

Attitudes and Beliefs of Indian doctors training in rural medical tertiary college in Kolar, South India towards the LGBT community

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ABSTRACT

Background and objectives: various studies found medical students and health professionals having negative attitudes towards the LGBT community. Our objective was to find the attitudes and beliefs of interns towards the LGBT community and if there was any difference among interns of different genders towards the LGBT. **Methodology:** It was a cross-sectional of 80 interns between March and May 2019, beginning their internship in RL Jalappa hospital, associated with a tertiary medical college was assessed using Riddle's assessment scale towards LGBT. **Results:** Our study also indicated the majority of interns having homophobic attitudes. Despite, 100% ** reporting supportive attitude, only about 35% had an attitude of nurturance. Similarly, 100% ** interns had beliefs of readiness to be an effective ally with the LGBT community, only 76.3% had reported scores which indicated actual ability to be an ally with them. More female interns (78.4%) had favorable attitude scores compared to males (69.8%), however, there was no statistically significant difference to the gender of interns. **Conclusion:** Considering the legal battles, social stigma and the resulting negative physical and mental health outcomes among the members of the LGBTQIA+ community, it becomes all the more important for health care providers to have adequate knowledge and develop positive attitudes towards these individuals.

Keywords: LGBT community, Interns, Attitudes and Beliefs

The term of LGBTI is an acronym consisting of the first letter of lesbian, gay, bisexual, transsexual, and intersex.

Today, heterosexuality is seen as the norm worldwide. In many cultures, sexual minorities, including lesbians, gays, bisexuals, and Trans-genders (LGBT), are subjected to stereotypic attitudes and stigma. In India, such behaviors are illegal. In 2009, the Delhi High Court

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decriminalized homosexuality. But on 11th December 2013, the honorable Supreme Court of India upheld Section 377 of the IPC (Indian penal code) that criminalizes adult consensual same-sex contact. In April 2014, the honorable Supreme Court of India granted constitutional recognition to all Trans-genders as the third gender, and any discrimination towards them is considered a violation of their constitutional rights (1).

On September 6th 2018, the honorable Supreme Court of India struck down section 377, which ended India's colonial-era of the sodomy law. For LGBT Indians, this was the moment of moving from a colonial regime to the Indian constitution's preamble promises of equality, dignity and fraternity.

In *Navej Singh Johar & Ors. v. Union of India thr. Secretary Ministry of Law and Justice* is a landmark decision of the Supreme Court of India in 2018 that decriminalised all consensual sex among adults in private, including homosexual sex.^[1]

There are different terms to indicate discriminatory behavior towards sexual minorities (3). Doctors have a responsibility of care for stigmatized and discriminated groups. It is important to understand the attitude of medical students towards homosexuality to improve the healthcare system. Such studies remain inadequate, especially in Asian countries (4).

Sexual and gender minority patients have experienced discrimination, stigmatization, and even denial of care in the health system (5). Discrimination in healthcare settings is detrimental to the health of minority individuals as well as to their help-seeking behavior and adherence to treatment.

When physicians encounter LGBT patients, they may lack knowledge about and sensitivity to the needs and challenges of LGBT patients, and such content is underrepresented in medical school curricula (6).

Our medical students may feel comfortable with LGBT issues in theory but the reality may be different. This cognitive dissonance may create problems for clinicians when managing patients with a homosexual orientation. (7)

Homophobia is defined as an irrational fear or dislike of homosexuals. Homonegativity involves negative attitudes, values, and beliefs of the heterosexual majority about same-sex couples, lesbian, and gay men. (8)

The disparity in health care for sexual minorities exists in all societies. For example, transgenders do not have a separate ward in any hospital or any beds reserved for them. Often they are not even allowed inside hospitals and do not have separate ward earmarked for in-patient care. Their access to health care needs to be ensured because they are at a high-risk for various physical and mental illnesses (9)

Recent Supreme Court verdict has decriminalized homosexuality which has brought a big relief to the LGBT population. However, stigma tends to prevail especially in both urban and rural population more so among the rural Indian public.

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LGBT community appears to have been more accepted in the urban metro cities where progressive thinking and liberty to exercise rights have been much possible, added with the advent of social media support as well.

Here in this study, we are looking at the approach of the young doctors who are starting their clinical rotatory internship at R L Jalappa hospital associated with Sri Devaraj University and Medical College (SDUMC), from June 1st 2019 till July 2019 who have been studying here since the last 4 -5 years in rural district of Kolar and students who have their origin from different parts of India.

The lacuna in Knowledge

No studies have been conducted on interns regarding this topic from this part of Karnataka till date and hence we are trying to assess the knowledge, attitude and belief of house surgeons who will likely come across the LGBT community in the future course of practice as clinicians!

Objectives

- A) To study the attitude and belief of students towards LGBT community
- b) Compare and Correlate the attitude and beliefs of interns with respect to social demographic variables.

MATERIALS& METHODS

Design of study – cross-sectional study

- b. Total number of study subjects- 80
- c. Males interns -43, Female interns -37
- d. Mode of selection of subjects-simple random sampling method

Study tools

Riddle assessment scale towards LGBT.

Materials and Methodology

This Cross-Sectional study proposal was approved by the ethics committee of the institute, Sri Devaraj Urs Medical College and Research Institute, and only after obtaining approval, the study was conducted on house surgeons who are posted at RL Jalappa hospital attached to the institute located at, **Tamaka district of Kolar.**

They were orally instructed by the Principal investigator/Co-investigator about the study, its objectives and their written informed consent were taken before the main instrument was given to them.

Only interns who started their internship from June 2019, posted in various clinical departments formed the inclusion criteria group and the study was completed before May 2019 in RL Jalappa hospital. It was made sure, by using the services of the Postgraduate /Senior Resident posted in their respective departments, to identify the **free time** for house surgeons to participate and to make sure that the students did not discuss among each other while filling the questionnaire.

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Data about the social demographic details were collected first and then the standardized scale for measurement was given to them. All the forms were collected on the same day, maximum within 1 hour of giving the scale (**Riddle's scale towards LGBT**) to them.

The house surgeons were made to sit separately, given ample time and any doubts while filling were addressed at the same time either by the Primary author or by the Co-author.

The questionnaire comprised 16 statements with **8** sub statements reflecting their **attitudes** and 4 **subset** statements reflecting about their **current belief systems** towards the LGBT community. There were **five responses** for each statement: **strongly agree, generally agree, unsure, generally disagree, and strongly disagree (11)**.

Level of measurement

The Riddle scale is an eight-term uni-dimensional Likert-type interval scale with nominal labels and no explicit zero points. Each term is associated with a set of attributes and beliefs; individuals are assigned a position on the scale based on the attributes they exhibit and beliefs they hold.

The scale is frequently divided into two parts, the 'homophobic levels of attitude' (first four states of the scale has served the purpose that Riddle originally had in mind and the next 4 states the "positive attitudes" towards the LGBT community: she devised the scale to explicate the continuum of attitudes toward gays and lesbians and to assess the current and desired institutional culture of an organization or a workplace.

The **total sample size** was **80** who matched both the inclusion and the exclusion criteria and the data collected were analyzed using IBM SPSS Version 2.

Inclusion criteria

- 1) Age more than 18 years
- 2) Students are willing to give written informed consent.

Exclusion criteria

- 1) Students with substance dependence other than nicotine
- 2) Students who are taking psychotropic medications before the study.

Tools for Assessment

- 1) Social –demographic details proforma sheet
- 2) Riddle's scale towards LGBT

Statistical Methods

Descriptive and inferential statistical analysis has been carried out in the present study. Results on continuous measurements are presented on Mean \pm SD (Min-Max) and results on categorical measurements are presented in Numbers (%). Significance is assessed at 5 % level of significance.

The following assumptions on data are made. **Assumptions: 1.**Dependent variables should be normally distributed, **2.**Samples drawn from the population should be random, and Cases of the samples should be independent.

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Chi-Square/ Fisher Exact test has been used to find the Significance of study parameters on a categorical scale between two or more groups, and Non-parametric setting for Qualitative data analysis. Fisher exact test used, when cell samples are very small.

Significant figures

+ Suggestive significance (P-value: $0.05 < P < 0.10$)

* Moderately significant (P-value: $0.01 < P \leq 0.05$)

** **Strongly significant (P-value: $P \leq 0.01$)**

Statistical software: The Statistical software namely SPSS 22.0, and R environment ver.3.2.2 were used for the analysis of the data and Microsoft Word and Excel have been used to generate graphs, tables etc. (12, 13, 14, 15)

RESULTS AND FINDINGS OF THE SOCIAL- DEMOGRAPHIC DETAILS:

Gender distribution of Interns or house surgeons studied: table 1

Gender	No. of Interns or house surgeons	%	Total
Male	43	53.8	
Female	37	46.3	
Age in years	Males	Females	
18-30	43(100%)	36(97.3%)	79(98.8%)
31-40	0(0%)	1(2.7%)	1(1.3%)
41-50	0(0%)	0(0%)	0(0%)

P=0.462, Not Significant, Fisher Exact Test

Marital status of interns: table 2

	Males	Females	Total
Single	43(100%)	37(100%)	80(100%)
Married	0(0%)	0(0%)	0(0%)
Separated	0(0%)	0(0%)	0(0%)
Widowed	0(0%)	0(0%)	0(0%)

P=1.000, Not Significant, Fisher Exact Test:

Out of total **80** interns, **43** were **males** and remaining **37 females**. Their mean age of distribution was in **18-30** years age group except for one female aged above between 31-40 years group. None of the house surgeons was married at the time of the study.

Religion status of interns: table 3

	Males	Females	Total
Hindu	43(100%)	33(89.2%)	76(95%)
Muslim	0(0%)	2(5.4%)	2(2.5%)
Christian	0(0%)	2(5.4%)	2(2.5%)
Others	0(0%)	0(0%)	0(0%)

P=0.042*, Significant, Fisher Exact Test

Domicile and Place of origin of interns: table 4

	Males	Females	Total
Urban	29(67.4%)	22(59.5%)	51(63.8%)
Semi urban	11(25.6%)	14(37.8%)	25(31.3%)
Rural	3(7%)	1(2.7%)	4(5%)

P=0.368, Not Significant, Fisher Exact Test

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	Males	Females	
North	1(2.3%)	1(2.7%)	2(2.5%)
EAST	1(2.3%)	0(0%)	1(1.3%)
WEST	0(0%)	0(0%)	0(0%)
SOUTH	41(95.3%)	36(97.3%)	77(96.3%)

P=1.000, Not Significant, Fisher Exact Test.

All males belonged to Hindu religion and almost 90% of females were also Hindus with only 2 females were Muslims. There was statistical significance with 95% to the religions of interns with Hindus, being the predominant community. 63.8% interns came from an urban background, with 25% from semi-urban and the remaining only 5% came from rural areas. The study comprised of almost 97% of interns belonged to South Indian origin and only 1 male house surgeon from North India and only 1 female from Eastern part of India.

	Males	Females	
NIL	21(48.8%)	33(89.2%)	54(67.5%)
Yes	22(51.2%)	4(10.8%)	26(32.5%)
• Smoking	21(48.8%)	2(5.4%)	23(28.8%)
• Alcohol	1(2.3%)	1(2.7%)	2(2.5%)
Cannabis	0(0%)	1(2.7%)	1(1.3%)

*P<0.001**, Significant, Chi-Square Test*

There was a strong statistical significance to gender and substance use with **52%** of Males had a history of substance abuse, of which Nicotine the commonest form of substance was consumed, followed by Alcohol. And nearly **11%** of females had a history of substance, **smoking** was the **commonest** one followed by alcohol and 1 female reported having occasional consumption of cannabis.

Family history of medical disorders

	Males	Females	
Yes	20(46.5%)	12(32.4%)	32(40%)
No	23(53.5%)	25(67.6%)	48(60%)

P=0.200, Not Significant, Chi-Square Test

Family History of Psychiatric disorders

Nil	38(88.4%)	33(89.2%)	71(88.8%)
Psychosis	3(7%)	3(8.1%)	6(7.5%)
Mood or Anxiety disorder	1(2.3%)	1(2.7%)	2(2.5%)
Addictive disorder	1(2.3%)	0(0%)	1(1.3%)

P=1.000, Not Significant, Fisher Exact test.

About 47% of male interns and 33% of females had a history of medical disorders in their family members, mostly non-communicable diseases in their parents, however, there was no statistically significant difference was between genders in their genetic vulnerability for medical disorders.

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And similarly, about 14% of male interns and nearly 11% of female interns had a positive history of psychiatric disorders in their family members.

It was a surprise to find that the main disorder in their relatives was “Psychosis” nearly 7 and 8 per cent respectively, followed by Mood disorder, and Anxiety disorder respectively. There was no statistical difference between both the genders to the family history of psychiatric morbidity.

Table 7: Specialty of Interns posted:

Specialty	Gender		Total
	Males	Females	
Medicine	11(25.6%)	3(8.1%)	14(17.5%)
Dermat	1(2.3%)	5(13.5%)	6(7.5%)
Paeds	6(14%)	2(5.4%)	8(10%)
Surgery	6(14%)	7(18.9%)	13(16.3%)
ENT	1(2.3%)	2(5.4%)	3(3.8%)
Ophthal	3(7%)	0(0%)	3(3.8%)
OBG	4(9.3%)	9(24.3%)	13(16.3%)
Ortho	2(4.7%)	4(10.8%)	6(7.5%)
Casualty	4(9.3%)	2(5.4%)	6(7.5%)
Psy	1(2.3%)	2(5.4%)	3(3.8%)
ICU	4(9.3%)	1(2.7%)	5(6.3%)
Total	43(100%)	37(100%)	80(100%)

Majority of the interns, nearly 18% were posted in the medicine department, with equal numbers about 16.3% each in surgery and OBG. About 10% of the interns were posted in pediatrics and the same number of 7.5% each in Ortho and Casualty services. Nearly 6.3% of interns were posted in ICU department with the remaining 9% with an equally distributed number of 3% each in the departments of ENT, Ophthalmology and Psychiatry at the time of the study.

Findings: Analysis of the Riddle Score- descriptive statistics (n=80)

Your personal feelings may be preventing you from being accepting and supportive of the LGBT community	Min	Max	Mean	SD	No of Interns Scoring “4” and above**
Homosexuality is unnatural and immoral	1.00	5.00	1.86	0.82	5(6.3%)
LGBT people should participate in reparative therapy or any other treatment available to them to fix their sexual orientation or gender identity disorder	1.00	5.00	2.34	0.93	7(8.8%)

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Your personal feelings may be preventing you from being accepting and supportive of the LGBT community	Min	Max	Mean	SD	No of Interns Scoring “4” and above**
We should have compassion for LGBT people. They can't be blamed for how they were born	2.00	5.00	4.15	0.64	73(71.3%)
LGBT people did not choose to be the way they are. If they could somehow, they would certainly choose to be heterosexual or identify as a traditional male or female	2.00	5.00	3.70	1.04	46(57.5%)
You are somewhat accepting and supportive of LGBT people but still, have areas in which to grow to be an effective ally					
Having same-sex attractions and showing non-gender conforming behaviors is a phase that many people go through and most people outgrow	2.00	5.00	3.48	0.95	32(40.0%)
LGBT people need our support and guidance as they wrestle with the many difficult issues associated with being LGBT	2.00	5.00	4.04	0.65	69(86.3%)
I have no problem with LGBT people but see no need for them to flaunt their sexual orientation or transgender identity publicly	1.00	5.00	2.83	0.98	21(26.3%)
What LGBT people do in the privacy of their bedroom is their business	4.00	5.00	4.25	0.44	80(100.0%) **
You are ready to be an effective ally to the LGBT community					
LGBT people deserve the same rights and privileges as everybody else	4.00	5.00	4.20	0.40	80(100.0%) **
Homophobia and heterosexism are wrong. Society needs to take a stand against anti-gay bias	4.00	5.00	4.15	0.36	80(100.0%) **
It takes strength and courage for LGBT people to be themselves in today's world	4.00	5.00	4.18	0.38	80(100.0%) **
I need to examine my attitudes so that I can actively support the struggle for equality that LGBT	2.00	5.00	3.20	0.99	

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Your personal feelings may be preventing you from being accepting and supportive of the LGBT community	Min	Max	Mean	SD	No of Interns Scoring “4” and above**
people have undertaken					44(55.0%)
You can be an effective ally to LGBT people					
There is great value in our human diversity.LGBT people are an important part of that diversity	3.00	5.00	3.96	0.43	71(88.9%)
I need to stand up to those individuals who demonstrate homophobic attitudes	2.00	5.00	3.93	0.55	69(86.3%)
LGBT people are an indispensable part of our society .they have contributed much to our world and there is much to be learned from their experiences	2.00	5.00	3.19	1.09	42(52.5%)
I would be proud to be a part Of LGBT OR LGBT –ALLAY organization and to openly advocate for the full and equal inclusion of LGBT People at all levels of our society	2.00	5.00	3.30	1.05	45(56.3%)

p.s= higher the scores, higher the agreeableness (favorable)

****= scores 4 and above indicates both who have Agreed and strongly agreed as well.**

71.3% of the interns agreed or strongly agreed and above which meant they agreed that LGBT community need compassion and need not be blamed for what they are with a mean score of 4.15 with SD OF 0.64.

86.3% of the interns agreed or strongly agreed LGBT people need our support and guidance as they wrestle with the many difficult issues associated with being LGBT.

26.3% of the interns agreed or strongly agreed that they have no problem with LGBT people, but see no need for them to flaunt their sexual orientation or transgender identity publicly with mean scores of 2.83 with SD of 0.98

100%** interns agreed or strongly agreed and above which meant they agreed what LGBT people do in the privacy of their bedroom is their business with mean scores of 4.25 with SD of 0.44

100% of the interns agreed or strongly agreed and above which meant they agreed LGBT people deserve the same rights and privileges as everybody else with mean scores of 4.20 with SD of 0.4

100% of the interns agreed or strongly agreed homophobia and heterosexism is wrong and that society needs to take a stand against anti-gay activities with mean scores of 4.15 with SD of 0.36

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100% of the interns agreed or strongly agreed that it takes strength and courage for LGBT people to be themselves in today's world with mean scores of 4.18 with SD of 0.38.

88.9% of the interns agreed or strongly agreed that there is great value in human diversity and LGBT people are an important part of that diversity with a mean score of 3.96 with SD of 0.43

86.3% of the interns they agreed or strongly agreed that it is important for them to stand up to those individuals who demonstrate homophobic attitudes with mean scores of 3.93 with SD of 0.55.

Riddle score distribution according to gender

Riddle Score Minimum:15 Maximum:80	Gender		Total
	Male	Female	
<55	12(27.9%)	8(21.6%)	20(25%)
55-65	30(69.8%)	29(78.4%)	59(73.8%)
>65	1(2.3%)	0(0%)	1(1.3%)
Total	43(100%)	37(100%)	80(100%)

P=0.694, Not Significant, Fisher Exact Test

p.s= higher the scores, higher the agreeableness (favorable towards LGBT)

More female interns (78.4%) had favorable attitude scores compared to males (69.8%), However, there was no statistically significant difference between interns.

Riddle Score distribution according to Age in years:

Riddle Score Minimum:15 Maximum:80	Age in years			Total
	18-30	31-40	41-50	
<55	20(25.3%)	0(0%)	0(0%)	20(25%)
55-65	58(73.4%)	1(100%)	0(0%)	59(73.8%)
>65	1(1.3%)	0(0%)	0(0%)	1(1.3%)
Total	79(100%)	1(100%)	0(0%)	80(100%)

P=1.000, Not Significant, Fisher Exact Test

p.s= higher the scores, higher the agreeableness (favorable towards LGBT)

There was no significant difference statistically between scores and the age group of the interns despite 73.4% of the interns scoring more than 55 but less than 65.

Riddle Score distribution according to religion

Riddle Score: Minimum:15 Maximum:80	Religion				Total
	Hindu	Muslim	Christian	Others	
<55	19(25%)	1(50%)	0(0%)	0(0%)	20(25%)
55-65	56(73.7%)	1(50%)	2(100%)	0(0%)	59(73.8%)
>65	1(1.3%)	0(0%)	0(0%)	0(0%)	1(1.3%)
Total	76(100%)	2(100%)	2(100%)	0(0%)	80(100%)

P=0.712, Not Significant, Fisher Exact Test

p.s= higher the scores, higher the agreeableness (FAVORABLE)

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Despite the 95% of interns being Hindus, there were no differences to religion and riddle scores which reflected the attitudes and beliefs of interns towards LGBT

Findings of the attitudes of interns to the LGBT community in the current study

Homophobic attitudes	No of interns(n=80)	%
Repulsion	6	7.5
Pity	71	88.8
Tolerance	71	88.8
acceptance	56	70.0

About 7.5% of the interns had a negative attitude of "repulsion" towards LGBT community stating that Homosexuality is seen as a crime against nature. Gays/lesbians are considered sick, crazy, immoral, sinful, wicked, etc. Anything is justified to change them: [incarceration], [hospitalization], [[Reparative therapy /behavior therapy]], [[electroconvulsive therapy]], etc.

88.8% of interns had a negative attitude of “**pity**” towards LGBT who mainly represent heterosexuality [[chauvinism]]. Heterosexuality is considered more mature and certainly to be preferred. It is believed that any possibility of becoming straight should be reinforced, and those who seem to be born that way should be pitied as less fortunate ("the poor dears").

88.8% of interns had a “**tolerant**” attitude stating Homosexuality is viewed as a phase of adolescent development that many people go through and most people grow out of. Thus, lesbians/gays are **less mature** than straights and **should be treated with the protectiveness and indulgence, one uses with children**, who are still maturing. It is believed that lesbians/gays should **not be given positions of authority** because they are still working through their adolescent behaviors.

70% on interns had an attitude of “**acceptance**” which implies that there is something to accept to the LGBT community; the existing climate of discrimination is ignored. Characterized by such statements as "You're not lesbian to me, you're a person!" or "What you do in bed is your own business." or "That's fine with me as long as you don't flaunt it!"

Positive attitudes towards LGBT	No of interns(N=80)	%
Support	80	100.0**
Admiration	58	72.5
Appreciation	73	91.3
Nurturance	28	35.0

100% of the interns had reported attitudes of “**Support**” which means “People at this level may be uncomfortable themselves, but they are aware of the homophobic climate and the irrational unfairness and work to safeguard the rights of lesbians and gays.

72.5% of interns reported positively that they “**admired**” LGBT community. They acknowledged that being lesbian/gay in our society takes strength. People at this level are willing to truly examine their homophobic attitudes, values, and behaviors.

91.3% of interns “**appreciated**” that LGBT people. Their belief was the diversity of people is considered valuable and lesbians/gays are seen as a valid part of that diversity. People on this level are willing to combat homophobia in themselves and others.

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However, it is unfortunate to note that **only 35%** of interns reported having an attitude of “**nurturance**” which assumes that gay/lesbian people are indispensable in our society. People on this level view lesbians/gays with genuine affection and delight, and are willing to be their allies and advocates.

Study findings of the interns’ current beliefs towards LGBT:

Riddle Score- descriptive statistics

Statements	Min	Max	Mean	SD	No of subjects scoring ‘4’ and above (n=80)
Q1-Q4: Personal feelings may be preventing you from being accepting and supportive of the LGBT community	2.0	5.0	3.09	0.51	10(12.5%)
Q5-Q8: your personal feelings are somewhat accepting and supportive of LGBT people but still have areas which to grow to be an effective ally.	3.0	5.0	3.77	0.46	60(75.0%)
Q9-Q12: Readiness to effective ally with the LGBT community	4.0	5.0	4.08	0.27	80(100.0%)
Q13-Q16: Ability to Ally with the LGBT community	3.0	5.0	3.82	0.52	61(76.3%)

Score ‘4’ indicates Agree and 5 indicates strongly agree in Riddle’s scale

About 12.5% of the interns reported feelings which indicated that they had beliefs which prevented them from been accepted and supportive towards the LGBT community. 75% of interns had feelings which indicated that they have a fleeting belief which was somewhat accepting and supportive of LGBT people but still had areas to grow to be an effective ally.

100%** of interns, however, reported readiness to be an effective ally with LGBT people but only 76.3% only had the beliefs and ability to be an ally with the LGBT community.

Comparison from similar studies from the past

A study was done on 2nd and 3rd Medical students in 2017 who had clinical exposure to various departments done in north India (Kolkata), reported, and despite the overall attitude towards homosexuality was positive, percentage of students with negative attitudes remained high. One in eight students in that’s study reported having a negative attitude towards homosexuality. About 15.9% of respondents believed that homosexuality was an illness; 24.8% considered homosexuals neurotic, 28.1% considered homosexuals promiscuous, and 8.2% thought that they posed a danger to children.

These stereotypical attitudes have also been reported not only in India but also in European countries .the study, done on medical students in Zagreb, Croatia, where 5th and 6th year medical students were assessed for homophobic attitudes and knowledge towards

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homosexuality in 2009-2010, found that male students had more negative attitudes towards homosexuality than female students(16)

Similar study done in the third and fourth-year medical students in New York university school of medicine concluded that the medical students with increased clinical exposure to LGBT patients tended to perform more comprehensive histories, hold more positive attitudes toward LGBT patients, and possess greater knowledge of LGBT health care concerns than students with little or no clinical exposure (17).

Our study also indicated the majority of interns having homophobic attitudes. Despite, 100% reporting supportive attitude, only about 35% had an attitude of nurturance.

Similarly, 100% interns had beliefs of readiness to be an effective ally with the LGBT community, only 76.3% had reported scores which indicated actual ability to be an ally with them.

Highlights and Conclusion of the study

This is the *first study* done in India on interns on LGBT from this rural district of Kolar, which is nearly 80 kilometers from the urban city of Bangalore (less than 2 hours driving distance) where more acceptance and favorable attitude is expressed towards LGBT community.

Homosexuality is not a mental disease. It is as natural as heterosexual. The situation of the LGBT community is the worst in India. They are subjected to harassment, violence, and mockery.

It is very important to make people aware of the presence of the LGBT community. Human rights are natural rights which are indestructible and inalienable that are conferred upon man since birth. Homosexuals are not aliens, they are not sick, their sexual behavior is perfectly in tune with the dictate of nature. (1)

Discrimination on the ground of sex

The fundamental right under the Constitution of India prohibits discrimination on the ground of sex. Therefore it is a violation of the fundamental rights of LGBT Minority people as under (18)

- ❖ Lack of educational facilities.
- ❖ Right to life and personal liberty.
- ❖ Right to live with family and right to livelihood
- ❖ Right to speech and expression.
- ❖ Right to profession and business.
- ❖ Equal pay for equal work.
- ❖ Freedom of Religion
- ❖ Right to live with human dignity
- ❖ Right to equality

Suggestions and recommendations from the study

Considering the legal battles, social stigma and the resulting negative physical and mental health outcomes among the members of the LGBTQIA+ community, it becomes all the more important for health care providers to have adequate knowledge and develop positive attitudes towards these individuals.

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It is warranted that we step-up our efforts in training doctors who can not only save lives but can also be well-rounded and well informed, progressive thinkers (19).

We, as teaching faculty should have more knowledgeable and have a positive attitudes towards the LGBT community so that we teach and train our students without any prejudice who are going to be future health professionals in this ever changing social and psychological changing attitudes of future generations to come.

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Conflict of Interest

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