Statement of Policy regarding Equal Employment Opportunity be amended to include sexual orientation among the prohibited discriminations listed in the statement. Following is the Policy Statement regarding Discrimination against Homosexuals:

1. The American Psychological Association supports the action taken on December 15, 1973, by the American Psychiatric Association, removing homosexuality from that Association's official list of mental disorders. The American Psychological Association therefore adopts the following resolution:

Homosexuality per se implies no impairment in judgement, stability, reliability, or general social and vocational capabilities: Further, the American Psychological Association urges all mental health professionals to take the lead in removing the stigma of mental illness that has long been associated with homosexual orientations.

2. Regarding discrimination against homosexuals, the American Psychological Association adopts the following resolution concerning their civil and legal rights:

The American Psychological Association deplores all public and private discrimination in such areas as employment, housing, public accommodation, and licensing against those who engage in or have engaged in homosexual activities and declares that no burden of proof of such judgement, capacity, or reliability shall be placed upon these individuals greater than that imposed on any other persons. Further, the American Psychological Association supports and urges the enactment of civil rights legislation at the local, and state and federal level that would offer citizens who engage in acts of homosexuality the same protections now guaranteed to others on the basis of race, creed, color, etc. Further, the American Psychological Association supports and urges the repeal of all discriminatory legislation singling out homosexual acts by consenting adults in private.

Conger, J.J. (1975). Proceedings of the American Psychological Association, Incorporated, for the year 1974: Minutes of the Annual Meeting of the Council of Representatives. American Psychologist, 30,