Learning Objectives. After reading this chapter, you should be able to:

1.1 Understand the sociological imagination (sociological perspective), explain the difference between a personal and a social problem, and explain the significance of social location. (p. 2)

1.2 Understand that sociologists can use social location to predict group behavior but not individual behavior. (p. 4)

1.3 Explain why a social problem consists of both objective conditions and subjective concerns and why social problems are relative. (p. 5)

1.4 Identify the four stages through which social problems evolve. (p. 7)

1.5 Describe the contributions that sociologists can make in studying social problems. (p. 15)

1.6 Explain why common sense is not adequate to understand social problems. (p. 17)

1.7 Understand the four basic research designs and research methods that sociologists use to study social problems. (p. 17)

1.8 Summarize the disagreement in sociology regarding whether or not sociologists should choose sides. (p. 21)
Lisa felt desperate. The argument with her grandmother seemed to have gone on forever, and they both were now at their wits’ end. “You don’t know what you’re doing, Lisa. You’re taking the life of an innocent baby!” her grandmother said once again.

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

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

“But you don’t understand! It’s not a baby!”

“Of course, you’re carrying a baby! What do you think it is, a puppy?”

“You’re being ridiculous! You’re trying to 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 appendix taken out.”

“I can’t believe my own granddaughter is saying that butchering a baby is like taking out an appendix!”

Lisa and her grandmother look at each other, knowing they are worlds apart. They both begin to cry inside.

The Sociological Imagination

Like Lisa and her grandmother, when we are confronted with problems, we usually view them in highly personal—and often emotional—terms. Our perspective is usually limited to our immediate surroundings. With our eyes focused on the things that are close to us, the larger social forces recede from view. Yet it is these broader social patterns that shape the particular problems we experience. In this text, you will learn how to connect your personal life with the larger social context. You will also understand how social problems develop and how we might be able to solve them.

What is the Sociological Imagination?

One of the goals of this text is to help you develop your sociological imagination. This term, coined by sociologist C. Wright Mills, refers to looking at people’s actions and attitudes in the context of the social forces that shape them. As Mills (1959b) said, to understand our experiences in life, we must understand our historical period and the social forces that are sweeping the time in which we live.

Another way of saying this is that we want to understand how our personal troubles (the problems we experience) are connected to the broader conditions of our society. As with Lisa and her grandmother, for example, attitudes toward abortion don’t “come out of nowhere.” These attitudes are related to conditions in society: in this case, technology (birth control and surgical techniques), gender relations (women’s rights), and the law (abortion being legal or illegal). Change these, and ideas about abortion will change. As we apply the sociological imagination in this text, you will discover how forces greater than yourself set the stage for the personal troubles that you experience.

Applying the Sociological Imagination to Personal Troubles. To better understand the connection between personal troubles and historical change, let’s apply the sociological imagination to Lisa and her grandmother. This means that we want to examine the larger context that shaped their views about abortion. When Lisa’s grandmother was growing up, marriage and motherhood were considered a woman’s destiny,
her purpose in life. Without them, a woman was incomplete. At this time, careers for women were an interlude between completing education and marriage. Abortion was illegal, and almost everyone agreed that abortion was murder. Some women who had abortions were taken to their destination blindfolded in a taxi. They endured unsanitary surgery with a high risk of postoperative infection and death.

Lisa grew up in a different society. To be sure, it was the same society geographically, but not socially. Lisa learned different ideas about herself and her place in life. The women’s movement had transformed ideas about women’s education, career, marriage, and motherhood. It had also transformed women’s ideas about the choices they could make about their bodies, including the right to terminate a pregnancy. Some say that a woman’s right in this area is absolute: She can choose to have an abortion at any point in her pregnancy, even if she is 9 months along. If married, she does not even have to let her husband know about it.

In our opening vignette, neither Lisa nor her grandmother saw this finely woven net that had been cast over them, one that now turned their lives upside down, making them confront one another like opponents instead of the close friends they are. Like Lisa and her grandmother, social change also hits us on a personal level: We feel its impact in our own intimate and everyday lives. As with Lisa and her grandmother, the winds of social change affect what we think and feel and what we do—and how we relate to one another.

The sociological imagination (also called the sociological perspective) helps us to see how larger social forces influence our personal lives. We tend to see events in our lives from a close-up perspective—the immediate things that are impinging on us. In contrast, the sociological imagination invites us to place our focus on the social context, to see how it shapes or influences our ideas, attitudes, behaviors, and even our emotions. The social context occurs on three levels: broad, narrow, and intimate. The broad social context includes historical events such as war and peace, economic booms and busts, depression and prosperity. The narrow social context includes gender, race–ethnicity, religion, and social class. The personal social context refers to the relationships we share with family, friends, or co-workers. These are not just abstract ideas, things irrelevant to your life. Rather, these levels come together to make up the social context that shapes the way you look at life.

The Significance of Social Location. The term social location refers to where you are located in society. It includes not only physical places, such as your neighborhood and city, but also personal characteristics, such as your education, sex, race–ethnicity, age, health, and marital status. Our social location is central to our relationships with other people. As sociologist Peter Berger (1963:40) said,

*To be located in society means to be at the intersection point of specific social forces. Commonly one ignores these forces . . . one also knows that there is not an awful lot that one can do about this.*

Few of us know how significant our social location really is. We all are aware that our social location has an impact on our lives, but our awareness is foggy. We are so caught up in the immediate present—the demands on our attention to get through everyday life—that few of us perceive the impact of our social location. Yet in their many studies, sociologists have documented how our social location influences almost all aspects of our lives. For example, if you are a woman, social location even influences whether or not you will have an abortion.

You might think that I am exaggerating to make a sociological point, but I’m not. Look at Table 1.1 on the next page, and you will see the differences made by age, race–ethnicity, marital status, and length of pregnancy. Look at age: Women in their early 20s are the most likely to have abortions. You can see how much lower the rate of abortion is before the early 20s and how it drops sharply after this age. Now look at the influence of race–ethnicity. As you can see, African American women are the most likely to have abortions. Their rate is more than four times that of white women. Another striking difference—one that cuts across both age and race–ethnicity—is marital status:
1.2 Unmarried women are more than four times as likely as married women to have abortions. You can also see that four of five abortions take place before the 11th week of pregnancy, and close to half of the women who have an abortion have had one before.

Suppose, then, that on your campus some women in their early 20s are pregnant. Can you see how much more likely they are to have an abortion if they are single than if they are married? During the first two months of pregnancy than after this?

**Social Location**

*The Group, Not the Individual.* It is important to emphasize that social location does not determine our actions. Rather, it means that people in each corner of life are surrounded by particular ideas, beliefs, and expectations. As each of us grows up in a particular location, we are exposed to those specific influences, and they help shape our actions. For example, you are of a certain race–ethnicity and age. You are also either married or single. But this does not mean that you will do some particular thing, such as, if you are a woman, having or not having an abortion. Social location

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**TABLE 1.1 Who Has Abortions?**

<table>
<thead>
<tr>
<th>Aborts</th>
<th>Number of Abortions</th>
<th>Percentage of All Abortions</th>
<th>Abortion Rate per 1,000 Women</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 15</td>
<td>6,000</td>
<td>1%</td>
<td>3</td>
</tr>
<tr>
<td>15–19</td>
<td>192,000</td>
<td>16%</td>
<td>18</td>
</tr>
<tr>
<td>20–24</td>
<td>397,000</td>
<td>33%</td>
<td>38</td>
</tr>
<tr>
<td>25–29</td>
<td>298,000</td>
<td>25%</td>
<td>29</td>
</tr>
<tr>
<td>30–34</td>
<td>177,000</td>
<td>15%</td>
<td>18</td>
</tr>
<tr>
<td>35–39</td>
<td>106,000</td>
<td>9%</td>
<td>10</td>
</tr>
<tr>
<td>40 and over</td>
<td>37,000</td>
<td>3%</td>
<td>3</td>
</tr>
<tr>
<td><strong>Race–Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African Americans</td>
<td>458,000</td>
<td>37%</td>
<td>48</td>
</tr>
<tr>
<td>Whites</td>
<td>411,000</td>
<td>34%</td>
<td>11</td>
</tr>
<tr>
<td>Latinas</td>
<td>267,000</td>
<td>24%</td>
<td>24</td>
</tr>
<tr>
<td>Others2</td>
<td>90,000</td>
<td>7%</td>
<td>18</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>188,000</td>
<td>16%</td>
<td>7</td>
</tr>
<tr>
<td>Unmarried</td>
<td>1,024,000</td>
<td>84%</td>
<td>31</td>
</tr>
<tr>
<td><strong>Length of Gestation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 9 weeks</td>
<td>747,000</td>
<td>62%</td>
<td>NA3</td>
</tr>
<tr>
<td>9 to 10 weeks</td>
<td>207,000</td>
<td>17%</td>
<td>NA</td>
</tr>
<tr>
<td>11 to 12 weeks</td>
<td>119,000</td>
<td>10%</td>
<td>NA</td>
</tr>
<tr>
<td>13 or more weeks</td>
<td>139,000</td>
<td>12%</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Number of Prior Abortions</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>646,000</td>
<td>53%</td>
<td>NA</td>
</tr>
<tr>
<td>1</td>
<td>322,000</td>
<td>27%</td>
<td>NA</td>
</tr>
<tr>
<td>2 or more</td>
<td>245,000</td>
<td>20%</td>
<td>NA</td>
</tr>
</tbody>
</table>

1 Based on the number of U.S. women in the category. These data are for 2008, the latest year available.
2 The source uses this general category to include everyone other than African Americans, Latinas, and whites.
3 Not Available or Not Applicable.

makes a profound difference in our attitudes and behaviors, but in any individual case, it is impossible to know in advance the consequences of those influences. We can't say that any particular woman will have an abortion. But—and this is important—as Table 1.1 makes apparent, sociologists can make predictions about groups, because groups do follow well-traveled social avenues.

In Sum Sociologists stress the need to use the sociological imagination to understand how personal troubles are related to changes in society. 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.

The social 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 takes place.

What Is a Social Problem?

Because social problems—aspects of society that a large number of people are concerned about and would like changed—are the focus of this text, it is important to understand clearly what social problems are. We might think that social problems are natural things, much like hurricanes or earthquakes. But they are not. Social problems are socially constructed. This simply means that people decide if some condition of society is or is not a social problem. This will become clearer as we examine this process.

The Characteristics of Social Problems

Social Problems: Objective Conditions and Subjective Concerns. Social problems have two essential components. The first is an objective condition, a condition 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 essential component is subjective concern, the concern that a significant number of people (or a number of significant people) have about the objective condition. For abortion, subjective concern goes in two directions: Some people are concerned that some women give birth to unwanted children, while others are concerned that some women terminate their pregnancies. 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. To say that social problems are dynamic is to say that as society changes, so do social problems. Until 1973, abortion was illegal, and any doctor who performed an abortion could be arrested and put in prison. In that year, the U.S. Supreme Court transformed the social problem of abortion when it made a landmark ruling in a case known as Roe v. Wade.

Consider how the Court’s ruling affected the two essential elements of this social problem—its objective conditions and subjective concerns. Before 1973, its objective conditions were based on abortion being illegal, especially the dangerous conditions in which most abortions took place. And the subjective concerns? People were upset about two main things—that women who wanted abortions could not get them and that women faced dangers from botched, underground abortions.

As growing numbers of people became concerned that women could not have legal abortions, they worked to change the law. Their success transformed the problem: After Roe v. Wade, large numbers of people became upset that abortion had become legal. Convinced that abortion is murder, these people began their own campaigns to change the law. For their part, 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 problems are dynamic, how they take shape as groups react to one another.
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, keeps 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 man without a son 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 on guard constantly 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, the killing of 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 now replaced female infanticide with sex-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.

Not all women who are pregnant with a female fetus go along with this idea. Some resist, even though their husbands and other relatives urge them to have an abortion. With profits in mind, medical personnel also try to sell reluctant women on the abortion. 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 news 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.

Seldom enforced, however, this law is ignored. 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.”

Here is one way to measure the assault on females in India: Sex-selection abortion and female infanticide are so common that India has 10 to 15 million fewer girls and women than it would have if these practices didn’t exist.

In an interesting twist, sex-selection abortion is coming to the United States. As U.S. demographers have pored over their data, they have found that Indian immigrants have fewer female children than they would by chance.


For Your Consideration

Granted the cultural situation that Indians face, do you think that Indians in poverty should practice sex-selection abortion? Why or why not? Do you think that the U.S. Congress should pass a law against sex-selection abortion for Americans?
Social Problems Are Relative. What some view as a social problem, others see as a solution. As you can see from how people line up on either side of the abortion issue, what people consider to be a social problem depends on their values. A value may be defined as a belief about whether something is good or bad. People’s values contrast so sharply that some view the Roe v. Wade decision of 1973 as a victory, while others see it as a disaster. It is the same with other social problems. Mugging, for example, 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. The Issues in Social Problems box on the next page explores this further.

Let’s apply this principle to the subjective concerns about abortion. Look at Table 1.2 below. You can see that whether people view abortion as favorable or unfavorable colors the way they view everything connected with abortion. Subjective concerns about social problems, then, can sort people into such contrasting worlds that, like Lisa and her grandmother, it becomes difficult for people to communicate with one another.

<table>
<thead>
<tr>
<th>TABLE 1.2 How People’s Definitions of Abortion Affect Their Views</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The Views (Definitions) of</strong></td>
</tr>
<tr>
<td>What Is Abortion?</td>
</tr>
<tr>
<td>What Is Aborted?</td>
</tr>
<tr>
<td>Who Is the Woman?</td>
</tr>
<tr>
<td>What Is the Act of Abortion?</td>
</tr>
<tr>
<td>Who Is the One Who Does the Abortion?</td>
</tr>
</tbody>
</table>

Source: By the author. Modified from Roe 1989.

Competing Views. As you know, our pluralistic society is filled with competing, contrasting, and conflicting groups. This variety certainly makes life interesting, as it means that we are exposed to competing, contrasting, and conflicting views of life. But in such a dynamic world with groups fiercely promoting their particular ideas, whose definition of a social problem wins? The answer centers on power, the ability to get your way despite resistance. After abortion became legal, most observers assumed that because the opponents of abortion had lost, they would quietly fade away. As you know, this assumption was naive. Feelings were so strong that groups that had been hostile to one another for centuries, such as Roman Catholics and Baptists, began to work together to try to stop abortion. Shocked at what they considered the killing of babies, they took to the streets and to the courts, fighting battle after battle over this issue.

These, then, are central characteristics of social problems: objective conditions, subjective concerns, dynamism, relativity, and competing views. Let’s see how these fascinating characteristics of social problems apply to the development of abortion as a social problem.

The Natural History of Social Problems: Four Stages

Social problems go through four stages, called the natural history of social problems. To illustrate this process, we will look at abortion in the United States. To do so, we need to stress again that abortion used to be illegal in all fifty states. Abortion was
Chapter 1
How Sociologists View Social Problems: The Abortion Dilemma

1.4
Issues in Social Problems

A Problem for Some Is a Solution for Others: The Relativity of Social Problems

Here is a basic sociological principle: As we interact with others—from our family and friends to people at school and work—their perspectives tend to become part of how we view life. Among these perspectives are ways to view social problems.

Our views are not written in stone. Many of us think that the subjective concerns we have about some social problem are the only right and reasonable way of viewing some objective condition. But from where did our views originate except from our experiences with particular groups and our exposure to certain ideas? Just as our social locations are the source of our subjective concerns, so our views can change if our journey in life takes us in a different direction. If it does, we travel to other social locations. There, as we experience new groups, we encounter different ideas and information. You might have already felt this tugging and pulling in your college experience, as you associate with new groups of people and are exposed to competing ideas and values. In short, our views, or subjective concerns, are related to our experiences.

This relativity of subjective concerns is central to the social problem of abortion. How do you define the status of the unborn? Is the fetus a human being, as some believe, or only a potential human, as others 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, rather, a medical procedure that removes a potential person, with the emphasis on potential. Women should have the right to have abortion for any reason. The reason might include health problems or financial pressures, but it might also be to attain goals, to limit family size, to finish school, or simply to win a promotion at work. The reason should be solely up to the woman. The state has no business limiting women’s rights and 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, the most defenseless of all humans. How can anyone justify murdering a baby? We need to protect and nourish babies, not kill them. To say that women have a right to abortion is the equivalent of saying that women have the right to murder their children. It is not just the woman’s body that is involved in a pregnancy: There are two bodies, and the other one is a baby. The exception to this concept of abortion occurs 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?

How people define the unborn is the essence of their position on abortion. That which is pictured here is about eleven weeks’ gestation. To describe it, those on one side of the abortion controversy use terms such as fetus and “product of conception,” while those on the other side call it a baby.

allowed only under special circumstances, such as when pregnancy endangered the mother’s life.

To see how this changed, we need to go back to the outbreak of German measles that 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, who began to change their views on abortion. The rate of abortion in Hawaii never fell back to its pre-1964 level, and in 1970, Hawaii changed its law, making abortion a private, noncriminal act.

Now that we’ve set this brief background, we can trace the natural history of abortion as a social problem in the United States. As we do so, we’ll pick up events in Hawaii, and go from there. This will let you see the four social stages of social problems. For a summary, look at Table 1.3.

### TABLE 1.3 The Four Stages of Social Problems

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The Beginning</td>
<td>Pressures for Change&lt;br&gt;Defining the problem&lt;br&gt;Emergence of leaders&lt;br&gt;Initial organization</td>
</tr>
<tr>
<td>2. The Official Response</td>
<td>Reactions to the growing pressure&lt;br&gt;Reprisal, condemnation, accommodation, cooptation</td>
</tr>
<tr>
<td>3. Reacting to the Official Response</td>
<td>Taking sides&lt;br&gt;Acts of approval and disapproval&lt;br&gt;Further divisions of dissident elements</td>
</tr>
<tr>
<td>4. Alternative Strategies</td>
<td>Continuing controversy&lt;br&gt;New strategies to overcome the opposition</td>
</tr>
</tbody>
</table>

Note: Our society is marked by continuous unrest and agitation about numerous matters. Very few of these issues turn into social problems. Most remain diffuse matters of discontent.

Around some social problems, a social movement develops. The trigger that sometimes launches a social movement is a dramatic event that captures the imagination, desires, or discontent of large numbers of people, often accompanied by organizing of some sort that transforms those emotions into an organized force for change. The variety is fascinating. It can be sudden and violent, acts of rage built on decades of discontent that soon dissipate, as with the Arab Spring of 2012. Or it can be slow and deliberate, simmering for decades, as with abortion in the United States.

Source: By the author.

### 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 in society. This concern involves a shift in outlook, a questioning of something that people had taken for granted. This change in perspective often comes about when values change, making an old, established pattern no longer look the same. This is what happened with abortion. The 1960s were a period of turmoil that brought wrenching social change to the United States. Young people—primarily teenagers and those in their 20s—began to challenge long-established values. The women’s movement was especially significant, encouraging women to speak out and demand equality. Within this agitational and supportive context, many women decided that they should not have to break the law to terminate a pregnancy, that they had the right to safe, 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 10, took the public stage. He 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 went even further, arguing that the major issue was the right of pregnant women to choose whether or not to have a baby. Hayes used the media effectively. Concentrating on influential people, she organized leaders in medicine, business, labor, politics, religion, education, and the media. Focusing on women’s choice, she aroused public support for her position.

The Second Stage: Crafting an Official Response

It is important to stress that the stages of a social problem don’t have neat boundaries. The edges are blurry, and the stages overlap. In the years before Hawaii changed its law, legislators had introduced several bills to soften the state’s abortion law. These bills were not passed, but since their purpose was to broaden the circumstances under which abortion would be permitted, they were attempts to redefine abortion. You can see that the first stage of defining the social problem and the second stage of developing an official response to it were intertwined.

The turning point in Hawaii came when Senator Yano announced that he would support the repeal of the abortion law. This stimulated other official responses from organizations such as the Chamber of Commerce and the Roman Catholic Church. Public forums and legislative hearings were then held, which generated huge amounts of publicity. This publicity served as a vital bridge between the passive public at large and the leaders who were advocating repeal of Hawaii’s abortion law. As Hawaiians became keenly aware of the abortion issue, polls showed that most favored repealing the law. In 1970, Hawaii did just that.

The Third Stage: Reacting to the Official Response

An official response to a social problem certainly does not mean the end of a social problem. Some will even see the official response as part of the problem, fueling the continuation of their struggle. This is just what happened with abortion in 1973. In that year, the U.S. Supreme Court concurred with the Hawaiian legislation and struck down all state laws that prohibited abortion. Incensed by what they saw as legalized murder, antiabortion groups held protests, trying to swing public opinion to their side.

Besides inspiring new opposition, an official response can also stimulate efforts at bringing about even more change. In this case, those who had fought to strike down the abortion laws were also dissatisfied: Their Supreme Court victory fell short of what they wanted. It was still difficult for women to obtain abortions as most U.S. counties did not have facilities to perform them. To solve this, proabortion groups began to promote the development of abortion clinics around the country.

Figure 1.1 on the next page 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. In 1995, the total began to drop, and it now is 1.2 million a year, the lowest number it has been in decades. Figure 1.2 on the next page presents another overview of abortion. From this figure, you can see that the number of abortions per live births climbed sharply after abortion was legalized. After plateauing for about 10 years, it then began to drop. Today, for every 100 live births there are 28 or 29 abortions. This is the lowest ratio since 1975.

A Note on Terms. Before we look at the fourth stage of social problems, we need to pause and consider terminology. Terms are always significant, especially so when we deal with sensitive matters. You probably noticed that I just used the term proabortion to refer to those who favor the legal right to abortion and antiabortion to refer to those who oppose this legal right. (The longer terms would be pro-legal-abortion and anti-legal-abortion.) I am trying to avoid the terms pro-choice and pro-life, which are used by advocates on each side of this social problem. Pro-choice and pro-life represent
one-sided, hardened attitudes and positions. (As discussed in the Preface, neither side involved in the abortion issue prefers the terms I have chosen. For detailed background, see the Preface, pages xxi–xxvii.) If I have succeeded in my intentions, even if you do not like the terms I have chosen, whether you favor the legal right to abortion or oppose it, you will feel that I have provided a balanced presentation of your view.
The Fourth Stage: Developing Alternative Strategies

The millions of legal abortions that took place after the Supreme Court’s ruling led to a pitched battle that still rages. Let’s look at alternative strategies the pro- and antiabortion groups developed to promote their positions.

Alternative Strategies of the Antiabortionists. After the Supreme Court made its Roe v. Wade decision in 1973, antiabortion groups began to try to persuade states to restrict the ruling. They succeeded in eliminating federal funding of abortions for military personnel and their dependents, federal prisoners, and workers with the Peace Corps. They also succeeded in eliminating health insurance coverage of abortions for federal employees. Their major victory on the federal level took place early: In 1976, they persuaded Congress to pass the Hyde Amendment, which prohibits Medicaid funding for abortions unless the woman’s life is in imminent danger. 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 groups have succeeded in retaining it.

Another highly effective strategy of the antiabortion groups has been to establish “crisis pregnancy centers.” Women who call “pregnancy hotlines” (sometimes called life lines or birth lines) are offered free pregnancy testing. If the test shows they are pregnant, they are directed to counselors who encourage them to give birth. The counselors inform women about fetal development and talk to them about financial aid and social support available to them during pregnancy. They also advise 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.

Strategies of Moderates. We can classify antiabortionists as moderates or radicals depending on the techniques they use to support their views. The strategies that moderates choose are mild, such as forwarding e-mail to their friends, running newspaper ads, writing their representatives, posting blogs, and operating Internet sites. They also feature women who have had abortions, but who regret their decisions, as speakers at conferences. Taking their cue from the civil rights movement of the 1950s, in the years after Roe v. Wade many practiced passive resistance to laws they considered unjust. Lying immobile in front of abortion clinics, they went limp as the police carried them to jail. 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 during the entire civil rights movement (Allen 1988; Lacayo 1991; Kirkpatrick 1992). Since then, the U.S. Supreme Court has upheld state laws that restrict demonstrations at clinics and the homes of clinic staff, and this tactic has shrunk into the background (Walsh and Goldstein 2000).

Strategies of Radicals. Radical activists, in contrast, choose more extreme methods to try to stop abortions. Some have thrown blood on the walls of abortion clinics, unplugged abortion machinery, jammed clinic doors with Super Glue, and set off stink bombs. Others have called women who had abortions and played recordings of babies screaming. Some radical activists have burned and bombed abortion clinics. In the town in which I taught, Edwardsville, Illinois, radicals kidnapped a physician and threatened his life if he did not shut down his abortion clinics. Radical activists have shot and killed eight abortion doctors. These extreme acts have been condemned by both proabortionists and antiabortionists alike.

Alternative Strategies of the Proabortionists. Proabortion groups have also developed alternative strategies. Their counterattack typically takes three primary forms: campaigning, lobbying lawmakers, and publicizing their position. At the center of their position is the belief that abortion is a woman’s private decision in which government should not be involved. They stress that “without the right to choose abortion, any other guarantees of liberty have little meaning for women” (Michelman 1988). One alternative
strategy is to recruit women who had abortions when it was back-alley business. They use their stories to warn the public about what it would be like if the right to abortion is taken away. Their ultimate message is that thousands of women will die from underground abortions if it does not remain legal.

Central to the efforts of the proabortionists is protecting *Roe v. Wade* and preventing attempts by the antiabortionists to chip away at or overturn the ruling. They have been successful 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.** As a key strategy, each side points a 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 innocent, unborn children.

**The Controversy Continues: The Supreme Court after *Roe v. Wade*.** In the abortion debate, the U.S. Supreme Court remains the final arbiter. If either side on this issue succeeds in getting a law passed, 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 three 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.

Four Supreme Court rulings since the 1973 *Roe v. Wade* decision are especially significant. The first is *Webster v. Reproductive Services* (1989). In this ruling, the Court concluded that the states have no obligation to finance abortion. Individual states can ban abortions at state hospitals and refuse to fund counseling services for women who

![Like Lisa and her grandmother in the chapter’s opening vignette, why might this grandmother and granddaughter have different opinions about abortion? Both were born and raised in the United States. What does it mean to say they grew up in different societies?](image-url)
are considering abortion. The second significant decision is *Casey v. Planned Parenthood* (1992). In this ruling, hailed as a victory by the antiabortionists, the Supreme Court ruled that to get an abortion, women under the age of 18 must first obtain the consent of at least one parent. This ruling also requires a waiting period of 24 hours before an abortion can be performed. During this waiting period, the woman must be given materials on fetal development, as well as a list of adoption agencies in the area. In a nod to the proabortionists, the Court ruled in this same decision that a wife has no obligation to inform her husband before she has an abortion.

The third significant decision, hailed as a victory by proabortionists, occurred in 1994 when the Supreme Court upheld FACE, the Freedom of Access to Clinic Entrances Act. This law requires demonstrators to remain 300 feet away from the entrances to abortion clinics. If not, they face up to 3 years in prison. The Court ruled that this law does not violate freedom of speech.

The fourth major Supreme Court decision came in 2007. In *Gonzales v. Carhart*, the Court upheld the Partial-Birth Abortion Ban that Congress had passed in 2003. This law bans a procedure in which the doctor dilates the woman’s cervix, then pulls the fetus through the birth canal feet first until only the head remains inside. Using scissors or another sharp instrument, the doctor then punctures the head and compresses the skull, so it, too, can fit through the dilated cervix (Rovner 2006).

This ruling highlights the significance of terms. The proabortionists call this procedure intact dilation and extraction, a dry-sounding medical term, while the anti-abortionists call it partial birth abortion, an emotionally evocative term. That Congress called its law the Partial-Birth Abortion Ban indicates the success that the antiabortion groups had in formulating this law and in this Supreme Court ruling.

**The Controversy Continues: Coming Supreme Court Decisions.** As you have seen, in developing alternative strategies both sides have been successful in getting laws passed that favor their position. The proabortionists managed a stunning victory when they succeeded in getting abortion listed as a medical condition covered by the health reform law. This aspect of the law has aroused intense opposition from Roman Catholics, as it violates their religious beliefs and conscience. Roman Catholic hospitals and colleges, including Notre Dame, have sued the federal government, an issue that will be decided by the Supreme Court (Radnofsky 2012). Other issues the Supreme Court is likely to face include state laws that require women who want an abortion to view sonograms of their fetus, outlaw abortions after a heartbeat has been detected, and require abortion clinics to meet hospital standards and have hallways five feet wide (Bassett 2011; Eng 2012; Eckholm 2013).

**No Middle Ground.** The alternative strategies pursued by the proabortionists and the antiabortionists are merely skirmishes in a drawn-out war. Each side is seeking total victory, and neither is satisfied with strategies that bring anything less. What the anti-abortionists want is a *Federal Right to Life Law*, a constitutional amendment that would assert that human life begins at conception. Abortion would then be officially classified as a type of murder. For their part, what the proabortionists want is a *Federal Freedom of Choice Law* that would remove all state and federal restrictions on abortion. You can see how incompatible the views and goals of abortion activists are.

The final results of this struggle for and against legal abortion are still unclear. On each side of this issue are highly motivated people who consider their view the only “right” way of looking at the world. Each views the other as misinformed and unreasonable. Each is rationally and emotionally dedicated to its own view of morality: One argues that the only moral course of action is to outlaw abortion because it kills babies. The other argues that the only moral course of action is to keep abortion legal because it is part of women’s freedom to make decisions about their own bodies. With no middle ground to bridge this chasm, there is no end in sight to this bitter, determined struggle, and the groups are likely to continue to tensely confront one another for some time.
The Role of Sociology in Social Problems

As you have seen with the example of abortion, social problems are filled with conflicting emotions, views, and values. In the midst of such turmoil, how can sociology help?

A basic human characteristic is to 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. Most of us are convinced that our views on moral issues are right, that people who hold contrary views are ignorant, short-sighted, and wrong. Our defenses go up when anyone questions our moral positions.

It is difficult to penetrate such self-protective attitudes and defenses, especially since they go beyond the rational and are clad in emotions. Let’s see how sociology, the systematic and objective study of human groups, can help us see past the emotions that surround social problems.

Sociology as a Tool for Gaining an Objective Understanding of Social Problems

If we want an objective understanding of social problems, sociology can help. Here are five contributions that sociologists can make:

1. **Sociologists can measure objective conditions.** In the case of abortion, sociologists can gather information on the number of abortions performed in clinics and hospitals, trends in the number of abortions and who has them, and how the states differ on making abortion accessible. They also can determine how women make their decisions to have or to not have an abortion, how they adjust to their decision, and how their decisions affect their relationships with their husbands or boyfriends.

2. **Sociologists can measure subjective concerns.** Sociologists can also determine people’s attitudes and views about social problems (Becker 1966). Such information is useful in evaluating potential social policies. Establishing sound social policy involves more than measuring public opinion, of course, but accurate measurements can guide policy makers. Table 1.4 on the next page, which summarizes Americans’ attitudes about the legality of abortion, provides an example of how sociologists measure subjective concerns. Note again how significant social location is, how people’s attitudes are related to their sex, race–ethnicity, age, education, income, politics, and place of residence.

3. **Sociologists can apply the sociological imagination.** They can place social problems into their broad social context. For example, abortion is related to people’s ideas about individual freedom and privacy, sexuality and sex roles, and when life begins. It is also related to ideas about standards of living and parenting, what is and is not moral, and the role of religious institutions in a pluralistic society (Lerner et al. 1990).

4. **Sociologists can identify possible social policies.** To address a social problem, sociologists can suggest potential courses of action for public and private agencies, educational programs, public awareness campaigns, and legal changes.

5. **Sociologists can evaluate likely consequences of social policies** (Becker 1966). Sociologists can estimate the social effects of a proposed social policy. On abortion, for example, they can estimate how a policy might affect the birthrate, population growth, crime rate, and expenditures for welfare and education.

That sociologists can do objective research does not mean that sociology has all the answers. Far from it. Sociologists can suggest which consequences are likely
TABLE 1.4 Should Abortion Be Legal or Illegal?

This question was asked of a representative sample of Americans: “Do you think abortions should be legal under any circumstances, legal only under certain circumstances, or illegal in all circumstances?”

<table>
<thead>
<tr>
<th></th>
<th>Always Legal</th>
<th>Legal Under Certain Circumstances</th>
<th>Never Legal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overall Average</strong></td>
<td>27%</td>
<td>50%</td>
<td>22%</td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>24%</td>
<td>55%</td>
<td>19%</td>
</tr>
<tr>
<td>Female</td>
<td>29%</td>
<td>45%</td>
<td>24%</td>
</tr>
<tr>
<td><strong>Race–Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>29%</td>
<td>48%</td>
<td>21%</td>
</tr>
<tr>
<td>Nonwhite1</td>
<td>22%</td>
<td>54%</td>
<td>22%</td>
</tr>
<tr>
<td>Black</td>
<td>30%</td>
<td>47%</td>
<td>20%</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–29 years</td>
<td>32%</td>
<td>45%</td>
<td>23%</td>
</tr>
<tr>
<td>30–49 years</td>
<td>29%</td>
<td>49%</td>
<td>21%</td>
</tr>
<tr>
<td>50–64 years</td>
<td>26%</td>
<td>53%</td>
<td>19%</td>
</tr>
<tr>
<td>65 years and older</td>
<td>18%</td>
<td>52%</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school or less</td>
<td>21%</td>
<td>48%</td>
<td>29%</td>
</tr>
<tr>
<td>Some college</td>
<td>32%</td>
<td>50%</td>
<td>17%</td>
</tr>
<tr>
<td>College graduate</td>
<td>24%</td>
<td>58%</td>
<td>16%</td>
</tr>
<tr>
<td>College postgraduate</td>
<td>35%</td>
<td>49%</td>
<td>15%</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under $20,000</td>
<td>23%</td>
<td>46%</td>
<td>29%</td>
</tr>
<tr>
<td>$20,000–$29,999</td>
<td>16%</td>
<td>53%</td>
<td>30%</td>
</tr>
<tr>
<td>$30,000–$49,999</td>
<td>25%</td>
<td>45%</td>
<td>27%</td>
</tr>
<tr>
<td>$50,000–$74,999</td>
<td>33%</td>
<td>52%</td>
<td>15%</td>
</tr>
<tr>
<td>$75,000 and over</td>
<td>33%</td>
<td>56%</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Politics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Republican</td>
<td>13%</td>
<td>52%</td>
<td>34%</td>
</tr>
<tr>
<td>Democrat</td>
<td>38%</td>
<td>47%</td>
<td>14%</td>
</tr>
<tr>
<td>Independent</td>
<td>29%</td>
<td>52%</td>
<td>18%</td>
</tr>
<tr>
<td><strong>Region</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East</td>
<td>27%</td>
<td>50%</td>
<td>22%</td>
</tr>
<tr>
<td>Midwest</td>
<td>24%</td>
<td>46%</td>
<td>28%</td>
</tr>
<tr>
<td>South</td>
<td>22%</td>
<td>51%</td>
<td>25%</td>
</tr>
<tr>
<td>West</td>
<td>37%</td>
<td>51%</td>
<td>11%</td>
</tr>
</tbody>
</table>

1As used in the source, “nonwhite” refers to anyone who did not self-identify as white or black.

Note: Because the “no opinion” category is not included in the source, the rows do not always add to 100.

Source: Sourcebook of Criminal Justice Statistics 2012:Table 2.101.

to 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 dictate that one set of values is superior to another, it provides no basis for making value decisions. We’ll come back to this in a moment, but first let’s consider using common sense to solve social problems.
Sociology and Common Sense

Do we really need sociological research? Why don’t we just follow common sense? We all have experiences that “tell” us 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 get through daily life, so why don’t we just use common sense to solve social problems?

The short answer for why common sense is not adequate is that some of our ideas are built on faulty assumptions. For example, a commonsense idea is that abortion is a last resort. For some women, it is, of course, but this is not always the case. Soviet Russia provides a remarkable example. In the Soviet Union, abortion was a major means of birth control, and the average Russian woman used to have six abortions in her lifetime (Yablonsky 1981; Eberstadt 1988). The abortion rate dropped after the collapse of the Soviet Union, but abortion became part of the culture, and there are still more abortions than births in Russia (Regushevskaya 2009; Kishkovsky 2011).

Another commonsense idea is that women who don’t want to get pregnant use birth control. Sociologist Kristin Luker (1975), who studied an abortion clinic in California, found that many women had not used contraceptives. It wasn’t that they were ignorant. Rather, some felt that contraceptives interfered with intimacy, others that they caused side effects, and still others that they cost too much. Some women didn’t use them because their boyfriends didn’t want them to. Some even avoided contraceptives to protect their self-image: If they used contraceptives, they might think of themselves as “available” or sexually promiscuous. In short, for a variety of reasons some women take chances—and when they get pregnant some have abortions.

Another commonsense idea is that women who have abortions did not intend to get pregnant. Sociologists have found that this, too, isn’t necessarily true. Leon Dash (1990), who studied pregnancy among teens in Washington, D.C., found that many poor, young, unmarried girls get pregnant on purpose. 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, so that they will “feel like a man.” And, as Luker discovered, some women get pregnant to test their boyfriend’s commitment. When they learn that their relationship isn’t going to work out, they decide that they don’t want to bear a child after all, and they choose abortion as a way out of their dilemmas.

Since it is easy for commonsense ideas to be wrong, we need solid, objective research. To see how sociologists produce these kinds of findings, let’s turn to how they do their research.

Methods for Studying Social Problems

When sociologists study social problems, they choose from several methods (ways of doing research). Which method they select depends on three factors. The first is the question they want to investigate. Suppose, for example, that you want to find out how people form their ideas about abortion. To answer this question, you would use a different method of research than if you want to compare the abortion rates of high school dropouts and college-educated women. A second factor is the matter of practicality. You might want to do face-to-face interviews with people across the country, but you can’t because you have neither enough money nor time. A third factor is ethics. Some methods that might yield good data are unethical. They might cause emotional harm or violate people’s privacy.

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

Four Basic Research Designs. Most research falls 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 a 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 learn how the women 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 depth of understanding.

Surveys ▶ While case studies provide rich detail, you cannot generalize from them. They can provide remarkable insight, but if you focus on just one woman, how can you know whether her experiences are similar to those of other women? To overcome this limitation, sociologists use surveys. In a survey, you focus on a sample of the group you want to study. (Sociologists use the term population to refer to the 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 belong to 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 research. 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 can accurately represent the opinions of 300 million Americans.

Experiments ▶ Another research method is the experiment. If you were to use this method, you would randomly divide people who have certain characteristics (such as women between the ages of 18 and 21 who have had an abortion) into two groups. You would expose half of them to some experience (such as a video of a woman giving birth). These people are called the experimental group. You would do this to see how something you measure, such as their attitude toward abortion, differs from that of the control group, those who do not view the video. Differences in the experimental group are thought to be generalizable to people who share their characteristics (in this case, young women who have had an abortion).

Experiments are rare in the study of social problems, partly because ethics do not allow us to create problems for people. (Having a woman who has recently had an abortion watch a video of a birth is likely to cause stress.) However, you can use experiments in more limited ways. For example, you could measure attitudes toward abortion before and after listening to a lecture on abortion.

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 (1934–1996) who was on the proabortionist side of this issue, wanted to know what an abortion clinic was like—for the women and the staff (1976). She obtained permission to be present in an abortion clinic and observe what took place. The result was a moving book, In Necessity and Sorrow. Denes reported her findings objectively. She tells us that the emotional experience was much more intense than she expected. She describes picking up fetuses from the trash barrel, their little arms broken, cut, and bleeding. Her book highlights conversations she had with doctors about how the fetus stops moving about half an hour after they inject saline solution into the placenta. No other research method could obtain information like this.

Four Methods for Gathering Information. After selecting a research design, sociologists decide how to gather their information. They choose from four basic techniques: interviews, questionnaires, documents, and observations.

Interviews ▶ If you use an interview, you 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 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 let people talk in depth about their experiences; however, you must make certain that everyone covers certain topics (such as contraceptive history, family relations, and the reasons for the abortion).

**Questionnaires**  If you use the second technique, questionnaires, you ask people to answer written questions. These can be in paper/pencil form or they can be questions on a computer program. Your questions could be either open ended (people answer in their own words) or closed 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 put the relationship in her own words. A closed-ended form of this question would ask the woman 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, attitudes, 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 like census data or hospital 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, e-mail, and Internet discussion groups. These documents can reveal people’s behaviors 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 field notes on people’s actions or what they say. You might use an audio or video recorder, but if recording will interfere with what people are doing or saying, you 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 not be aware that you are studying them.
Combining Methods  Sociologists often combine research methods. For example, to do research on 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 examined the clinic’s records on its patients.

Striving for Accuracy and Objectivity. When doing research, it is essential to remain objective. Look at Table 1.5 below, in which we compare biased and neutral questions. The bias of the questions on the left should be obvious to you. But what is biased about number two on the antiabortion side? The bias is just a tad less apparent. To make it more obvious, think about the terms father and baby. They make assumptions that bias the question in an antiabortion direction.

Few of us would try to slant our research in some direction, but 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 us overcome our biases. Before they are published, reports on our research are sent to fellow sociologists who critique them. Each article submitted for publication includes details on the methods that were used. As the referees analyze a report, they look for flaws of any sort, including biases. They then recommend or do not recommend its publication.

To help you better understand how sociologists do their research, I asked several researchers to share their experiences with you. 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.

### TABLE 1.5  Bias and Objectivity in Research Questions

One way to evaluate the results of survey research is to examine the questions that the researchers asked. You would not expect any researcher to use questions as biased as the examples in this table. Extremes are used to help you to see how questions can shape answers.

Bias in social research is usually subtle, not easy to detect. The bias sometimes slips in because the researcher lives within a particular social world in which his or her views are taken for granted, and the researcher does not recognize the bias. Regardless of their source, biased questions produce biased results.

<table>
<thead>
<tr>
<th>Biased Questions</th>
<th>Neutral Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Antiabortion Bias</td>
<td>1. What is your opinion about abortion?</td>
</tr>
<tr>
<td>1. What is your opinion about killing babies by abortion?</td>
<td>2. If a husband or boyfriend gets a woman pregnant, do you think he should be informed before the woman has an abortion?</td>
</tr>
<tr>
<td>2. What is your opinion about women not having to inform the father of the baby before they have an abortion?</td>
<td></td>
</tr>
<tr>
<td>The Proabortion Bias</td>
<td>1. What is your opinion about abortion?</td>
</tr>
<tr>
<td>1. What is your opinion about forcing a woman to have a baby when she wants an abortion?</td>
<td>2. If a husband or boyfriend gets a woman pregnant, do you think he should be informed before the woman has an abortion?</td>
</tr>
<tr>
<td>2. Why do you think that any man who gets a woman pregnant should have a say in the woman’s choice of what to do with her own body?</td>
<td></td>
</tr>
</tbody>
</table>

Source: By the author.
Should Sociologists Take Sides?

The Problem of Determining Morality. Let’s go back to the issue I mentioned earlier (pp. 15–16) that sociologists can do objective research but that sociology does not provide a basis for making value judgments. Our four research methods allow us to gather objective information on social problems, but they do not reveal what attitude or social policy is “correct.” Abortion, for example, is interwoven with thorny philosophical and religious issues concerning the “great questions” of life, death, morality, freedom, responsibility, and ultimate existence. Sociologists can study people’s ideas about such topics, but sociology has no basis to judge whether someone’s ideas are right or wrong, much less determine the ultimate meaning that may underlie such issues.

To take a position on a social problem is to take sides—and because sociology does not equip us to make judgments about values and morality, sociology cannot tell us which 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 subjective concerns about social problems. Let’s look at this debate.

1.8 Summarize the disagreement in sociology regarding whether or not sociologists should choose sides.

Watch on MySocLab Video: Objectivity: Fact or Fiction
Chapter 1
How Sociologists View Social Problems: The Abortion Dilemma

1.8

Taking the Side of the Oppressed. Many sociologists are convinced that they have a moral obligation to take a stand on social issues. “If sociology is not useful for helping to reform society,” they ask, “of what value is it?” They stress that although sociology does not provide a basis for making moral choices, it does provide sociologists the ability 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 have the obligation to do their research objectively—but that they should side with those who are being hurt and exploited. Some go farther than this and 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.

This view that we should take the side of the oppressed—a popular view running through sociology since its origins—does not give us a direction for taking sides in the abortion dilemma. Those who take the proabortion view would argue that they are siding with women who are hurt and exploited. But those who take the antiproabortion view would argue that they are siding with the hurt and exploited unborn. We end up full circle to where we started. Again, sociology cannot provide the basis for choosing values.

Uncovering Values. To better bring these views into focus, let’s assume that some sociologists have studied unmarried pregnant teenagers. After analyzing the problems that these young women confront and the consequences for their children, they conclude that unmarried pregnant teenagers should have abortions. Arguments can be made for and against this position, of course, but the question is: Should sociologists promote such a point of view?

To make this issue clearer, let’s consider an even more extreme case. Suppose that sociologists analyze the soaring costs of Social Security and Medicare. They become convinced that these programs are bankrupting the nation and that the solution is to euthanize the physically and mentally handicapped. Let’s also assume that one of their conclusions is that all people, after celebrating their 80th birthday, should be “put to sleep” by means of painless drugs? Arguments can be made for and against this position, of course, but the question is: Should sociologists promote such a point of view?

I doubt that any sociologist would ever support any of these proposals, but I think you get the point. Whenever someone takes any position on a social problem, values of some sort underlie that person’s views. We sociologists, who develop our values just as everyone else does, are no exception to this principle.
Taking Sides: Divisions and Agreement. Besides taking sides as individuals, sociologists sometimes take sides as professionals. This has created divisions within sociology—especially during the Vietnam War and again with the Iraq War. The debate centers on whether or not our professional groups—such as the Society for the Study of Social Problems and the American Sociological Association—should take a public stand against a war. Although wars come and go and issues change, this broad cleavage among sociologists remains. As mentioned, the most popular view among sociologists is that we should work toward changing society in order to help the less powerful. Some, however, are convinced that sociology’s proper role is only to investigate and to report research findings objectively. They say that if sociologists want to take sides on any issue, they should do so as private citizens, not as sociologists.

This ongoing 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 research findings from their own values and opinions. What they observe and measure, they attempt to report dispassionately and to analyze as accurately as possible.

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 possess the tools to do such research, and their studies can be valuable for both the public and policy makers.

A Personal Note. 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. We sociologists can provide facts on objective conditions, sensitize you to the broader context that nourishes social problems, and suggest the likely consequences of any particular intervention. Your decisions about what should be done, 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 large numbers of people are concerned about and would like changed. It consists of objective conditions (things that are measurable) and subjective concerns (the ideas, 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. The sociological understanding of a social problem differs from a commonsense understanding because the sociological perspective (or imagination) 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 objective methods to gather information about social problems.

5. 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.
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 observation. These methods are often used in combination.

7. Because social problems can be viewed from 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.

Key Terms

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Thinking Critically About Chapter 1

1. What are the differences between personal problems and social problems? Apply this distinction to abortion; to robbery.
2. If you were a sociologist and you wanted to study abortion, which research design would you use? Why?
3. Do you agree with the author’s statement that science, including sociology, cannot answer questions of morality? Why or why not?
4. Do you think that sociologists have a responsibility to take sides on social problems? Why or why not?