SAMPLE CHAPTER 1
How Sociologists View Social Problems: The Abortion Dilemma

The pages of this Sample Chapter may have slight variations in final published form.
CHAPTER 1
How Sociologists View Social Problems: The Abortion Dilemma
“But you don’t understand! It’s not a baby!” Lisa shouted once again. She felt desperate, at her wit’s end. The argument with her grandmother seemed to have gone on forever.

With tears in her eyes, her grandmother said, “You don’t know what you’re doing, Lisa. You’re taking the life of an innocent baby!”

“You’re wrong! There’s only one life involved here—mine!” replied Lisa. “It’s my body and my life. I’ve worked too hard for that manager’s job to let this pregnancy ruin everything.”

“But Lisa, you have a new responsibility—to the baby.”

“Don’t judge my life by your standards. You never wanted a career. All you ever wanted was to raise a family.”

“That’s not the point,” her grandmother pressed. “You’re carrying a baby, and now you want to kill it.”

“How can you talk like that? This is just a medical procedure—like when you had your gallstones taken out.”

“I can’t believe my own granddaughter is saying that butchering a baby is like taking out gallstones!” Lisa and her grandmother looked at each other, knowing they were worlds apart. They both began to cry inside.

The Sociological Imagination

Like Lisa and her grandmother, when we have problems, we usually see them in highly personal—and often emotional—terms. Our perspective is limited primarily to our immediate situation, and without a sociological imagination we fail to see the broader context in which our problems arise. Because we seldom connect our personal lives with the larger social context, like Lisa and her grandmother, we tend to blame ourselves and one another for our troubles.

What Is the Sociological Imagination?

The term sociological imagination refers to looking at people’s behavior and attitudes in the context of the social forces that shape them. C. Wright Mills, the sociologist who developed this concept, emphasized that changes in society influence our lives profoundly. As with Lisa and her grandmother, we get caught on various sides of social issues. Until 1973, legal abortions were not available in the United States. At that time, too, almost everyone thought of abortion as a despicable act. When the law changed, however, and doctors were allowed to perform abortions, many people’s attitudes changed. The sociological imagination, then, is an emphasis on how the larger events swirling around us influence how we think, feel, and act.

Applying the Sociological Imagination to Personal Troubles. The historical forces that are changing our society also have an impact on our own lives. As you know, a major trend in global capitalism is to export jobs to countries where workers earn just a dollar or two a day. This global force is not something abstract, but, instead, something that changes
our lives. Some of the impact is positive; the reduced labor costs, for example, lower what we pay for our clothing and cars. Some of it is negative, however, especially for the workers who lose their jobs and, after months of looking for work, end up with jobs that pay half of what they were earning. Mills used the term personal troubles to refer to things like this, to how the large-scale events of history bring trouble to people's lives. With all the publicity given to moving jobs overseas, "everyone" knows that this particular large-scale event causes a loss of jobs here. In most cases of personal troubles, however, we get so caught up in what is bothering us that we are unaware of how they are related to larger social forces.

To better understand this connection between personal troubles and larger social forces, let's apply the sociological imagination to Lisa and her grandmother. Lisa's values reflect developments in our society that were not part of her grandmother's consciousness when she grew up. Lisa's views have been shaped by the women's movement, which stresses that each woman has the right to make choices and to exercise judgment about her own body. From this perspective, which has become part of Lisa's outlook on the world, a woman has the right to terminate her pregnancy. Abortion is simply one way that she controls her body. In the extreme, proponents of this view state that a woman's right in this area is absolute. For example, she can choose to have an abortion at any point in her pregnancy, even if she is nine months along—without informing her husband if she is married or her parents if she is a minor.

The sociological imagination also sensitizes us to the social forces that shaped Lisa's grandmother's point of view. When she was growing up, abortion was not only illegal but also considered so shameful that people did not even talk openly about it. Every woman was expected to become a mother, and almost all girls grew up with marriage and motherhood as their foremost goal in life. Careers and advanced education were secondary to a woman becoming a wife and mother. Marriage and motherhood were a woman's destiny, her fulfillment in life. Without this, she was incomplete, not a full woman. Like Lisa's grandmother, almost everyone also agreed that abortion was murder. Within this context, any woman who had an abortion had to keep her crime a secret. Some women who had abortions, frightened out of their wits, were taken to their destination blindfolded in a taxi. They endured kitchen-table surgery that carried a high risk of postoperative infection and death.

Yet neither Lisa nor her grandmother sees this finely woven net that has been cast over them, turning their lives upside down. Instead, the impact of social change hits them on a personal level: This is where they feel it, in their intimate and everyday lives. It affects what they think and feel and what they do—and, as in the opening vignette, how they relate to one another.

In contrast, the sociological imagination (also called the sociological perspective) invites us to look at our lives afresh. The sociological imagination asks us to understand how the social context shapes or influences our ideas, attitudes, behaviors, and even our emotions. The social context encompasses historical periods and very broad events, such as the era in which we grow up, war, terrorism, and other historical turmoil. It also includes our social locations—the broad but narrower factors that also influence our lives profoundly, such as our gender, race-ethnicity, religion, and social class. Then there are the smaller social locations in which we find ourselves, such as our age and health, our jobs and associates. Finally, there is the intimate level, our relationships with people who are close to us: our parents and siblings, our friends and children, our wife, husband, or lover. Together, these many levels combine to make up the social context that shapes the way we look at life.

THE SIGNIFICANCE OF SOCIAL LOCATION. Table 1-1 illustrates how significant social location is in influencing whether a woman has an abortion. From this table, you can see the difference that age, race-ethnicity, marital status, and length of pregnancy make. Look at age: This table shows that half (519 of 1,000) of girls under the age of 15 who get pregnant have an abortion. Those who are the next most likely to have abortions are other teenagers and women in their early 20s. The rate of abortion keeps dropping with age until women reach their 40s, when it increases sharply. Now look at the influence of race-ethnicity. As you can see from this table, African American women are twice as likely to have abortions than are white women. The most striking difference, however—which cuts across age and race-ethnicity—is marital status: Unmarried women are six times more likely than married women to obtain an abortion.
TABLE 1-1 Who Has Abortions?

<table>
<thead>
<tr>
<th></th>
<th>NUMBER OF ABORTIONS</th>
<th>PERCENT OF ABORTIONS</th>
<th>ABORTIONS PER 1,000 BIRTHS</th>
<th>PERCENTAGE OF PREGNANCIES THAT END IN ABORTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 15</td>
<td>8,000</td>
<td>1%</td>
<td>519</td>
<td>52%</td>
</tr>
<tr>
<td>15–19</td>
<td>225,000</td>
<td>17%</td>
<td>341</td>
<td>34%</td>
</tr>
<tr>
<td>20–24</td>
<td>434,000</td>
<td>33%</td>
<td>298</td>
<td>30%</td>
</tr>
<tr>
<td>25–29</td>
<td>295,000</td>
<td>23%</td>
<td>219</td>
<td>22%</td>
</tr>
<tr>
<td>30–34</td>
<td>194,000</td>
<td>15%</td>
<td>171</td>
<td>17%</td>
</tr>
<tr>
<td>35–39</td>
<td>109,000</td>
<td>8%</td>
<td>195</td>
<td>20%</td>
</tr>
<tr>
<td>40 and over</td>
<td>38,000</td>
<td>3%</td>
<td>276</td>
<td>28%</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>723,000</td>
<td>56%</td>
<td>186</td>
<td>19%</td>
</tr>
<tr>
<td>Black and other^2</td>
<td>579,000</td>
<td>44%</td>
<td>407</td>
<td>41%</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>238,000</td>
<td>18%</td>
<td>80</td>
<td>8%</td>
</tr>
<tr>
<td>Unmarried</td>
<td>1,065,000</td>
<td>82%</td>
<td>456</td>
<td>46%</td>
</tr>
<tr>
<td><strong>Weeks of Gestation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 9</td>
<td>772,000</td>
<td>59%</td>
<td>NA^3</td>
<td>NA</td>
</tr>
<tr>
<td>9–10</td>
<td>251,000</td>
<td>19%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>11–12</td>
<td>132,000</td>
<td>10%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>13 or more</td>
<td>147,000</td>
<td>11%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Number of Prior Abortions</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>700,000</td>
<td>54%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>1</td>
<td>349,000</td>
<td>27%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>2 or more</td>
<td>254,000</td>
<td>19%</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

^1 The source calls this the abortion ratio, formulating it from the “number of abortions per 1,000 abortions and live births.”
^2 This is the rather strange classification used in the source.
^3 Not Available or Not Applicable

Source: By the author. Based on Statistical Abstract 2006:Table 94.

Suppose, then, that you are a woman in her late 20s. Can you see how much more likely you would be to have an abortion if you were single than if you were married? Similarly, suppose that you are an unmarried white teenager, and you get pregnant. Can you see how much less likely you would be to have an abortion than if you were an African American teenager who got pregnant?

I don’t want you to think that using the sociological imagination makes people seem like little robots. If you are of a certain race-ethnicity and age, for example, it does not mean that you will do a certain thing, such as have or not have an abortion. The sociological imagination or perspective does not mean this at all. Rather, it means that people who experience certain locations in society are exposed to influences that are different from the influences on people who occupy other corners of life. These influences make a difference in people’s attitudes and behaviors, but in any individual case, you never know in advance the consequences of those influences. Within this context, then, you cannot tell for certain whether some particular individual will have an abortion. But—and this is important—as Table 1-1 makes apparent, we tend to make up our minds along predictable, well-traveled social avenues.

**IN SUM** Sociologists stress the need to use the sociological imagination to understand social problems and personal troubles. The sociological perspective helps make us aware of how the social context—from our historical era to our smaller social locations— influences
our ideas, behaviors, and personal troubles. Just as with Lisa and her grandmother, this context also shapes our views of what is or is not a social problem and of what should be done about it. Let’s look more closely at how this shaping occurs.

What Is a Social Problem?

Because the focus of this text is on social problems, it is important to understand clearly what social problems are. As you will see, social problems have two essential elements.

The Characteristics of Social Problems

TWO ESSENTIAL ELEMENTS. A social problem is some aspect of society that people are concerned about and would like changed. Social problems have two key components. The first is an objective condition, some aspect of society that can be measured or experienced. With abortion, this objective condition includes whether abortions are legal, who obtains them, and under what circumstances. The second key component of a social problem is subjective concern, the concern that a significant number of people (or a number of significant people) have about the objective condition. Subjective concern about abortion includes some people’s distress that any woman must give birth to an unwanted child. It also includes other people’s distress that any woman would terminate the life of her unborn child. To see how subjective concerns about abortion differ in another part of the world, see the Global Glimpse box on the next page.

SOCIAL PROBLEMS ARE DYNAMIC. As society changes, so do these two essential elements: objective conditions and subjective concerns. In other words, social problems are dynamic. As I mentioned, abortion was illegal in the United States until 1973. In that year, the U.S. Supreme Court made a landmark decision known as Roe v. Wade, by which the Court legalized abortion. Before this decision, the social problem of abortion was quite unlike what it is today. The primary objective condition was the illegality of abortion. The subjective concerns centered on women who wanted abortions but could not get them, as well as on the conditions under which illegal abortions took place: With most abortions performed by untrained people, many women died from botched, underground surgeries. As growing numbers of people became concerned, they worked to change the law. Their success transformed the problem: Large numbers of people became upset that abortion had become legal. Convinced that abortion is murder, these people began their own campaigns to make their subjective concerns known and to change the law. Those who favor legal abortion oppose each step these people take. We’ll look more closely at this process in a moment, but at this point I simply want you to see how social problem are dynamic, how they take shape as groups react to one another.

SOCIAL PROBLEMS ARE RELATIVE. As you can see from the example of abortion, what people consider to be a social problem depends on their values. A social problem for some is often a solution for others. While some were pleased with the Roe v. Wade decision of 1973, others found it a disaster. Obviously, mugging is not a social problem for muggers. Nor do Boeing and other corporations that profit from arming the world consider the billions of dollars spent on weapons to be a social problem. In the same way, nuclear power is not a social problem for the corporations that use it to generate electricity. From the Issues in Social Problems box on page 8 and from Table 1-2, you can see that how people define abortion leads to contrasting views of this social problem.

COMPETING VIEWS. Since we live in a pluralistic world of competing, contrasting, and conflictive groups, our society is filled with competing, contrasting, and conflictive views of life. This certainly makes life interesting, but in such a dynamic world, whose definition of a social problem wins? The answer centers on power, the ability to get your way despite obstacles. After abortion became legal in 1973, most observers assumed that the social problem was over—the opponents of abortion had lost, and they would quietly fade.
May you be the mother of a hundred sons” is the toast made to brides in India, where the birth of a son brings shouts of rejoicing, but the birth of a daughter brings tears of sadness. Why? A son continues the family name, preserves wealth and property within the family, takes care of aged parents (the elderly have no Social Security), and performs the parents’ funeral rites. Hinduism even teaches that a sonless man cannot achieve salvation.

A daughter, in contrast, is a liability. Men want to marry only virgins, and the parents of a daughter bear the burden of having to be constantly on guard to protect her virginity. For their daughter to marry, the parents must also pay a dowry to her husband. A common saying in India reflects the female’s low status: “To bring up a daughter is like watering a neighbor’s plant.”

This cultural context sets the stage for female infanticide, killing newborn girl babies, a practice that has been common in India for thousands of years. Using diagnostic techniques (amniocentesis and ultrasound) to reveal the sex of the fetus, many Indians have replaced female infanticide with gender-selective abortion. If prenatal tests reveal that the fetus is female, they abort it. Some clinics even put up billboards that proclaim, “Invest Rs.500 now, save Rs.50,000 later.” This means that by paying Rs.500 (500 Indian rupees) to abort a female, a family can save a future dowry of 50,000 rupees.

Even though their husbands and other relatives urge them to have an abortion, some women who are pregnant with a female fetus resist. Since these abortions are profitable, medical personnel try to sell reluctant women on the idea. To overcome their resistance, one clinic has hit on an ingenious technique: Nurses reach under the counter where they keep the preserved fetuses of twin girls. When a woman sees these bottled fetuses, the horror of double vigilance and two dowries is often sufficient to convince her to have an abortion.

National newspapers headlined the events in one clinic: A male fetus had been unintentionally aborted. This sparked protests, and the Indian legislature passed a law forbidding doctors to tell would-be parents the sex of their fetuses. Physicians who violate the law can be sent to prison and banned from their profession.

Going unenforced, however, this law has had little or no effect. An eminent physician has even stated publicly: “The need for a male child is an economic need in our society, and our feminists who are raising such hue and cry about female feticide should realize that it is better to get rid of an unwanted child than to make it suffer all its life.”

**Issues in Social Problems**

A PROBLEM FOR SOME IS A SOLUTION FOR OTHERS: THE RELATIVITY OF SOCIAL PROBLEMS

To be socialized means to learn ways of looking at the world. As we participate in groups—from our family and friends to groups at school and work—their perspectives tend to become part of how we view life. Among the other perspectives that we learn is a way of viewing the objective conditions of social problems.

The meanings that objective conditions have for us are not written in stone. The views that we currently have arose from our experiences with particular groups and our exposure to certain ideas. Experiences with different groups, or encounters with different ideas and information, can similarly change our position on a social problem. We might think that the subjective concerns we have now are the only right and reasonable way of viewing some objective condition. But just as we arrived at our subjective concerns through our social locations, so our views can change if our journey takes us in a different direction. In short, our views, or subjective concerns, are relative to our experiences.

This relativity is illustrated in the social problem of abortion. The central issue is how people define the status of the unborn. Is the fetus a human being, as the antiabortionists believe, or only a potential human, as the proabortionists believe?

Let’s look at the two main opposing views.

---

**THE FETUS IS NOT A HUMAN BEING**

This is the position of most people who believe that abortion is a woman’s right. "The fetus is a potential person that looks increasingly human as it develops" (NARAL Pro-Choice America). It follows, then, that abortion is not killing but merely a medical procedure. It is the woman’s right to have an abortion for whatever reason she expresses—from financial pressures to health problems—and for the purpose of attaining her goals, whether those be to limit family size, to finish school, to win a promotion at work, or to fulfill any other plans that she might have. The state, therefore, should permit abortion on demand.

**WHAT DO YOU THINK?**

---

**THE FETUS IS A HUMAN BEING**

This is the position of most people who oppose abortion. It follows, then, that abortion is murder, the killing of unborn babies. To simply want an abortion cannot justify murdering a baby. We need to protect and nourish these babies, not kill them. Women have no right to abortion, for it is not just their bodies that are involved but also the lives of other humans—their children. The exception is when another human life, the mother’s, lies in the balance. The state has no business legalizing murder, and abortion should be illegal.

**WHAT DO YOU THINK?**
The Natural History of Social Problems: Four Stages

Sociologists have found that social problems go through four stages, which they call the natural history of a social problem. Let’s continue with the example of abortion to see how this process occurs. To do this, it is important to set the background for understanding abortion in the United States. Before 1970, abortion was illegal in all 50 U.S. states. Although several states had liberalized their abortion laws, they still kept abortion illegal except for special circumstances, such as when pregnancy endangered the mother’s life. Then in 1970, in an unprecedented move, Hawaii legalized abortion. Hawaii’s law defined abortion as a private, noncriminal act.

What made Hawaii receptive to such radical change? Three background factors are significant (Steinhoff and Diamond 1977). First, more than three-quarters of the population lived on the island of Oahu. Here, they had a tradition of personally knowing their politicians and participating in public hearings. Second, two-income families had become common, and half of the women over age 16 worked. Finally, an epidemic of German measles hit Hawaii in 1964 and 1965. During this time, many obstetricians aborted fetuses to prevent them from being born with deformities. This was a turning point for Hawaiian physicians, and the rate of abortion never fell back to its pre-1964 level.

Now that we’ve set this brief background, we can trace the natural history of abortion. Let’s look at how it developed in Hawaii, as well as in the United States as a whole. As we do so, you will see that social problems go through four stages.

The First Stage: Defining the Problem, the Emergence of Leaders, and Beginning to Organize

**DEFINING THE PROBLEM.** As you have just seen, for a social problem to come into being, people have to become upset about some objective condition. This involves a shift in outlook, a questioning of something that had been taken for granted. This change in perspective can come about in several ways. For example, if values change, an old, established pattern will no longer look the same. This is what happened with abortion. The 1960s brought extensive, wrenching social change to the United States. Young people—primarily teenagers and those in their 20s—challenged long-established values. Amidst political uproar, accompanied by widespread demonstrations, many new values were adopted. The women’s

---

**TABLE 1-2 How Definitions of Abortion Affect People’s Views**

<table>
<thead>
<tr>
<th>WHO DOES THE DEFINING?</th>
<th>WHAT ABORTION IS</th>
<th>WHAT IS ABORTED</th>
<th>THE WOMAN</th>
<th>THE RESULTING VIEWS</th>
</tr>
</thead>
<tbody>
<tr>
<td>People Who Favor Abortion</td>
<td>A woman’s right</td>
<td>Fetus</td>
<td>Independent individual</td>
<td>A service to women</td>
</tr>
<tr>
<td>People Who Oppose Abortion</td>
<td>Murder</td>
<td>Baby</td>
<td>Mother</td>
<td>Killing a baby</td>
</tr>
<tr>
<td>People Who Do Abortions</td>
<td>Part of my work</td>
<td>Fetus</td>
<td>Client</td>
<td>A medical procedure</td>
</tr>
</tbody>
</table>

*Source: Modified from Roe 1989.*
movement was part of this challenge to established ideas. As this movement gained followers, more and more women felt that they should not have to become criminals to terminate a pregnancy. They became convinced that they had the right to legal abortions.

**THE EMERGENCE OF LEADERS.** As people discussed their concerns about abortion being illegal, leaders emerged who helped to crystallize the issues. In Hawaii, Vincent Yano, a Roman Catholic state senator and the father of ten, argued that if abortion were a sin, it would be better to have no abortion law than to have one that allowed it under certain circumstances (Steinhoff and Diamond 1977). This reasoning allowed Yano to maintain his religious opposition to abortion while favoring the repeal of Hawaii’s law against abortion.

**ORGANIZING AROUND THE ISSUE.** Another leader emerged: Joan Hayes, a former Washington lobbyist. She felt that simply to liberalize the laws against abortion would be to duck what she saw as the major issue: the right of a woman to choose whether to have a baby. Hayes understood the use of power—and the value of arousing a concerned public. She invited leaders in medicine, business, labor, politics, religion, and the media to a citizens’ seminar on abortion sponsored by the American Association of University Women.

**The Second Stage: Crafting an Official Response**

The stages of a social problem don’t have neat ending and beginning points. Their edges are blurry, and they overlap. In this case, between 1967 and 1968, legislators had introduced several bills to soften Hawaii’s law against abortion. These bills, which would have broadened the circumstances under which abortion would be legal, were actually attempts to redefine abortion. Thus, the stages of defining the social problem and officially responding to it were intertwined.

The turning point came when Senator Yano announced that he would support the repeal of the abortion law. This stimulated other official responses as organizations—from the Chamber of Commerce to the Roman Catholic Church—endorsed or rejected the repeal. Public forums and legislative hearings were held, generating huge amounts of publicity. This publicity served as a vital bridge between the public at large and the advocates of repeal. As Hawaiians became keenly aware of the abortion issue, polls showed that most wanted to repeal the law against abortion. In 1970, Hawaii did just that.

**The Third Stage: Reacting to the Official Response**

As sometimes happens, the official response to a social problem becomes defined as a social problem. This is what happened with abortion, especially after 1973, when the U.S. Supreme Court concurred with the Hawaiian legislation and struck down all state laws that prohibited abortion. Indignant about what they saw as murder, antiabortion groups picketed and used political pressure to try to sway public opinion and turn legislative defeat into victory.

Besides inspiring new opposition, official response also can change the definition of the social problem that is held by those who promoted the reform in the first place. In this case, proabortion groups noted that despite their Supreme Court victory, most counties did not offer abortions, and many women who wanted abortions could not obtain them. Consequently, they began to promote abortion clinics to make abortion more readily accessible.

Figure 1-1 shows the success of these efforts. In 1973, the first year of legal abortion, 745,000 abortions were performed. This number climbed quickly to one million, then to a million and a half, where it reached a plateau. From 1979 to 1994, the total ran between 1,500,000 and 1,600,000 each year, but beginning in 1995 the number began to drop. It now is about 1,300,000 a year. Figure 1-2 presents another overview of abortion. From this figure, you can see that the abortion ratio climbed sharply, plateaued for about 10 years, and then dropped. Today, for every 100 live births there are 32 abortions.
Figure 1-1 Number of Abortions and Live Births

![Bar graph showing the number of abortions and live births from 1973 to 2003.](image)

Source: By the author. Based on Statistical Abstract of the United States 2007:Table 93. This is the latest year listed in the 2007 source.

Figure 1-2 Number of Abortions per 100 Live Births

![Bar graph showing the number of abortions per 100 live births from 1973 to 2002.](image)

Source: By the author. Based on Statistical Abstract of the United States 1988:Tables 81, 103; 2007:Table 93. This is the latest year listed in the 2007 source.

The Fourth Stage: Developing Alternative Strategies

The millions of abortions after the Supreme Court’s ruling led to a pitched battle that still rages. Let’s look at some of the alternative strategies developed by the pro- and anti-abortion groups.
Chapter 1

How Sociologists View Social Problems: The Abortion Dilemma

Alternative Strategies of the Antiabortionists. Antiabortion groups have tried to persuade the states to restrict the Supreme Court's ruling. They have succeeded in eliminating federal funding of abortions for military personnel and their dependents, federal prisoners, and workers with the Peace Corps. They have also succeeded in eliminating health insurance coverage of abortions for federal employees. Their major victory on the federal level took place in 1976, when opponents of abortion persuaded Congress to pass the Hyde Amendment, which prohibits Medicaid funding for abortions except to save a woman's life. When the Supreme Court upheld this amendment in 1980 (Lewis 1988), the number of abortions paid for by federal funds plummeted from 300,000 a year to just 17. Despite repeated attempts to change the Hyde Amendment, the antiabortion forces have succeeded in retaining it.

A highly effective strategy of the antiabortion groups is the establishment of a national network of “crisis pregnancy centers.” Women who call “pregnancy hotlines” (sometimes called life lines or birth lines) are offered free pregnancy testing. When they accept it, they are directed to counselors who encourage them to give birth. The counselors inform women about fetal development and talk to them about the financial help and social support available to them during pregnancy. They also advise the women about how to find adoptive parents or how to obtain financial support after the birth. Some activists also operate maternity homes and provide adoption services.

Neither side on this social problem is a single, organized group. Rather, this is a social movement, and it has swept up people from every background, some of whom are moderate, others radical, and most somewhere in between.

The moderates choose moderate alternative strategies. They call their friends, run newspaper ads, and write their representatives. Those in between picket abortion clinics. In the years after Roe v. Wade, some took their cue from the civil rights movement of the 1950s and practiced passive resistance. Lying immobile in front of abortion clinics, they allowed the police to carry them to jail. In the late 1980s, antiabortion groups practiced massive nonviolent civil disobedience, and thousands of demonstrators were arrested. This social movement grew so large and its members so active that by 1990 more abortion protesters had been arrested than the number of people who were arrested in the entire civil rights movement (Allen 1988; Lacayo 1991; Kirkpatrick 1992). Since then, with the U.S. Supreme Court upholding state laws that restrict demonstrations at clinics and the homes of clinic staff (Walsh and Goldstein 2000), protesters have become less active, and arrests have dropped.

Radical activists, in contrast, lean toward radical methods. They have thrown blood on abortion clinics, pulled the plug on abortion machines, jammed locks with superglue, set off stink bombs, and telephoned women at night with recordings of babies screaming. Radical activists also have burned and bombed abortion clinics. In the town in which I taught, Edwardsville, Illinois, a group kidnapped a physician and threatened his life if he did not shut down his abortion clinics. Radical activists have shot and killed seven abortion doctors, acts that have been condemned by both proabortionists and antiabortionists alike.

Alternative Strategies of the Proabortionists. Proabortion groups, too, have developed alternative strategies. Their counterattacking has taken three primary forms: campaigning for proabortion politicians, lobbying lawmakers to vote against restrictive legislation, and seeking broad-based support by publicizing their position. They have stressed a dual message: Abortion is a woman’s private decision in which government should not be involved, and “without the right to choose abortion, any other guarantees of liberty have little meaning for women” (Michelman 1988). The proabortion forces have recruited women who had abortions when it was back-alley business to alert the public to what it would be like if the right to abortion were taken away. Their message: rich women flying to countries where abortion is legal, poor women victimized by unqualified underground abortionists, and thousands of women dying from illegal abortions.

Much of the proabortionists’ strategy has been limited to fighting rearguard actions, to trying to prevent the antiabortionists from chipping away at Roe by getting states to restrict abortion rights. In a preemptive move, proabortionists have succeeded in getting
California and five other states to codify Roe, that is, to guarantee abortion rights in their states if Roe is overturned (Solomon 2006).

**MAKING MUTUAL ACCUSATIONS.** Part of the alternative strategy of each side is to point the finger at the other. As it promotes its own point of view, each side paints the other as grotesque, uncaring, and evil. Proabortionists accuse antiabortionists of being concerned about fetuses but not about pregnant women. They also point to the killing of physicians as evidence of hypocrisy—people who say they stand for life kill others. For their part, antiabortionists accuse proabortionists of suppressing information about the health risks of abortion—and of murdering helpless, innocent, unborn children.

**THE CONTROVERSY CONTINUES: THE SUPREME COURT AFTER ROE.** As each side knows so well, the U.S. Supreme Court remains the final arbiter of abortion. Short of a constitutional amendment, if either side on this issue succeeds in getting a state, or even Congress, to pass some law, the Supreme Court decides whether that law is constitutional. Consequently, a primary alternative strategy of both proabortionists and antiabortionists is to try to influence the president’s choice of Supreme Court nominees and how the Senate votes on them. For the past couple of decades, U.S. presidents have taken strong positions on abortion and have proposed nominees for the Supreme Court that reflect their position. We can expect this stacking of the Court to continue.

Three Supreme Court decisions since the 1973 *Roe v. Wade* decision are especially significant. The first is *Webster v. Reproductive Services*. In 1989, by a vote of 5–4, the Supreme Court ruled that

1. States have no obligation to finance abortion: They can prohibit the use of public funds for abortions and abortion counseling, and they can ban abortions at public hospitals.
2. States have a compelling interest to protect fetal life: Before doctors can abort a fetus that is 20 weeks or over, they must perform tests to determine its viability (capacity to live outside the uterus).

The second significant decision is *Casey v. Planned Parenthood*. In 1992, by a vote of 6 to 3, the Supreme Court upheld a Pennsylvania law requiring that a woman under age 18 obtain the consent of at least one parent, that a 24-hour waiting period between confirming a pregnancy and having an abortion be enforced, and that the woman be given materials describing the fetus, as well as a list of agencies offering adoption services and alternatives to abortion. By a 5–4 vote, however, the Court also ruled that a wife has no obligation to inform her husband of her intention to have an abortion. *Casey* allows states to pass laws that restrict abortion—unless such laws impose an “undue burden” on a woman’s ability to have an abortion.

A third significant legal decision occurred in 1993, this time in favor of the proabortion forces. In that year, they won a major victory when Congress passed the Freedom of Access to Clinic Entrances Act. This law requires picketers and other demonstrators to remain 300 feet away from the entrances to abortion clinics. If demonstrators don’t, they face up to three years in prison. The Supreme Court has ruled that this Act does not violate freedom of speech. This significant victory for the proabortion side practically eliminated the picketing of abortion clinics.

**NO MIDDLE GROUND.** Neither the proabortionists nor the antiabortionists can be satisfied, as there is no middle ground. Both sides consider their alternative strategies as only nibbling at the edges of the problem. Each seeks total victory. The antiabortion groups advocate a constitutional amendment that would define human life as beginning at conception.
and abortion as murder. In almost a mirror image, the proabortion groups want Congress to pass a Freedom of Choice Act that would remove all state restrictions on abortion.

The activists in this ongoing social problem illustrate how interest groups develop alternative strategies as they line up on opposing sides of a social issue. In the case of abortion, the final results are still unclear—and perhaps they will never be final. On both sides are highly motivated people. Each side considers the other unreasonable. Each is rationally and emotionally dedicated to its view of morality: One talks about killing babies, the other about forcing women to bear unwanted children, even those conceived from incest and rape. With no middle ground to bridge the chasm, there is no end in sight to this bitter, determined struggle.

The Role of Sociology in Social Problems

Sociology as a Tool for Breaking Through Emotions and Defenses

One of the primary characteristics of humans is that we think of our world in personal and moral terms. In the chapter's opening vignette, for example, Lisa may think that her grandmother is narrow-minded, and her grandmother may wonder how Lisa acquired such casual morals. We all put up defenses to protect our self-concept, and most of us are convinced that our views—and what we feel and what we do—are right, that it is others who are wrong. Obviously, such self-protective attitudes and defenses are major obstacles when it comes to understanding social problems. Let's see how sociology can help.

FIVE CONTRIBUTIONS OF SOCIOLOGY TO UNDERSTANDING SOCIAL PROBLEMS. Sociology, the study of social behavior, helps us to see past the passions that surround a social problem. There are five ways by which sociology can penetrate such emotions and defenses to yield a better understanding of social problems.

1. **Sociologists can measure objective conditions.** For abortion, sociologists can gather information on the number of abortions performed in clinics and hospitals and on how the states vary in their access to abortions. They can also determine why women have or do not have abortions, how women adjust to their decision to abort or to bear a child, and how their husbands or boyfriends react.

2. **Sociologists can measure subjective concerns;** that is, they can determine people's attitudes and views about social problems (Becker 1966). Such information is useful in evaluating potential policies. To establish sound public policy involves much more than measuring public opinion, of course, but accurate measurements can guide policy makers. Table 1-3, which summarizes Americans' attitudes about the legality of abortion, provides an example of how sociologists measure subjective concerns. Note how people's attitudes are related to their gender, race-ethnicity, age, education, income, politics, and place of residence.

3. **Sociologists can apply the sociological imagination;** that is, they can place social problems into their broad social context. For example, abortion is related to people's attitudes about sexuality and sex roles. Abortion is also related to profound differences of opinion about privacy, what human life is, when life begins and ends, the role of the medical profession in terminating life, and the role of religious institutions in a pluralistic society. It is also related to ideas about individual freedom versus responsibility to the group, desirable standards of living and parenting, and what is and is not moral (Lerner et al. 1990).

4. **Sociologists can identify different ways to intervene in a social problem.** They can suggest potential social policies: courses of action for public and private agencies, educational programs, public awareness campaigns, and legal changes to address a social problem.

5. **Sociologists can evaluate likely consequences of social policies** (Becker 1966). For example, sociologists can estimate how a proposed social policy on abortion will affect the birth rate, population growth, crime rate, and expenditures for welfare and education.
These five tasks are much more easily listed than performed. Although sociologists gather extensive information on social problems, making accurate predictions from those data is difficult. People often change their behaviors, which can throw off the best predictions of social scientists. Sociology, however, is especially useful for clarifying issues in social problems. Clarification, of course, requires facts. This, in turn, leads to the question of how sociologists get dependable information. Why don’t they simply depend on common sense?
Sociology and Common Sense

All of us have “gut feelings” about the world. Based on our experiences, we “just know” that some things are true and others are not. We use common sense, the ideas common to our society (or to some group within our society), to make sense out of our experiences in life. Our commonsense interpretations also give us ideas about social problems. As a result, we all develop opinions about what causes a social problem, and we all have ideas about what should be done to solve it.

Common Sense Not Enough. Because the impressions on which common sense is based may not be correct, common sense is not adequate for deciding how we should address a social problem. To see why, let’s see how common sense holds up when it comes to abortion. Commonsense views about abortion include the ideas that abortion is a last resort, that women who get abortions do not know how to use contraceptives, and, certainly, that women who get abortions did not want to get pregnant.

Although these commonsense ideas appear obvious, they are all false. More accurately stated, they aren’t always true. For example, abortion is not always a last resort. In Russia, abortion is a major means of birth control, and the average Russian woman used to have six abortions in her lifetime (Yablonsky 1981; Eberstadt 1988). Although the rate of abortion has decreased, there are still more abortions than births in Russia (Deschner and Cohen 2003; Greenall 2003).

Nor is it true that women who have abortions don’t know how to use contraceptives. Sociologist Kristin Luker (1975), who studied an abortion clinic in California, found that many women had not used contraceptives, even though they knew how to use them and did not want to get pregnant. They avoided contraceptives because they interfered with intimacy, were expensive, were disapproved of by their boyfriends, or caused adverse side effects. Some even avoided contraceptives to protect their self-concept. If they used contraceptives, they would think of themselves as “available” or sexually promiscuous. Without contraceptives, they could view sex as something that “just happened.” Luker’s study shows that some women take chances—and they get pregnant and have abortions.

Sociologist Leon Dash (1990), who studied pregnancy among teenagers in Washington, D.C., found that the third commonsense idea is also not necessarily true. Contrary to a middle-class perspective, many poor, young, unmarried teenagers get pregnant because they want to. Some want children so that, as they said, “I can have something to hold onto, that I can call my own.” Some boyfriends also urge their girlfriends to get pregnant. This, they say, will make them “feel like a man.” And, as Luker discovered, some women get pregnant to test their boyfriend’s commitment. As many of these women found out, however, their relationship turned out to be short-term. After it soured, the young women decided that they didn’t want to bear a child after all, and they found abortion to be a way out of their situation.

Principles Underlying Sociological Research. From Luker’s and Dash’s research, we can see that our commonsense ideas may not be correct. But what allows sociological research to give us the understandings that we need to deal with social problems? Three basic characteristics of sociological research help to accomplish this:

1. Rather than basing their conclusions on personal experience, hunches, assumptions, or opinions, sociologists use scientific methods to provide objective, systematic research.
2. Sociologists do not base their conclusions on emotions or personal values. To do so would obscure their perspective and prevent them from seeing things objectively. Even if sociologists discover things that contradict their own values, they are obligated ethically to report those findings.
3. Sociologists use the sociological imagination. To discover the underlying causes of social problems, sociologists interpret them within the framework of the larger picture. In contrast, as we saw with Lisa and her grandmother, people’s common sense leads them to perceive matters on a personal level, rather than in the context of larger social patterns.

That sociologists can do objective research does not mean that sociology has all the answers. Sociologists can suggest which consequences may result if some particular social
policy is followed, but they have no expertise for determining which social policy should be followed. Social policy is based on values, on the outcomes that people want to see. Because sociology cannot determine that one set of values is superior to another, it provides no basis for making value decisions. In short, from sociology we can estimate likely outcomes of specific social policies, but we cannot determine which social policy should be chosen. We’ll come back to this in a moment, but first let’s look at how sociologists do their research.

**Methods for Studying Social Problems**

To investigate social problems, sociologists choose from several methods (ways of doing research). Which method they choose depends on two things: the questions they want to investigate and what is practical. First, they must determine what they want to find out about a social problem, for different goals require different methods. Suppose, for example, that you want to find out how people form their ideas about abortion. This calls for a different method of research than if you want to compare the abortion rates of high-school dropouts and college-educated women. Second, not everything a researcher would like to do is practical. A sociologist might like to interview huge numbers of people or to conduct large-scale experiments, but limitations of money and time, or of ethics in the case of experiments, can make such methods impractical.

Let’s review the methods that sociologists use to study social problems. We shall first distinguish how sociologists design their studies, then describe how they gather their information.

**FOUR BASIC RESEARCH DESIGNS.** Most studies fall into one of four research designs: case studies, surveys, experiments, and field studies. Let’s look at each.

- **Case studies** — The case study is used to gather in-depth information on some specific situation. As the name implies, the researcher focuses on one case—an individual, an event, or even an organization such as an abortion clinic or a crisis pregnancy center. Let’s suppose that you want in-depth information about how women experience abortion. You might want to know what emotions they undergo as they wrestle with the decision to give birth or to have an abortion, whom they talk to about it, even how they feel during the abortion and how they adjust afterward. A case study could provide this type of detail.

- **Surveys** — As you can see, though, while the case study provides rich detail, it has a drawback. If you focus on just one woman, how can you know if her experiences are similar to those of other women who have abortions? The survey overcomes this limitation. In a survey, you focus on a sample of the group you want to study. (Sociologists use the term population to refer to your target group.) Samples are intended to represent the
entire group that you are studying. Done correctly, surveys allow you to generalize what you find—that is, you are able to apply your findings to people who are part of the group but who are not in your sample.

The best sample is a random sample. This is a sample in which everyone in your population has an equal chance of being included in your study. When researchers do national surveys, whether on attitudes toward abortion or anything else, they need to get information from only about 2,000 people. Yet, random samples are so powerful that these surveys represent accurately the opinions of 300,000,000 Americans.

Experiments ■ Another research method is the experiment. If you were to use this method, you would divide people who have certain characteristics (such as Latinas between the ages of 18 and 21 with two years of college) into two groups. You would expose half of them to some experience. These people are called the experimental group. You would do this to see how their reactions differ from those of the other half, who do not have this experience (the control group). How the experimental group responds is thought to be generalizable to people who share their characteristics.

Experiments are rare in the study of social problems, partly because ethics do not allow us to create problems for people. For example, to study how women adjust to abortion, you cannot use random samples to order some pregnant women to give birth and others to have abortions. However, you can use experiments in more limited ways. For example, if you want to learn how some type of information affects people’s attitudes toward abortion, you could measure a group’s attitudes, have a random half of that group learn that information (such as reading a report or listening to a woman talk about her abortion), and then measure the attitudes of both halves of the group.

Field studies ■ In field studies (or participant observation), researchers go into a setting that they want to learn more about. (This is called “going into the field.”) For example, Magda Denes (1976) wanted to know what an abortion clinic was like—for the women and the staff—so she obtained permission to be present and observe what took place. The result was a moving book, In Necessity and Sorrow. Denes believes that women should be able to choose abortion, but in the abortion clinic she found sadness everywhere. She describes picking up fetuses from the trash barrel, their little arms broken, cut, and bleeding. A doctor tells her how the fetus stops moving about half an hour after he injects the saline solution, but the women rarely mention this change within them. A single woman talks about her affair with a married man who does not know that she is having an abortion. No other research method could obtain information like this.

Because each method (or research design) has its strengths and weaknesses, sociologists often use more than one. Luker and Denes, for example, each studied women in a single abortion clinic. Their studies could be followed up with surveys of women from many abortion clinics.

FOUR METHODS FOR GATHERING INFORMATION. After choosing a research design, you must decide how to gather your information. Four basic techniques are available: interviews, questionnaires, documents, and observations.

Interviews ■ If you use an interview, you will ask people questions on the topics that you want to explore. You can choose from two types of interviews. If you use a structured interview, you will ask everyone the same questions (for example, “What is your relationship to the man who made you pregnant?”). If you use an unstructured interview, you will let people talk in depth about their experiences; you will, however, make certain that everyone covers specific areas (contraceptive history, family relations, the reasons for the abortion, and so on). Look at the Thinking Critically box on the next page. To learn how women interpret their abortion, I used unstructured interviews. The women could talk about their experiences in any way they wanted, and I never knew where that would lead. Structured interviews would not have tapped such in-depth feelings and perspectives.

Questionnaires ■ If you were to use the second technique, questionnaires, you would ask people to answer written questions. Your questions can be either open ended
open-ended (people choose from a list of prepared answers). An open-ended question might be “What is your relationship to the man who made you pregnant?” The woman would state the relationship in her own words. A closed-ended form of this question would ask the person to check an item on a list, such as husband, boyfriend, casual acquaintance, other. It is easier to compare answers to closed-ended questions, but open-ended questions tap a richer world, eliciting comments and even topics that you might not anticipate.

**Documents**  Written sources or records, called documents, can also provide valuable data about social problems. You might examine official records. Kristin Luker, for example, analyzed the records of 500 women who came to the abortion clinic that she studied. Or you might look at more informal records, such as journals, blogs, and letters. These documents can reveal people’s attitudes and provide insight into how they cope with troubles.

**Observation**  The fourth technique, observation, is just what the term implies: To use it, you observe what is occurring in some setting. You watch and listen to what is taking place and record or take notes on people’s conversations or the statements they make. You might use a tape recorder, but if recording will interfere with what people are doing, you will take notes instead, either while something occurs or afterward. If you use overt observation, you will identify yourself as a researcher, but if you use covert observation, the people in the setting will be unaware that you are studying them.

**THINKING CRITICALLY About Social Problems**

**COPING WITH GUILT AFTER AN ABORTION**

Having an abortion solves the immediate problem of an unwanted pregnancy, but it also creates new problems. One is how to define the abortion. For those who view the fetus as non-human, this can be relatively simple. For those who view the fetus as a human, however (as well as for those with mixed views, which appears to characterize most women), the situation is more complicated.

How do women cope? While abortions were still illegal (1971), I interviewed twenty-two college women who had abortions. These women used four major techniques to help them cope:

1. Some women think of abortion as the lesser of two evils. They view abortion as preferable to having a child and ruining their own life or the lives of people they love; as preferable to shifting the responsibility for rearing the child onto others; or as preferable to resenting the child for having been born. One woman said:

   We saved ourselves and a child and very numerous other people from a lot of hurt because of this. And besides that, it was the only thing I could do—the only thing that I wanted to do, let’s put it that way.

2. Some women look at abortion as a positive good in and of itself:

   (My mom) thought it’d be the best thing. . . . After my mom told me, I started to talk to my girlfriend, and she decided it would probably be the best thing for me, too. . . . I told (my boyfriend). . . . He thought that would be the best thing. . . . I always told myself that, you know, I’d probably get one if I didn’t get married, ’cause to me that would be the best thing for me.

3. Some women see themselves as having no responsibility because they had no choice:

   He (boyfriend) insisted that I do this. I was against it. . . . I knew that I didn’t want to . . . but when you have someone saying, “Well, this is what I want you to do”—and he didn’t want to get married, and he wouldn’t let me just have the child like I wanted to do—so I really didn’t have a whole lot of choices. You know what I mean?

4. Some women think in terms of a future pregnancy that will replace the “pregnancy-abortion”:

   The mistake is past, if it was a mistake. At any rate, we can do nothing about it now. Now we have to look to the future. In another year John and I will hopefully have the start of our own family. Thoughts of being a mother have entered my mind frequently since the abortion. I really look forward to that day!
Sociologists often combine these methods. For example, in her study of the abortion clinic Luker used three of these methods: observation, interviews, and documents. Not only did she observe women and abortion providers in the clinic, but she also interviewed women who were having abortions, and she examined the clinic’s records on its patients.

STRIVING FOR ACCURACY AND OBJECTIVITY. When doing research, it is essential to strive for objectivity. You must be on guard against producing biased data. For example, it is obvious that if you were to ask a woman “What is your opinion about killing babies by abortion?” your study would be biased in an antiabortion direction. No one—whoever proabortion or antiabortion—favors killing babies. This sort of question would not constitute scientific research. Nor would this question, which would bias answers in the other direction: “What is your opinion on forcing a woman to have a baby when she wants an abortion?”

You can see, then, that scientific studies require objectivity. Compare the biased questions that I just mentioned with these. Here is a neutral closed-ended question: “Do you favor or oppose abortion?” Here is a neutral open-ended question: “What is your opinion about abortion?” For either of these questions, you might specify the trimester being considered. Can you see that these questions are neutral, that they don’t tilt answers in any direction? If you ask questions like these, your own opinions about abortion, whatever they might be, will not interfere with your research.

Like everyone else, those of us who are sociologists get our ideas and opinions from the groups with which we associate and the ideas to which we are exposed. No matter how we dislike it, this means that we have biases. Fortunately, we have a safeguard that helps to prevent our biases from contaminating our research on social problems. This is the publication of our findings. In our articles and books, we include details on the methods we use. Other sociologists examine these publications in detail, eager to point out any flaws they can find, including bias.

To help you better understand how sociologists do their research, I asked several researchers to share their experiences with us. The result is a feature in this text called Spotlight on Social Research. For an overview of this feature, see the box on the next page.

Should Sociologists Take Sides?

THE PROBLEM OF DETERMINING MORALITY. These research methods allow us to gather objective information on social problems, but they do not reveal what attitude or social policy is “correct.” This takes us back to the issue I mentioned earlier, that of sociology not having the capacity to specify that one value is superior to another. Abortion, for example, is intertwined with thorny philosophical and religious issues concerning “great questions”: life, death, morality, freedom, responsibility, and ultimate existence. Sociologists can study people’s ideas about such topics, but sociology has no way to judge whether those ideas are right or wrong, much less to determine the ultimate meaning that may underlie such issues.

To take a position on a social problem is to take sides—and because sociology is not equipped to make judgments about values and morality, sociology cannot tell us what side to take. Even so, the question of taking sides on social problems is debated hotly among sociologists, for, like other thoughtful people, sociologists have their own concerns and ideas about social problems.

The issue is clear-cut. Should sociologists, because they are scientists, forget their own subjective concerns and strive to remain dispassionate, detached, and value-free? If so, they would merely report the facts and not take sides on the social issues that affect our society. Or should they use their professional authority to promote the side of an issue that they see as right? For example, should they try to help the “oppressed,” the “down and out,” the poor, and others who are on the receiving end of social problems?

THE DEBATE AMONG SOCIOLOGISTS. Those who champion neutrality stress the position that sociologists enjoy no superior vantage point from which to make moral judgments. Sociologists do have knowledge and skills to offer, they say, but not morality. In their study of social problems, sociologists can indicate the potential consequences of different social
policies, but they should not promote any particular policy or solution. To do so would be to hide a moral or value position under the guise of sociology.

On the other side of this issue are sociologists who are convinced that they have a moral obligation to take a stand. “If sociology is not useful for helping to reform society,” they ask, “of what value is it?” They stress that sociologists are in a strategic position to relate the surface manifestations of a social problem (such as poverty) to deeper social causes (such as the control of a country’s resources by the wealthy and powerful). They say that sociologists should do their research objectively—and always side with those who are being hurt and exploited. Those on the extreme end of this side of this debate also say that sociologists have a moral obligation to make the oppressed aware of their condition and to organize them to do battle against those who oppress them.

UNCOVERING VALUES. To make the issues in this debate clearer, we need to make more evident that values are hidden in all proposed solutions to a social problem. To do this, let’s turn away from things that most of us agree on, such as the desirability of eliminating poverty and oppression, and consider controversial matters. What if a group of sociologists were to study unmarried pregnant teenagers and conclude that they all should have abortions? Arguments can be made for and against this position, of course, but should sociologists promote such a point of view? Or consider an even more extreme case. What if sociologists, after analyzing the soaring costs of Social Security and Medicare, became convinced that the solution to this severe problem would be to euthanize the physically and mentally handicapped? Or what if their conclusion was that all people, after celebrating their 80th birthday, should be “put to sleep” by means of painless drugs? Would professional activity on behalf of such proposed social policies be appropriate?
No sociologist is going to support such positions, but I think you get the point. Whenever someone takes a position on a social problem and advocates one solution or another, values of some sort underlie that person’s views. Should sociologists, then, as sociologists, advocate or promote solutions to social problems?

**TAKING SIDES: DIVISIONS AND AGREEMENT.** This question of taking sides as professionals divided U.S. sociology during the Vietnam War—and it has done so again with Gulf War II. Some sociologists are convinced that professional associations such as the Society for the Study of Social Problems should make public antiwar pronouncements; others, in contrast, feel just as strongly that such a position is out of order. Although wars come and go and issues change, this broad cleavage among sociologists remains. Some say that sociologists should work toward changing society in order to help the less powerful; others are just as convinced that sociology’s proper role is only to investigate and report objectively. They say that if sociologists want to take sides on any issue, they should do so as private citizens, not as sociologists.

This debate keeps sociologists sensitive to the boundaries between objectivity and partisanship. Although there is little room for middle ground, most sociologists attempt to resolve this dilemma by separating the evidence on social problems from their own values and opinions. What they observe and measure, they attempt to report dispassionately and to analyze as accurately as possible. They try to be explicit when they move from neutral description to a value position.

Despite their disagreements about taking sides on social problems, sociologists agree that they are in a unique position to study social problems and that they should produce thorough and objective studies. Sociologists do possess the tools to do such research, and their studies can be valuable for both the public and policy makers.

**A PERSONAL NOTE.** As the author of this book, I sincerely hope that the coming chapters help you to acquire a sociological imagination that will allow you to work toward creative solutions for the pressing social problems we face. Sociologists can provide facts on objective conditions, sensitize you to the broader context that nourishes social problems, and suggest the likely consequences of intervention. Your decisions about what should be done about a social problem, however, will have to be made according to your values.

**SUMMARY AND REVIEW**

1. Sociologists use what is called the sociological imagination (or perspective) to view the social problems that affect people’s lives. This means that they look at how social locations shape people’s behavior and attitudes.

2. A social problem is some aspect of society that people are concerned about and would like changed. It consists of objective conditions, things that are measurable, and subjective concerns, the feelings and attitudes that people have about those conditions. Social problems are relative—one group’s solution may be another group’s problem.

3. Social problems go through a natural history of four stages that often overlap: defining the problem, crafting an official response, reacting to the official response, and pursuing alternative strategies.

4. Sociologists are able to make five contributions to the study of social problems: They can help determine the extent of a social problem, clarify people’s attitudes toward social problems, apply the sociological imagination to social problems, identify potential social policies for dealing with social problems, and evaluate likely consequences of those policies.

5. The sociological understanding of a social problem differs from a commonsense understanding because the sociological perspective is not based on emotions or personal values. Instead, sociologists examine how social problems affect people, view the causes of social problems as located in society rather than in individuals, and use scientific methods to gather information about social problems.

6. To study social problems, sociologists use four major research designs: surveys, case studies, experiments, and field studies. Sociologists gather information in four basic ways: interviews, questionnaires, documents, and observations. These methods are often used in combination.

7. Because social problems can be viewed from so many vantage points, sociologists disagree on whether they should choose sides as professionals. They do agree, however, that sociological studies must provide objective, accurate, and verifiable data.
THINKING CRITICALLY ABOUT CHAPTER 1

1. Select a social problem and apply the sociological imagination to it.
   - What makes this situation a social problem? (Explain how it matches the definition of a social problem outlined in this chapter.)
   - What are the values of the people who are involved in this social problem? (Be sure to look at both sides of the problem, not just the one that matches your ideas of what is right or wrong.)
   - What social forces shaped the parties’ points of view?

2. Who do you think is winning the battle between the proabortion and antiabortion activists? Why? Use the court decisions cited in this chapter to support your answer.

3. Select a social problem. Which research methods do you think would be most appropriate for studying this social problem? Why?

4. Do you think that sociologists have a responsibility to take sides on social problems? Why or why not?