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ATTITUDES OF HEALTH WORKERS IN TAIWAN AND SINGAPORE TOWARDS SEXUAL MINORITY GROUPS: A SCOPING REVIEW

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ABSTRACT

Background: Health workers are social beings with personal perceptions and opinions about standards of sexual normality. Sexual minorities are vulnerable in accessing health services. Minority groups in Singapore are considered criminals and are not generally accepted by society and health workers such as doctors. Whereas in Taiwan, although the government has legalized same-sex marriage, minority groups still experience rejection by the community and health workers such as nurses. This is due to stigma, homophobia, and heterosexism.

Objectives: Reviewing literature that discusses health workers perceptions of sexual minorities in providing health services.

Methods: This scoping review used the H. Arksey & L. O'Malley framework with a journal article selection process using PRISMA. The search for journal articles used the Proquest, Pubmed, Sage Pub, Wiley, ScienceDirect, and Google Scholar databases, 21.019 articles were obtained from all databases and 3 journals were selected for analysis

Results: Based on 3 selected articles with a cross-sectional study design. The results of the study revealed themes that were grouped based on the factors supporting positive attitudes and causing negative attitudes of health workers in Taiwan and Singapore towards homosexuality.

Conclusion: Health workers have two different attitudes towards sexual minority groups; health workers who have a positive attitude supported by adherence to the code of ethics, level of social tolerance, and religiosity status of health workers. And health workers who have a negative attitude caused by education level and age, religious status, and socio-demographic factors.

Keywords: ASIA, medical personnel, sexual minority group, Singapore, Taiwan

INTRODUCTION

Sexual minority groups are people that have a sexual orientation outside of heterosexual^[2]. In this sexual minority group, two types of sexual orientation attracted individuals of the same sex; lesbian and gay. Lesbians can be defined as a group of individuals who were born biologically as women but are attracted to other women in terms of their feelings and sexual desires. Gays are a group who are born biologically men but are attracted to other men, both in terms of their feelings and sexual desires^[3].

The data indicates that the regions are in Europe and America, sexual minority groups have become a formidable political movement since the US allowed same-sex marriages, and there are around 20 countries that allow same-sex marriages. At this time there are not too many sources to know about the existence of sexual minority groups worldwide, some even say that more than 155 million men and women are involved in the practice of homosexuality in every culture and country globally. Apart from that, some data says that if you add the bisexual and transgender categories, the data could reach 750 million people. Meanwhile, in Asia, Taiwan is one of the countries that has quite high social tolerance towards sexual minority groups. Based on data reported by the Taiwan Youth Project, there are around 15% of sexual minority groups with homosexuals accounting for 5% of the entire population in Taiwan, as much as 23.59 million^[1]. Then, the data comes from Singapore based on research by the Australian Study on Health Relationships, predicting a rising fraction of sexual minorities, 5% and 7%. This shows that there are around 170,000 to 400,000 sexual minority groups in Singapore based on the population as of June 2019^[4].

The large number of sexual minority groups in Taiwan and Singapore

is an important concern because sexual minority groups are very vulnerable to facing various social problems such as crime, violence, bullying, and rejection^[5]. In Singapore, homosexual relationships are not generally accepted in society and relations between sexual men are considered a criminal offense under Penal Code 377A with a penalty of imprisonment of up to two years. Apart from that, negative attitudes towards sexual minority groups in Singapore are also influenced by stigma, local customs, and cultural traditions and this influences the attitudes of society, including health practitioners such as doctors towards these sexual minority groups^[4]. Meanwhile, in Taiwan even though the government has legalized same-sex marriage, society's negative attitude towards sexual minority groups is still very high. One of them is among health workers such as nurses. This is still influenced by societal stigma, homophobic attitudes, and heterosexism.

Sexual minorities are vulnerable, including in accessing health services. Negative treatment by health workers of sexual minority groups has an impact on their psychological conditions, including an increased risk of depression, anxiety, eating disorders, and suicide attempts. Data in Switzerland shows that adolescents who represent themselves as transgender are at 2 to 7 times greater risk of attempting suicide and half of them attempt under the age of $20^{[10]}$. In this era, health services devoted to sexual minority groups are only focused on HIV sufferers and sexually transmitted diseases, while sexual and reproductive health services are only aimed at heterosexual groups, whereas counseling services and attention to psychosexual problems and sexual well-being in sexual minorities are also very much needed. Health workers, as a profession, have a code of ethics to treat all fairly, health workers are also social beings who have personal perceptions and opinions about sexual normality standards that are influenced by their identity and life experiences.

METHODS

A scoping review is a method used to collect, present and evaluate a problem from multiple similar studies^[6]. According to the research framework described by H. Arksey & L. O'Malley, a scoping review has 5 stages throughout the processes. Stage 1: Identify scoping review questions, Stage 2: Identify relevant literature sources, Stage 3: Literature selection, Stage 4: Data Charting, Stage 5: Mapping Data^[7].

Stage 1: Identify Scoping Review Questions

The initial step of a scoping review is to research questions identify being customized to the objectives to be researched. In the initial stage, researchers identified intended questions as references in searching for articles. This research uses a question format population, exposure, and outcome. Based on this format, the research question is "What are the perceptions of health workers towards sexual minority groups in providing health services?"

Table 1. PEO Framewo

PEO Framework

Population	Health workers
Exposure	Sexual Minority Groups
Outcome	Perceptions of health workers in providing services

Stage 2: Identify relevant literature sources

2 criteria inclusion and exclusion are set by researchers to identify related articles.

Table 2. Inclusion and	Exclusion	Criteria
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Inclusion Criteria	Exclusion Criteria
Articles published from 2019 to 2023	Article with systematic review research method
Articles published in English	Articles that do not involve health workers perceptions of sexual minority groups
Articles originating from Asia	
Article open access	

Stage 3: Literature Selection

Literature sources were obtained from several selected databases. Selected databases include Proquest, Pubmed, Sage Pub, Wiley, ScienceDirect, and Google Scholar. Literature is selected based on predetermined criteria and according to guidelines Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA).

Stage 4: Data Charting

The next step is: charting data through 3 selected articles. The charting process is carried out by classifying articles based on: title, research design, research sample, and research result.

Stage 5: Data Mapping

After carrying out the literature selection stage, several themes and subthemes were found that could be explained in answer to the aim of the research.

Table 3. Theme			
Theme	Subtheme		
1. Factors Supporting Positive Attitudes of Health	a. Complian ce with the Code of Ethics		
Workers in Taiwan and Singapore towards Homosexual Groups	 b. Increasing Social Tolerance c. Religious Status of Health Workers 		
2. Factors Causing Negative Attitudes of Health Workers Towards Homosexual Groups	a. Education Level b. Age c. Religious Status		



Figure 1. Prism Diagram

RESULT

Literature that has been selected based on inclusion criteria is presented in the following Prism diagram. The prism diagram is presented in Figure 1.

Selected articles are then subjected to Critical Appraisal to test the article's relevance, and to bring accurate problemsolving conclusions. The critical appraisal used in this scoping review is The Joanna Briggs Institute (JBI) Critical Appraisal Tools. JBI is an international research

An organization that develops software to provide evidence-based educational and training information to improve health practices. Critical appraisal was carried out on three articles that had previously been selected by adjusting the topics and inclusion criteria that had been determined. The critical appraisal checklist type used according to the research design is crosssectional. Through the 8 questions in the cross-sectional critical appraisal checklist, there is one article that has the entire answer "Yes" and only two articles that answer one question with the answer "Unclear" so it can be concluded that the journal article is in a good category (Grade A). The article that has been criticized then continued with charting data that being presented in the following data extraction table.

No	Title / Researcher	Design	Sample	Research result
1.	Attitudes Towards and Knowledge About Sexual Minorities and	surveys in September and November	used is 524 nurses, but	The results showed that Taiwanese nurses had positive attitudes, and demonstrated a high level of awareness and behavior in providing care to sexual minority patients. However, they have limited knowledge about homosexuality. Moreover, older nurses, identified themselves as heterosexual, were married, had more than 10 years of work experience, were Buddhist, and had less knowledge about homosexuality. Nurses reported that to provide culturally competent care, they needed knowledge of sexual minorities' physical and mental health issues, social resources, and community well-being; training in communication skills, privacy, and safe spaces.
2.	Primary care physicians' knowledge, attitude, and perception towards homosexuality in Singapore Researchers: Derek Lim, Seng Bin Ang	Cross-sectional study (using a survey questionnaire in February 2015).	The population is 1,529 CFPS (College of Family Physicians Singapore) members, 451 replies were received and	The research was carried out using several measuring instruments, which are summarized in the questionnaire used by researchers, including the ATLG scale (The Attitudes Towards Lesbian and Gay Men), the AOH scale (The Acceptance of Homosexuals), the KAH

Table 4. Charting Data

441 valid. were scale (Knowledge About Homosexuality), and their questions about coworkers' orientation. The results showed that the ATLG and AOH scores were correlated, and the majority of participants accepted the homosexual group with a percentage of 75.6%. Then the KAH results showed that 40.8% of doctors stated they had sufficient knowledge to treat homosexual patients. There is a fairly positive correlation between knowledge scores and doctors' attitudes and acceptance of homosexual patients. This conceptual acceptance is different from the attitude and degree of outward acceptance towards homosexual groups. However, the results of the showed that study participants among family doctors had quite high acceptance, which reflects professional medical ethics to provide equal treatment to all patients regardless of their sexual orientation.

3.	Attitudes	toward	Cross-sectional			
	Homosexuality	among	study			
	Nurses in Taiwa					
	Effects of Survey Year					
	and Sociodemographic					
	Characteristics					
	Peneliti: Hu	ang-Chi				
	Lin, Yi-Chun I	.in, Yu-				
	Ping Chang, W	/ei-Hsin				
	Lu, and Cher	ng-Fang				

Yen

In 2005, there The results of research conducted in 2017 that used the same processes as 2005 in compared the attitude of Taiwanese nurses towards 1.519 homosexuality in Taiwan who in 2005 and 2017 showed a decrease in the level of filled out the stereotypes and avoidance of contact with lesbian and gay individuals. However, there is an increase in the identification and immoral views of lesbian and gay

1.176

there

were Taiwanese

2017

were nurses

nurses:

questionnaire

individuals.

The decrease in stereotypes and avoidance of contact is more significant in nurses under 30 years old. The increase in the identification and view of immorality is more significant in nurses over 30 years old.

The proportion of 2017 survey participants who were male, had a bachelor's degree or higher, and attended religious activities regularly was higher than in 2005.

Both surveys found that nurses with a bachelor's or master's degree had lower levels of criticism and avoidance of contact than nurses who did not have a bachelor's or master's degree.

It was found in the 2005 survey that female nurses had higher levels of criticism and stereotypes than male nurses, but this was not found in the 2017 survey.

It was also found in the 2017 survey that nurses who regularly participated in religious activities had higher views of immorality, but not in the 2005 survey.

DISCUSSION

Based on the analysis of the three articles, themes were obtained, which were grouped based on factors that influence the positive and negative attitudes of health workers towards homosexual groups as well as barriers to health services towards homosexual groups. 1. Factors Supporting Positive Attitudes of Health Workers in Taiwan and Singapore towards Homosexuality Groups

a. Compliance with the Code of Ethics

b. The attitude of family doctors in Singapore is influenced by the reflection of

their attitude of adherence to professional medical ethics. Medical ethics requires equal treatment for all patients by ignoring the patient's sexuality even if they have beliefs about different sexual orientations^[4]. This attitude of compliance with medical ethics is also supported by the concept that the right to health services is the same as that of non-sexual minority groups because it is part of human rights and the right to health does not recognize discrimination in any form^[8]. Meanwhile, in Taiwan, this positive attitude is also based on the Gender Equality Law 2015 to eliminate gender discrimination, maintain human dignity, and build resources and an environment that symbolizes gender equality. In this law, the rights of sexual minority groups are also taken into account in Taiwan, so health workers must also comply with them^[9].

c. Increasing Social Tolerance

The positive attitudes shown by nurses in Taiwan are influenced by changes in Taiwanese society's attitudes towards sexual minorities, which are shown in increased social tolerance^[11]. World survey results show that the level of social tolerance of Taiwanese society towards sexual minority groups increased by 132% from 1995 to 2012^[9]. The increase in social tolerance in Taiwan is influenced by the policy of legalizing same-sex marriage and increasing the visibility of minority populations in society^[11]. This makes minority groups feel more comfortable expressing their sexual orientation.

Apart from that, nurses' positive attitudes towards sexual minority groups are also influenced by the ease of the internet in accessing all forms of information, one of which is related to the concept of sexual orientation diversity. Nurses aged 30 years or younger had higher open attitudes and

had more opportunities to interact with lesbian and gay individuals. It is shown that nurses in Taiwan in 2017 were lower in avoiding contact and holding stereotypes about lesbian and gay individuals. This non-contact avoidance behavior is supported by the development of the internet in providing access for people including health workers to learn about sexual orientation concepts. In addition, sexual minority groups in 2017 have started to be more open to disclosing their sexual orientation in public compared to sexual minority groups in 2005. This provides a great opportunity for nurses in Taiwan in 2017 to have direct contact with sexual minority groups compared to nurses in 2005^[9].

d. Religious Status of Health Workers

Religious status greatly influences the attitude of health workers towards homosexual groups because this is related to the teachings of the beliefs they adhere to. The group of family doctors who do not identify with any religion have the most positive attitudes towards sexual minority groups compared to other religious groups such as Christianity. This is because adherents of other religions believe that this sexual minority group has deviated from the teachings of their religion^[4].

2. Factors Causing Negative Attitudes of Health Workers Towards Homosexual Groups

a. Education Level

The negative attitudes of nurses in Taiwan towards sexual minorities are higher among nurses who have a higher level of education (postgraduate degree). Postgraduate nurses with more than 10 years of work experience are considered to be in the older age group. They are less tolerant of homosexuals due to a lack of education regarding sexual minorities and social stigma^[11].

The factor of lower education level with incivility and stereotypes and female gender is closely related to higher recognition was only influential in the 2005 nurse survey. The low level of education among nurses and the existence of bad stereotypes in minority groups encourage the existence of rudeness and recognition, which is higher^[11].

b. Age

Avoidant, prejudiced, and condescending attitudes toward lesbian and gay individuals increased from 2005 until 2017 among nurses in Taiwan aged more than 30 years than those aged less than 30 years. This is because younger nurses have a broader view to accept new concepts that are different from traditional values, such as diversity in sexual orientation^[9].

c. Religious Status

Based on research conducted by Wang (2020), negative attitudes towards patients and poor knowledge about sexual minorities are related to the religion adhered to by nurses. Nurses in Taiwan who are Christians, Catholics, Daoists, and Atheists have better knowledge of homosexuality than those who adhere to Buddhism. Buddhism is one of the most religions towards tolerant nonheterosexual sexually inclined people. Because, according to Buddha, it is considered a sexual offense when someone tries to hurt another person. However, the negative attitudes shown by nurses in Taiwan may be influenced by low knowledge of sexual minority groups and following strict Buddhist religious rules, "not namely engaging in sexual misconduct." This rule follows the view of Buddhist monks that the meaning of not engaging in sexual misconduct is not committing sexual violence, sexual harassment, including not having sexual relations, whether heterosexual or homosexual. This also influences the views of Buddhist nurses that minority groups deviate from religious teachings^[11].

Then, there is also a significant relationship between the frequency of regularly attending religious activities and avoiding contact with sexual minority groups, which only had an effect in the 2017 survey. Nurses who regularly attend religious activities assume that minority groups are immoral, giving rise to negative attitudes and avoidance of contact with sexual minority groups^[11].

CONCLUSION

In providing health services to patient groups with sexual minorities, health workers have two different attitudes: health workers who have a positive attitude and health workers who have a negative attitude. The positive attitude held by health workers towards sexual minority groups is influenced by their adherence to professional medical ethics, increasing social tolerance, and not following a particular religion. The negative attitudes held by health workers towards sexual minority groups are influenced by older age, religious affiliation, less frequency of activities, attending spiritual lower education level, and being female. The implication for present day nurses and workers is the health need for professionalism and cultural competence in practice. Health workers must ensure that their care is fair and respectful to all patients, even if they hold different views from them, including patients from sexual minority groups. This requires sustained education and personal reflection on the different patient populations while providing ethical care without letting personal biases interfere with the delivery of care.

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REFERENCES

1.Academia Sinica. TaiwanYouthProject.2019;Availablefrom:http://www.typ.sinica.edu.tw/news

2. Arksey H, O'Malley L. Scoping studies: Towards a methodological framework. Int J Soc Res Methodol Theory Pract. 2005;8(1):19–32.

3. Huda M. Menurut Stigmatisasi Minoritas Seksual di Indonesia. Rumahcemara.orId. 2022;2(2):2.

4. Lim D, Ang S Bin. Primary care physicians' knowledge, attitude and perception towards homosexuality in Singapore. Glob Heal J. 2021;5(4):209-14. Lin HC, Lin YC, Chang YP, Lu 5. WH. Yen CF. Attitudes toward homosexuality among nurses in Taiwan: of survey effects year and sociodemographic characteristics. Int J Res Public Health. Environ 2021;18(7):3465.

6. Mak S, Thomas A. Steps for Conducting a Scoping Review. J Grad Med Educ. 2022;14(5):565–7.

7. Nugraha N, Widianti E, Senjaya S. Gambaran Pengetahuan Remaja Tentang Lesbian, Gay, Biseksual, dan Transgender (Lgbt) Di Sma X Garut. J Keperawatan Komprehensif (Comprehensive Nurs Journal). 2020;6(1):16–26.

8. Pritta Yunitasar. Relasi Sosial dan Sikap Mahasiswa Keperawatan Terhadap LGBT. J Kesehatan Karya Husada. 2019;2(7):160–8.

9. Puspitasari CII. Opresi kelompok minoritas: persekusi dan diskriminasi LGBT di Indonesia. Tak J Stud Gend Dan Islam Serta Perlindungan Anak. 2019;8(1):83-102.

10. Wahlen R, Bize R, Wang J, Merglen A, Ambresin AE. Medical students' knowledge of and attitudes towards LGBT people and their health care needs: Impact of a lecture on LGBT health. PLoS One. 2020;15(7 July):1

11. Wang Y, Chang S, Miao N. Taiwanese nurses' attitudes towards and knowledge about sexual minorities and their behavior of providing care to sexual minority patients: Results of an online survey. J Nurs Scholarsh. 2020;52(6):605–12.