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# EXPLORING THE RELATION OF VALUES, POWER, AND ADVOCACY IN AMERICAN SEXUAL SCIENCE

Ira L. Reiss

Emeritus, Department of Sociology, University of Minnesota, Minnesota, USA

ABSTRACT. There is widespread acceptance by American sexual scientists of the need to be aware of our values and control their potential biasing effect. Despite this belief, there is a lack of consensus among sexual scientists concerning whether we should advocate for or against policy issues that come before Congress and impact our field. Also, even though in the United States we are dealing with a society of 316 million people, sexual scientists have often failed to propose solutions that are pluralistic and that work in groups with unconventional sexual values. In addition, sexual scientists have conflicting views on just how much we should reveal about our personal values concerning a sexual problem area that we are studying. In these and other ways many sexual scientists have not integrated into their research and theory their verbal support for avoiding bias. Above all, the containment of bias requires the exploration of the interface of values, power, and advocacy with the work we do in sexual science. I spell out my value-aware approach as a way to cope with the complexities of our sexual science field. I illustrate the tenets in that approach by discussing the way the current debate on public school sex education has been handled by sexual scientists and also by reference to the 2013 U.S. Supreme Court decision on gay marriage.

**KEYWORDS.** Adolescent sexuality, sexological theory, sexual attitudes and behaviors, sexual politics, sexuality education

### INTRODUCTION

The social science study of human sexuality touches on very deeply rooted emotions embedded in America's basic moral values and has implications for political, religious, and other power centers. Questions arise concerning how we can best research and understand our sexual values and the power centers that relate to them. I write this commentary article to help us formulate a shared conception of ways to deal with the many controversial sexual problem areas that we have in American society. Conflict over competing sexual values is surely also present in other Western democratic societies, and the general approach proposed here should also be relevant for those countries (Kontula, 2010).

# THE ROYALIST COMPROMISE IMPACTS THE BIRTH OF SCIENCE

We can gain insight into the strained relations between scientific researchers and power groups by a brief glance back to the beginning of modern science in 17th-century England. It was a time when scientists were utilizing experiments to discover ways of improving air and steam pumps, pendulum clocks, barometers, and much more. They formed a scientific organization called the Royal Society of London. On occasion, they would make recommendations to King Charles II regarding how to use their findings for the benefit of the people. The king did not take well to such suggestions. He requested that the scientists who belonged to the Royal Society of London come to his palace.

As Stanford University historian Robert Proctor describes it, the king quite directly told the scientists not to "meddle in matters of Moralls, Politics, or Rhetorick" (Proctor, 1991, p. 264). In return for their silence concerning values, the king promised that he would help fund their scientific work and allow them to do their experiments without restraints from either the church or the state. The Royal Society agreed to abide by the king's wishes and both parties signed a document that became known as "The Royalist Compromise."

It was that document that laid the cornerstone for separating science from personal values. Bear in mind that this 17th-century separation of science and value judgments was not aimed at keeping science free from bias-rather, it was aimed at keeping the king free from the annoying suggestions of the scientists regarding how to use their findings in society. Fundamentally, the separation was a question of power. The Royalist Compromise gave the king the unchallenged right to decide what he wanted to do with the inventions that the scientists were creating. This arrangement benefited the king, but it also institutionalized support for the value-restrained approach in science. By doing so, it clouded rather than clarified our understanding of the way cultural values inevitably relate to scientific research and theory. As I will show, this confusion concerning the relation of values and science is especially troublesome in today's social science investigation of human sexuality in America.

One obvious reason that value-restrained science was accepted by scientists was that this arrangement benefited them in terms of government support of their work. Also, when institutions like religion, family, economics, politics, and education were studied by social scientists, they could avoid being criticized by portraying themselves as just describing what they found and not evaluating or critiquing those institutions. This sounds protective of scientists, but by denying thoughtful critiques of a society's sociocultural value traditions, we lose the benefits of self-appraisal of our society, and with that, we abdicate our right to analyze the ways in which our societal problems could be better

handled. The existing culture and behavior in a sexual problem area such as teenage pregnancy is exactly what we must critique for the existing culture may well be a major part of the cause of the problem (Reiss & Reiss, 1997). In sum, the full price tag of the "protection" and "support" of scientific work by those in power was a loss of scientific freedom that diminished the worth of science to the people in that society. The full impact of this can be especially important in scientific fields that study human sexual behavior.

## THE VALUE-AWARE APPROACH: MAKING OUR VALUES KNOWN

In democratic societies today, our scientific approach to values is surely less value-restrictive than it was in earlier times. I believe that the majority of sexual scientists today would assert that we cannot eliminate our personal values from our scientific work. It follows then that to keep our values from distorting our research and theory, we should become more aware of our personal values and the values of other sexual scientists. I fully support that perspective, but we need to go considerably beyond just affirming that we will work to avoid bias in our research and theory. Accordingly, the "value-aware" approach that I will describe offers sexual scientists an understanding of how to manage values in a way that will increase our awareness of the essential role of values in our work. Related to this, I will also discuss how to deal with criticisms of our work that often emanate from political and religious groups.

I believe that to obtain a more objective view of what we are studying, we need to openly acknowledge to ourselves and to others our personal value priorities (Bancroft, 2009; Drescher, 2013; Longino, 1990, 2002; Proctor, 1991; Reiss & Reiss, 1997). So, to be transparent about my own values, I should note that I am in large measure a liberal and a pluralist in regard to sexual values. The importance here, of course, is not my value position but my willingness to state it publicly in a professional publication. There are strong reasons such as

fear of negative reaction that inhibit such value revelations by sexual scientists, and I will soon discuss that. But let me state here that a social science that stresses "playing it safe" is a science that is on the road to nowhere (Brooks, 2012).

By showing other scientists what our values are, we decrease the likelihood of bias. Once we make our values known, we increase the likelihood that other sexual scientists and the press will search for bias in our work. In addition, by stating our values, we increase our own motivation to become more aware of our values and to find ways to keep our values from biasing our research, theory, and therapy (Drescher, 2013). Transparency about values is an important first tenet in what I call the value-aware approach to sexuality in social science. Such a value-aware approach is also appropriate in today's biological study of human sexuality, but I will focus here only on social science research and theory in the area of sexuality (Fausto-Sterling, 1985; Kagan, 2009; Salk & Hyde, 2012).

To further illustrate my conception of the value-aware approach, I will analyze sex education programs in America and compare their strategies for controlling pregnancy, disease, and other unwanted outcomes of teenage premarital sexual relationships. This area highlights the U.S. culture's powerful values concerning teenage use of condoms and birth control pills and the clashes that can occur particularly with religious and political institutions. Western European countries have their own sexual conflicts, but they do not seem as conflicted over sex education. For example, early in 2013, the German press reported conflict over legislation outlawing bestiality (Cottrell, 2013). In April, France had considerable physical and verbal conflict over the passage of a national gay marriage law (Erlanger & Sayare, 2013). In July, England passed legislation supporting same-sex marriage despite strong opposition from many members of the Conservative Party (Spark, 2013). So there is no shortage of sexual problems in Western Europe, but sex education is not one of them.

One reason for the U.S. emotional conflict regarding teenage sexuality and sex educa-

tion is that religion in America, in terms of attendance, prayers, and beliefs, seems more ingrained than in most Western European countries. The more conservative religious organizations in the United States still actively promote the restriction of premarital sexual behavior, and that sharply conflicts with teenage sexual behavior and attitudes (E. F. Jones, et al., 1986; Laumann & Michael, 2001; Reiss, 2006; Reiss & Reiss, 1997).

In addition to the powerful influence of organized religion in the United States, many Americans are aware of the much lower rates of teenage pregnancy and disease in most Western European countries. The gap has been narrowed in recent decades; nevertheless, the U.S. rates are still higher than those in most Western European countries. Battles between abstinence views and more liberal sexual standards are easy to encounter in the United States, but as noted, they are rather rare in Western European nations. The centrality of teenage sexuality in U.S. value conflicts makes sex education a strategic example of how sexuality enters into the religious and political power struggles. This example will highlight several of the key issues concerning values, power, and advocacy that I feel American sexual science has not adequately confronted (Bourdieu & Wacquant, 1992; Gouldner, 1962; Harding, 1991; Longino, 1990; Proctor, 1991).

## **EVALUATING SEX EDUCATION PROGRAMS**

There are basically two types of sex education that are used in American schools. Sex education can take an "abstinence-only-until-marriage" approach or it can take a "comprehensive approach." Most of the abstinence-only programs stress the advantages of avoiding intercourse and the risks if you do move in that direction. The comprehensive format includes abstinence as one legitimate choice, but for those who may have intercourse in their teens, there is discussion of contraception and disease prevention and other aspects of sexual relationships. A new comprehensive

sex education program for the public schools was developed by a number of health organizations in 2012 (Future of Sex Education Initiative, 2012). There is also a highly praised older comprehensive sex education program that the Sex Information and Education Council of the United States put forth that one can examine (National Guidelines Task Force, 1991). Sex education in the schools is quite relevant in the United States because by the time they are 15, 22% of teenagers will have had vaginal intercourse; by age 17, that rate is 44%; by ages 18 to 19, the rate is 64%; and by the early 20s, the rate is about 83% (Chandra, Mosher, Copen, & Sionean, 2011, Table 7: Daniels, Mosher, & Jones, 2013, Table A).

During the past 20 years, a good deal of research has been done on these two basic sex education approaches comparing their effectiveness in controlling pregnancy and disease rates. Findings have rather consistently supported the effectiveness of the comprehensive approach. One of the key researchers in the scientific comparison of these sex education programs has been sociologist Douglas Kirby. In his major analysis, he examined the best research evidence available and checked the effectiveness of a large number of sex education programs. He concluded that comprehensive programs were clearly the most effective programs for containing pregnancy and disease (Kirby, 2007, 2008). He found that abstinenceonly sex education programs were generally not effective in lowering pregnancy or disease rates. A task force of 13 experts reviewed and supported Kirby's findings. Part of his 2007 research was funded by the Centers for Disease Control and Prevention and was supported by the National Campaign to Prevent Teen and Unplanned Pregnancy.

Despite the increasing evidence that showed the greater effectiveness of comprehensive sex education programs, the federal government has during the past 30 years spent many millions of dollars each year to pay for the abstinence-only approach to sex education. It was not until the fiscal year 2010 that a significant sum of federal money began to also be assigned to comprehensive sex education. Finally,

in November of 2011, national legislation was written by Senator Frank Lautenberg and Representative Barbara Lee promoting a comprehensive sex education program. That legislation was introduced in Congress in February 2013. Nevertheless, despite this initial legislative effort and the strong empirical findings consistently supporting the comprehensive approach, we still have today many lobbyists and legislators who try to discredit the Kirby research and encourage legislators to increase the funding for abstinence-only sex education.

We know that teenage pregnancy and disease rates can be contained by accepting condom use more widely as exemplified in many Western European countries that have lower teen pregnancy and disease rates than those in the United States (Francoeur & Noonan, 2004; E. F. Jones et al., 1986; Hayes, 1987; Mosher et al., 2004; Reece et al., 2010; Singh & Darroch, 2000). In fact, from 1991 to 2010, the U.S. teenage birth rates reduced by 44%, but these rates are still higher than in Western Europe (Daniels et al., 2013; Hamilton, 2012). Most of the reduction in U.S. teen birth rates was due to greater use of contraception (J. Jones, Mosher, & Daniels, 2012; Santelli et al., 2007). Nevertheless, in U.S. culture today, religiously and politically based conflict exists over many contraceptive solutions. This is so despite the fact that the trend is toward more acceptance of comprehensive sex education and a greater awareness of the risks involved in focusing only on abstinence as a solution.

Research does support the fact that the great majority of those teens who profess a belief in abstinence will end up having premarital sex (Bearman & Bruckner, 2001; Bruckner & Bearman, 2005). These "abstinence-only" believers often hold a high-risk view of condoms, and when they start to have intercourse, they may not use condoms or not use them in the safest manner. The risks for disease and pregnancy are thereby increased. The education in a comprehensive approach provides a backup safety plan if sexual intercourse does begin. Overall, the evidence is quite clear that vows of abstinence break far more easily than do condoms.

We know that there are many people who may share some of the same religious values against teen condom/pill use but who decide nevertheless to use condoms because they assign higher value to avoiding pregnancy and disease than to abiding by the religious norm against contraception. Studies by the Guttmacher Institute indicate that Catholic contraception use is very similar to that of Protestants (R. K. Jones & Dreweke, 2011). In our work as sexual scientists, we are surely not presenting our solutions to sexual problems as the "ultimate moral truth." Rather, we are presenting explanations of a sexual problem that highlights the pathways that are likely to lessen the risk for an unwanted outcome. The values people hold and the weight they assign to these values will be a key factor in determining how they respond to our findings and our solutions (Bourdieu & Wacquant, 1992; Longino, 1990; Proctor, 1991; Reiss, 2006).

Former Surgeon General C. Everett Koop's response to condom usage further illustrates the range of responses that people can select. Before he became Surgeon General in the 1980s, he was an outspoken conservative and lectured on many occasions against nonmarital intercourse, condom use, and abortion rights. He did not change these values after becoming Surgeon General. However, while in office, he concluded that to contain HIV infections in the United States, he would have to support condom use for those unmarried people who chose to have sexual intercourse. So, in 1986, he wrote a brochure in which condom use for those young people engaging in sexual intercourse was presented as the best preventive measure against HIV/AIDS (Koop, 1986). Amazingly, in 1988, he was able to get the U.S. Congress to mail a brochure to every American household with his proposals regarding condom use! In addition, he also pressured the television networks to accept condom advertisements. Dr. Koop's actions show that someone with a strong conservative value position in favor of abstinence could, because of other values, still favor condoms being made available.

Politicians are aware that anyone who speaks out against abstinence-only sex educa-

tion assumes the risk of being criticized by other politicians and religious leaders and labeled as biased, immoral, or un-American. Clearly, there are powerful political and religious conservative values that oppose any program that portrays premarital sex as a legitimate choice for teenagers. But let me also note that there are a number of religious groups and politicians who today will support comprehensive sex education. Also, polls of the general public have for many years indicated majority support for comprehensive sex education (Planned Parenthood, 2012). However, as we all know, the standards of politics are not the standards of science. Politicians are often playing by other rules, and we as sexologists need to keep this in mind whenever our work enters the political arena.

# PLURALIZING THE VALUES IN OUR PROBLEM SOLUTIONS

The attempted separation of values from science that began with the Royalist Compromise in the 17th century is to be expected when new sciences are formed in autocratic societies. In contrast, a democratic society, with its greater sharing of power, allows science to be freer from such constraints. The need to be free to deal openly with complex value choices as they relate to our social problems is particularly required in sexual science research, theory, and practice because we deal with problems that embody deeply rooted and conflicting ethical beliefs (Drescher, 2013). We also see evidence of conflicting beliefs outside of the study of sexuality in the debates that still go on in some of the U.S. public schools concerning creationism versus evolutionary views and in the one-sided television reports from Fox News and also at times from MSNBC News.

A recent illustration of the different values that liberals and conservatives hold in the U.S. society comes from psychologist Jonathan Haidt (2012). In a research study of some 1,600 individuals, he found that liberals, more than conservatives, stress social values such as caring and

liberty, whereas conservatives, more than liberals, stress social values like loyalty, authority, and sanctity (Haidt, 2012, p. 158, Figure 8.1). Sexual scientists would benefit by examining their own values to see where they stand on these general values. Doing so will make us more aware of how our personal preferences can enter into our scientific research and theory efforts. Obviously, "solutions" to a sexual problem that incorporate liberal values, such as condom education, will win more approval from liberals, and those solutions incorporating conservative values such as abstinence will win more approval from conservatives. This can occur even if the proposed solution, such as abstinence-only sex education, is clearly not the most effective way to contain pregnancy and disease.

Awareness of other people's values is needed in our proposed solutions if they are to be adopted by both liberals and conservatives, and that is a basic part of the value-aware approach. For example, in sex education, we can offer different types of comprehensive sex education. We can vary the time spent on contraceptive choices and abstinence choices to fit the liberal/conservative makeup of a particular school district. Pluralistic policies such as this are likely to be more effective in the polarizedvalue world in which we live today. In time, one hopes that the solution that is most effective will gain adherents, but that can be a long wait if it requires changes in values or hinders one from being reelected. But the value aware approach makes us more conscious that there are no "obvious to all" solutions in emotionally charged areas. The most effective solutions are those that endorse at least some of the values of the people involved in the problem. So, often, we need to propose more than one solution, but even then, we must also make people aware of the risks embedded in each choice.

# ADVOCACY BY SCIENCE ORGANIZATIONS AND THE SUPREME COURT

There are advocacy organizations that have for a number of years publicly supported com-

prehensive sex education and other programs. Some of the key advocacy groups on sexuality and other issues are the Sexual Information and Education Council of the U.S., Advocates for Youth, the National Coalition to Prevent Teen and Unplanned Pregnancy, the Center for Family Life Education and the Consortium of Social Science Associations (COSSA).

What reactions do we hear about sex education from sexual scientists and their organizations? Do they publicize the findings that comprehensive sex education programs achieve much greater control of pregnancy and disease? What we hear comes predominantly from a few individual members of scientific organizations such as the Society for the Scientific Study of Sexuality, the International Academy of Sex Research, the American Association of Sexuality Educators, Counselors, and Therapists, and the Society for Sex Therapy and Research. During the last decade or two, I am not aware of any public statements from any of these four sexuality groups affirming organizational support for the effectiveness of comprehensive sex education. In general, when sexual science research and theory are challenged by religious or political groups, these sexual science organizations seem to hesitate to publicly defend them. The old 17th-century wall between science and values has not yet fallen down. I would say that in the interest of supporting our scientific research, it certainly is time to "tear down that wall."

Clearly, one reason for the lack of stronger collective organizational action to support comprehensive sex education is that some sex researchers believe that if they publicly support discussing condoms as an effective part of public school sex education they will be criticized and seen as "radicals" rather than as scientific researchers and practitioners. Despite this fear, I believe that our research and theory builders should be encouraged to respond to any misuse or undeserved criticism of our important professional work (Bancroft, 2009, 2004; Reiss, 2006; Reiss & Reiss, 1997). To back away for fear of criticism is to weaken the contributions that scientists can make in their scientific work and the benefits that accrue to the public welfare.

Let me illustrate how our sexual science organizations could have responded to a recently published study that entered into a major Supreme Court case. In 2012, an article published by Mark Regnerus, a sociology professor at the University of Texas at Austin, set off a firestorm of protest (Regnerus, 2012). The article compared the adult children of two types of families. One type was a family in which the child reported that their mother, usually after the breakup of an opposite-sex union, had a romantic relationship with a woman. This romantic relationship, which may have only lasted several months, was the basis for calling this mother and her child a lesbian family. Regnerus's use of this broken family as representative of lesbian families was one source of strong criticism.

The comparison family type that Regnerus (2012) used was composed of children living for their first 18 years in a stable, biological, married, heterosexual family. All the divorced, single-parent, or stepparent heterosexual families had been eliminated from the heterosexual comparison. Taking this stable family segment as the typical heterosexual family also aroused strong criticism of how representative this was of heterosexual families.

Using these two family types, Regnerus (2012) reported on the superior outcome for children of heterosexual families compared with children of lesbian families. Clearly, the comparison of the impact on children of the narrowly defined lesbian families and the narrowly defined heterosexual families was stacked to favor heterosexual families. For years, we have known that stability of a family relationship is a very powerful predictor of child outcomes (American Sociological Association [ASA], 2013). In this comparison, the heterosexual family is by design composed only of stable families and the "lesbian family" is by design mostly of a woman and her offspring from a failed opposite-sex union or a single-parent woman who later had a lesbian relationship. Can anyone see Regnerus's two types of families as a fair comparison of the consequences for children growing up in heterosexual families versus children growing up in lesbian families? The results he found were inevitable given

the way he designed the study. In my opinion, his study does not present any useful data comparing the impact on children of same-sex and opposite-sex families. The Regnerus study is basically advocacy for heterosexual unions disguised as research.

Who reacted to this study and critiqued the research design? The ASA filed an amicus brief in February of 2013 to the U.S. Supreme Court, which was at that time dealing with a case that involved the national Defense of Marriage Act and also a case involving a ban on gay marriage in California (ASA, 2013). The Regnerus (2012) study was being used by conservative groups to argue that children suffer in same-sex unions. The ASA argued for the irrelevance of the Regnerus study for any of the cases before the court. The response of the ASA to poorly done research by Regnerus is precisely what the value-aware approach asserts should be done when anyone challenges our collective scientific knowledge.

But in the Regnerus (2012) incident, where were our major sexual science organizations? What response had they made to the Regnerus research and its possible impact on very important Supreme Court cases and on the public's belief about homosexuality? This inaction needs to change if sexual science is to be regarded as a trustworthy source of knowledge and a benefit to the people of the United States. Organizational support from social science and sexual science is needed to inform the public and also to encourage individual researchers to feel comfortable with speaking out more fully about a sexual issue.

Despite our past history, there are signs of increased movement toward scientific involvement in policy issues (Brooks, 2012). A new Ph.D. program in human sexuality at the California Institute of Integral Studies in San Francisco will be activated in 2014. One of the two specialization areas in that program is called Sexuality Policy and promotes developing skills for being active in policy issues regarding sexuality. The first Ph.D. program in human sexuality at a fully accredited university is at Widener University in Chester, PA, near Philadelphia. That Ph.D. program stresses "civic

engagement," which would also move our field closer to advocacy issues. In addition, the ASA has initiated a human rights section that deals with sexual as well as other policy-related issues. The American Association for the Advancement of Science also has a human rights coalition that analyzes equality and fairness in different social systems with the aim to improve social life and make policy recommendations. Scientists have long affirmed that one major purpose of science is to improve our lives at the same time that we are seeking to increase our knowledge. Science depends upon public support, and that support depends on people believing that science is helping to improve the quality of their lives.

So there is evidence that the field of sexual science is gradually moving more into endorsing advocacy issues involving policies that not only impact society, but in addition, impact our scientific work on sexuality. These developments testify to the reality that there is an applied social dimension to science as well as a research and theory dimension. This more applied dimension does not lessen our level of scientific objectivity. Our objectivity depends not on our avoidance of values, but on our management of values to avoid bias. We need to discard the tissue paper shield of neutrality and learn to cope with the reality of being evaluative human beings—in science and nearly all other aspects of our lives.

### PUBLIC RESPONSE AS PART OF SCIENCE

As I have noted, the value-aware approach can present challenges to sexual scientists with liberal views as well as to those who are conservatives. For example, you may well see liberal objections from social scientists when research is presented that shows biologically based gender inequality or when research supports the power of biology versus sociology. Recall the ouster of the president of Harvard University, Lawrence Summers, in 2006 when he raised the possibility of a biological difference in science skills between men and women. The critiquing by others of our basic values can produce emotional reactions from people of any

persuasion (Haidt, 2012). So, as all sexologists know, when our solutions and our analyses clash with people's values, we must expect criticism of our findings. It is our responsibility when that happens to stand up and respond to the criticisms that are made. That responsibility is another basic tenet of the value-aware approach, and of course, it applies even to published sexual science research. As I have noted, my disappointment is that when the Regnerus (2012) article challenged basic research and theory standards that were relevant to a Supreme Court case, our sexual science organizations were silent.

When we do not defend our work, the public will likely perceive us as irrelevant to their problems and incapable of helping them manage these problems. In addition, politicians who may have little regard for social science research will feel that it is cost-free to cherry pick our research results and use them in any distorted fashion that they find helpful to their political goals. We saw strong antiscience attitudes during the Bush administrations (2000-2008) when government Web sites were pressured to downplay statements about the safety of condoms and to insert in the government Web sites support for abstinence-only sex education (Kaplan, 2004; Reiss, 2006; Waxman, 2003, 2004). Does anyone think that we can maintain public support for our work if the only voices heard are those of our critics?

But let me be clear here, the defense of our research, theory, and practice and our suggestions for problem solutions will not convince those with firmly rooted values who feel threatened by our work. However, this does not mean that there is no point in advocating for the validity of our work. We can gain support from those who are less polarized and those whose values are not threatened. This is, in part, what has happened in the last few decades regarding increased public support for comprehensive sex education in the public schools. And finally, even in some segments of the U.S. Congress and also in some religious groups, we see increasing support for comprehensive sex education. Now, if only we can get the sexual science organizations to join with the social science

organizations and speak out collectively when sexuality research and theory are unfairly treated! To a politician, the number of voters involved means a great deal, and so the larger the organizational protest, the more influential it can be.

Surely, our role is not that of a full-time advocacy organization. Accordingly, I think we need to be tactful and thoughtful of our public image in our responses to misuse of our work. The advocacy organizations that I have mentioned use our research in their efforts. It would be worthwhile to increase the contact between members of sexual science organizations and members of sexual advocacy organizations so as to help them to be accurate in the evidence they rely upon. Also, our scientific organizations should respond to the public and point out the quality of nearly all of our peer-reviewed major research studies. We can make our critical responses selectively—predominantly for our most important research, theory, and practice projects. Of course, we also need to nurture the support of those in Congress and elsewhere who value our research and theory efforts. However, as noted, even well-meaning politicians have a real conflict of interest-they may want to promote resolution of our sexual problems, but even more so, they want to be reelected to office.

We do need to make it clear that our objections are focused on the abuse and misrepresentation of our professional work and on legislation that would be harmful to our professional efforts. Seen in this way, our responses are a legitimate part of our scientific role. Sexual scientists can respond, just as doctors would defend their important medical research and object to legislation that would harm their field, and as physical scientists defend their work on global warming, and as therapists defend their opposition to homosexual "cure" therapies. Our primary goals in sexual science are to increase our understanding of sexuality and to find ways of containing our society's many unwanted sexual problems. That is what we are defending. The value-aware approach will help afford us a guideline for showing others that we strive

to be aware of our values and to avoid being partisan in the value choices embedded in our research and theory projects (Drescher, 2013; Fausto-Sterling, 1985; Reiss, 2006).

We can see some joint effort by social science and advocacy groups in the COSSA, which was established in 1981 to fight budget cuts in the social and behavioral sciences at the National Science Foundation (ASA, 2011). This type of organizational work unites science and advocacy, and surely, we should encourage it. This organization does not focus on sexuality issues, but rather, it strives to improve the situation for all social science research and theory. Certainly, we will not win all the budget and legislative battles, but we will be building our influence by working together with established advocacy organizations such as COSSA and also with other advocacy groups that I have mentioned that specialize more in sexuality issues.

In recent decades, we have seen many instances of government criticism and withdrawal of funding for sexual research (Bancroft, 2004; Laumann, Michael, & Gagnon, 1994; Lilienfeld, 2002; Rind, Tromovitch, & Bauserman, 1998; Udry, 1993). Sociologist Richard Udry's (1993) paper shows that even governmentapproved and funded research that is under way can be cancelled. The then Secretary of Health and Human Services Louis Sullivan encouraged the U.S. Congress to cancel Udry's already government-approved research project because he felt that the study of teen sexuality might itself provoke increases in teen sexual behavior! That reasoning does seem pretty farfetched-of all the sexual stimuli that one can think of, a questionnaire surely ranks close to the bottom of the list.

I would also note that in February 2013, Representative Eric Cantor, the majority leader in the House of Representatives, in a major policy speech, called for a complete end to federal funding of social science research (Krugman, 2013). It seems that the findings of our social science research have displeased Mr. Cantor. Fortunately, he does not have the power that Charles II had when he was not pleased with what scientists in London were saying.

### CONCLUSIONS

As I have tried to show, there is an inevitable clash in modern-day societies between sexual science and our major institutions. The political, economic, educational, religious, and family institutions of modern-day societies all have to deal with sexual behaviors and attitudes in some respect. The values and the priorities of each institution are different, and so, the natural state of affairs in a Western democratic society involves competition for influence. To adapt and prosper in such a setting, those of us in sexual science require an overall strategy.

The value-aware approach endorses several tenets that spell out an overall strategy for the advancement of our discipline in the United States and, I believe, also in other Western democracies. For clarity's sake, allow me to briefly list the tenets here that I have discussed in this article.

- Be willing to state your general value position in your sexual science work (e.g., liberal or conservative, pluralist or monist, as well as more specific values) to reveal to yourself and others where bias may occur in your sexual science work.
- 2. Stay aware that all solutions to a sexual problem involve diverse basic value choices as well as the balancing of risks and benefits. Accordingly, after making clear the risks sexual scientists, whenever possible, should put forth alternate solutions so that people whose values block the most effective proposal will still be able to achieve some reduction in the sexual problem being studied.
- 3. When there is misuse of our *major work* in the area of research, theory, and practice, we should promote a sexual science organizational response and not just individual responses. This can at times be done in cooperation with major social science organizations in sociology, psychology, and anthropology and will help us to reach the public and build an understanding and support of our field.
- Help the top advocacy organizations in the area of sexuality to be well informed and work with them on any joint legislative con-

- cerns. But make it clear that the primary emphasis of sexual science is on scientific projects and not on advocacy.
- Affirm that sexual science, like all science, is a field that seeks knowledge, but our science also involves utilizing our knowledge for the public good by designing ways to contain our many sexual problems.

Science requires autonomy to operate. It needs the freedom to research even the darkest corners of our society. That autonomy and freedom to study and to critique our world is something we must defend or we will slowly but surely lose it. I believe each one of us in the social science study of sexuality needs to take some time and think carefully about what is the best path to follow. I have tried in this article to lay out my thoughts concerning a value-aware approach for sexual science that will afford us insight into the relation of values, power, and advocacy in the field of sexual science. I believe that this approach will help our discipline grow and prosper.

### REFERENCES

- American Sociological Association. (2011). The changing political landscape: COSSA 1981–2011. *Footnotes*, 39, 1–6.
- American Sociological Association. (2013, February 28). ASA brief of amicus curiae: ASA in support of respondent Kristin M. Perry and respondent Edith Schlain Windsor. Retrieved from http://www.asanet.org/documents/ASA/pdfs/12-144\_307\_Amicus\_%20%28C\_%20Gottlieb%29\_ASA\_Same-Sex\_Marriage.pdf
- Bancroft, J. (2009). *Human sexuality and its* problems (3rd Ed.). Edinburgh, Scotland: Elsevier.
- Bancroft, J. (2004). Alfred C. Kinsey and the politics of sex research. *Annual Review of Sex Research*, 15, 1–39.
- Bearman, P. S., & Bruckner, H. (2001). Promising the future: Virginity pledges and first intercourse. *American Journal of Sociology*, 106, 859–912.
- Bourdieu, P., & Wacquant, L. J. D. (1992). *An invitation to reflective sociology*. Chicago, IL: University of Chicago Press.

- Brooks, M. (2012). Free radicals: The secret anarchy of science. New York, NY: Overlook.
- Bruckner, H., & Bearman, P. (2005). After the promise: The STD consequences of adolescent virginity pledges. *Journal of Adolescent Health*, 36, 271–278.
- Chandra, A., Mosher, W. D., Copen, C., & Sionean, C. (2011). Sexual behavior, sexual attraction, and sexual identity in the United States: Data from the 2006–2008 National Survey of Family Growth (National Health Statistics Report No. 36). Hyattsville, MD, National Center for Health Statistics.
- Cottrell, C. (2013, February 1). German legislators vote to outlaw bestiality. *The New York Times*, International, pp. A9.
- Daniels, K., Mosher, W. D., & Jones, J. (2013). Contraceptive methods women have ever used: United States, 1982–2010 (National Health Statistics Report No. 62). Hyattsville, MD: National Center for Health Statistics.
- Drescher, J. (2013). Ghosts in the consulting room: A discussion of Anson's "Ghosts in the Dressing Room." *Journal of Gay and Lesbian Mental Health*, 17, 112–120.
- Erlanger, S., & Sayare, S. (2013, April 23). Protests against same-sex marriage bill intensify in France. *The New York Times*, International, pp. A8.
- Fausto-Sterling, A. (1985). Myths of gender: Biological theories about women and men. New York, NY: Basic Books.
- Francoeur, R. T., & Noonan, R. J. (Eds.). (2004). *The international encyclopedia of sexuality*. New York, NY: Continuum.
- Future of Sex Education Initiative. (2012). National sexuality education standards: Core content and skills, K–12 [a special publication of the Journal of School Health]. Retrieved from http://ww.futureofsexeducation.org/documents/josh-fose-standards-web.pdf
- Gouldner, A. W. (1962). Anti-Minotaur: The myth of a value-free sociology. *Social Problems*, 9, 199–213.
- Haidt, J. (2012). The righteous mind: Why good people are divided by politics and religion. New York, NY: Random House.
- Hamilton, B. E. (2012). Birth rates for U.S. teenagers reach historic lows for all age and ethnic groups (National Center for Health

- Statistics Data Brief No. 89). Hyattsville, MD: National Center for Health Statistics.
- Harding, S. (1991). Whose science? Whose knowledge?: Thinking from women's lives. Ithaca, NY: Cornell University Press.
- Hayes, C. D. (1987). Risking the future: Adolescent sexuality, pregnancy, and childbearing. Washington, DC: National Academy.
- Jones, E. F., Forrest, J. D., Goldman, N., Henshaw, S., Lincoln, R., Rosoff, J. I., ... & Wulf, D. (1986). Teenage pregnancy in industrialized countries. New Haven, CT: Yale University Press.
- Jones, J., Mosher, W., & Daniels, K. (2012). Current contraceptive use in the United States, 2006–2010, and changes in patterns of use since 1995. National Health Statistics Reports, 60, 1–27.
- Jones, R. K., & Dreweke, J. (2011). Countering conventional wisdom: New evidence on religion and contraceptive use. New York, NY: Guttmacher Institute. Retrieved from http://www.guttmacher.org
- Kagan, J. (2009). The three cultures: Natural sciences, social sciences, and the humanities in the 21st century: Revisiting C. P. Snow. New York, NY: Cambridge University Press.
- Kaplan, E. (2004). With God on their side: How Christian fundamentalists trampled science, policy and democracy in George W. Bush's White House. New York, NY: New Press.
- Kirby, D. (2007). Emerging answers 2007: Research findings on programs to reduce teen pregnancy and sexually transmitted diseases. Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy. Retrieved from www.thenationalcampaign. org/EA2007/EA2007\_full.pdf
- Kirby, D. (2008). The impact of abstinence and comprehensive sex and STD/HIV education programs on adolescent sexual behavior. Sexuality Research and Social Policy, 5, 6–17.
- Kontula, O. (2010). The evolution of sex education and students' sexual knowledge in Finland in the 2000s. Sex Education, 10, 373–386.
- Koop, C. E. (1986). Surgeon General's report on acquired immune deficiency syndrome. Washington, DC: U.S. Department of Health and Human Services.

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- Krugman, P. (2013, February 11). The ignorance caucus. *The New York Times*, p. A17.
- Laumann, E. O., & Michael, R. T. (Eds.). (2001). Sex, love, and health in America: Private choices and public policies. Chicago, IL: The University of Chicago Press.
- Laumann, E. O., Michael, R., & Gagnon, J. H. (1994). A political history of the national sex survey of adults. Family Planning Perspectives, 26, 34–38.
- Lilienfeld, S. O. (2002). When worlds collide: Social science, politics, and the Rind et al. child sexual abuse meta-analysis. *American Psychologist*, *57*, 176–188.
- Longino, H. (1990). Science as social knowledge: Values and objectivity in scientific inquiry. Princeton, NJ: Princeton University Press.
- Longino, H. (2002). *The fate of knowledge*. Princeton, NJ: Princeton University Press.
- Mosher, C. A., Martinez, G. M., Chandra, A., Abman, J. C., & Wilson, S. J. (2004). Use of contraception and use of family planning services in the U.S.: 1982–2002. Vital and Health Statistics, No. 350.
- National Guidelines Task Force. (1991). Guidelines for comprehensive sexuality education: Kindergarten–12th grade. New York, NY: Sexuality Information and Education Council of the U.S.
- Planned Parenthood. (2012). Sex education in the United States (Issue brief). Retrieved from www.plannedparenthood.org/files/PPFA/sex \_ed\_in\_the\_US.pdf
- Proctor, R. N. (1991). Value-free science? Purity and power in modern knowledge. Cambridge, MA: Harvard University Press.
- Reece, M., Herbenick, D., Schick, V., Sanders, S. A., Dodge, B., & Fortenberry, J. D. (2010). Condom use rates in a national probability sample of males and females ages 14 to 94 in the U.S. *Journal of Sexual Medicine*, 7(Suppl. 5), 266–276.
- Regnerus, M. (2012). How different are the adult children of parents who have same-sex

- relationships? Findings from the New Family Structures Survey. *Social Science Research*, 41, 752–770.
- Reiss, I. L. (2006). An insider's view of sexual science since Kinsey. Lanham, MD: Rowman and Littlefield.
- Reiss, I. L., & Reiss, H. M. (1997). Solving America's sexual crises. Amherst, NY: Prometheus.
- Rind, B., Tromovitch, P., & Bauserman, R. (1998). A meta-analytic examination of assumed properties of child sexual abuse using college samples. *Psychological Bulletin*, 124, 22–53.
- Salk, R. H., & Hyde, J. S. (2012). Contemporary genetics for gender researcher: Not your grandma's genetics anymore. *Psychology of Women Quarterly*, 36, pp. 395–410.
- Santelli, J. S., Lindberg, L. D., Finer, L. B., & Singh, S. (2007). Explaining recent declines in adolescent pregnancy in the United States: The contribution of abstinence and improved contraceptive use. *American Jour*nal of Public Health, 97, 150–156.
- Singh, S., & Darroch, J. E. (2000). Adolescent pregnancy and childbearing: Levels and trends in developed countries. *Family Planning Perspectives*, *32*, 14–23.
- Spark, L. S. (2013, July 17). England, Wales set for gay marriage in 2014. *Cable News Network*. Retrieved from http://cpf.cleanprint.net/cpf/cpf?action=print&type=filePrint&key=cnn&url
- Udry, J. R. (1993). The politics of sex research. *Journal of Sex Research*, *30*, 103–110.
- Waxman, H. (2003, August). Politics and science in the Bush Administration. Committee on Government Reform, Minority Office. Retrieved from http://oversight-archive.waxman.house.gov/documents/2008 0130103545.pdf
- Waxman, H. (2004). April 13, 2004 letter to Honorable John H. Marburger, director of the Office of Science and Technology Policy. Retrieved from http://www.house.gov/reform