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## **COPING WITH THE RISKS OF INFECTION BY MALE PROSTITUTES IN TIMES SQUARE**

**Robert P. McNamara, Furman University**

### **INTRODUCTION**

Male prostitutes, often called male "hustlers," are a common feature of the urban landscape. However, until recently, research on this population has been relatively sparse. Many researchers have begun to reexamine the phenomenon of male prostitution largely due to the fact that hustlers are at risk of acquiring AIDS (Boulton et al 1989; Calhoun, Pickerill 1988; Elifson et al 1989, 1993; Lauderback, Waldorf 1989; Pleak, Meyer-Bahlburg 1990; Ross 1988; Rotheram-Borus, Koopman 1991).

Since male prostitutes frequently engage in the primary means of transmission of the HIV virus - unprotected sex with males, unprotected sex with females, and intravenous drug use and needle sharing - they are a group at high risk of infection. This is especially true in New York City, which represents a large portion of the HIV/AIDS population. Additionally, the sex trade in Times Square has historically offered a marketplace for a variety of activities, participants, and customers.

The purpose of this article is to describe some of the techniques used by male prostitutes in Times Square to manage the risks of infection with the HIV virus. Building upon the framework found in Walter Miller's (1958) Lower Class Culture Theory, the various techniques used by hustlers are described as well as how the cultural lore surrounding AIDS inhibits effective prevention measures for hustlers. The information concerning AIDS and its transmission is received, but this information is distorted to the point where the hustlers can describe the risks but avoid taking appropriate risk-reducing measures.

### **METHODS**

This research took place primarily in the Times Square section of the City, although some occurred elsewhere in the Midtown Manhattan area and in Greenwich Village in lower Manhattan. In collecting these data, I used classic ethnographic methods of direct observation and open-ended, unstructured interviews. For one year, beginning in January 1992, I observed, interviewed, and interacted with members of the hustling population. I also interviewed peep show managers,

employees, shopkeepers, hotel clerks, and various street people. In part, I designed these interviews to gain access to the population.

Entry into hard-to-reach populations presents a host of problems for researchers (Agar 1980; Douglas 1972; Hammersley, Atkinson 1983; Karp 1980; Luckenbill 1985). Often the researcher must rely on informants to provide key information about the population as well as providing introductions to its members. Early on in my research, shopkeepers pointed out areas where a good deal of hustling takes place, offered opinions on the nature of the problem, and, in a few cases, introduced me to hustlers. My contacts with other researchers in the area and street people whom I had come to know were also helpful.

Through these networks, I was able to interview thirty-five hustlers. Because large segments of the population pride themselves on anonymity, I cannot make a claim of representativeness. However, I feel confident that what the hustlers have told me about the trade, the culture of hustling, and their lives has been accurate and consistent. When possible I have verified the information through personal observation or by asking my informants or other hustlers for verification. These methods are obviously not without limitations, but they did serve to support the information I was given. Nevertheless, it should be stressed that I am focusing on a select segment of the hustling population in New York City. My insights, assessments, and conclusions can only be applied to the hustlers in Times Square.

There were many reasons for my success in gaining access to this population, but my relationship with three key informants was perhaps the most important. Since they played leadership roles within the culture, their introductions to other hustlers not only paved the way for those particular interviews, but the effect snowballed and additional introductions came at a relatively rapid pace. These three individuals became my cultural guides, pointing out new developments, providing and verifying information about others in the trade, and making important contacts for me.

Finally, I should note my use of the term "boys" in the following passages. I use this term interchangeably with "hustler" and

"prostitute" primarily to avoid distracting repetition. While I have met hustlers as young as fourteen and as old as thirty, I really cannot consider the former group of young men "boys." Thus, the term used is one of convenience rather than of literal meaning.

### THE DYNAMICS OF HUSTLING

Much of the hustling in Times Square goes on either in the peep shows or in the Port Authority Bus Terminal. Both offer anonymity for the client and both are places with a great deal of traffic. The exodus of commuters from the City, for example, especially at rush hour, offers clients the opportunity to lose themselves in the throng of people making their way home. As such, they can carry out transactions with hustlers without attracting much attention. The same premise applies to the peep shows, which large numbers of males patronize during this time period.

There is one particular area in the Port Authority known among hustlers and clients as the "Meat Rack." This is an area near some of the departure gates where a good deal of hustling takes place. If an agreement is made between the two parties, they may then go to a variety of places: the peep shows, the client's apartment, their car, or one of the restrooms nearby. Hustling activities are marked by a great deal of diversity. Consider the following:

Smokealot: It depends on who the trick is and what they want you to do. Like some guys will just come up to you and say how much? Right then you know they be Five-0 [the police] because they gotta get you to admit the price first. But some of the tricks will come up to you and ask you what your name is, what you like to do, if you wanna get high or somethin' like that. We work out an arrangement depending on what the trick wants. I only go with tricks I know so I ain't gonna get picked up [arrested]. But other guys will pick up anybody. And usually, depending on what they want, you can make anywhere from 30 to 40 dollars a trick. See it depends on a lotta factors like what they want, how long they wanna go. It's just like females you know what I'm saying? But like for an average, it's about 30 dollars. But you always gotta be clockin' [observing or watching him closely] the man to make sure he ain't Five-0.

Another primary location for hustling are the peep shows. In the basement of many of these shops in and around the area, there is a

section which caters to the homosexual client. Virtually every shop has a sign prohibiting hustling, prostitution, drug dealing, and the entry of minors. However, one can easily find young men of uncertain age loitering near the video booths nearby. The booths are very small, but there is a door for privacy, a bench for patrons to sit on, and the area is kept dark so that they can view the porno films clearly. These factors make it an ideal haven for clients to "pick up" hustlers and to use the booth for sexual purposes.

The managers and clerks of these shops are adamant about not allowing young hustlers in their stores, but the boys tell me it is quite easy to bribe both the clerk and the security officer, who allow them to "work" the area. As long as the hustler is discreet and does not cause trouble, the employees are willing to ignore the illicit activity.

Thus, the peep shows have been, and continue to be, an integral part of a hustler's life. They offer a relatively safe working environment as well as a steady source of income. It may appear, then, that there is a pattern to hustling that all of the participants understand. There is an agreed upon location, a familiar dialogue, and an established pricing policy for the various activities. This pattern fosters stability in hustling. For the most part, very few problems occur either between the hustler and the client or among the boys themselves. That is, in the vast majority of cases, the activities are carried out without incident.

The explanation for this stability is found in the normative system which regulates the boys' behavior. For instance, one extremely important norm is that once a hustler and a client begin a conversation, another hustler should never intervene. This is a sort of territorial claim that is not to be encroached upon. Violation of this norm can lead to severe and violent retaliation.

Another norm stipulates that if a hustler is picked up by an unknown client, another hustler will discreetly follow them as a precautionary measure. The significance of this norm is found in the fact that the protecting hustler may have to sacrifice his own customer to fulfill his community obligation.

Thus, the establishment of a social order has led to a strong sense of cohesion among the members of the hustling culture. These feelings of community provide hustlers with a social support mechanism, a relatively safe working environment as well as preserving,

and, in some cases, enhancing their sense of self worth. For these otherwise disenfranchised individuals, who are without adequate job skills, are poorly educated, and experience a host of other problems, these are indeed powerful benefits.

### **THE HUSTLERS OF TIMES SQUARE: A BRIEF PROFILE**

Most of the hustlers are between the ages of 18-21, comprising sixteen of the thirty-five hustlers interviewed, while twelve were between 14-17 years old. There were also four hustlers over age thirty. These older men are central figures in the community, largely based on their time and experience in the trade.

Additionally, unlike other types of hustlers found in New York City, the majority classify themselves as heterosexual in orientation. Many have wives or live-in girlfriends and some have children. This runs counter to a number of studies and popular notions that male prostitution is a decidedly homosexual phenomenon (Pleak, Meyer-Balzburg 1991). Among the Times Square hustlers, this is not the case. With families to feed and drug habits to support, hustlers view their participation in the trade as a necessity. For these hustlers, prostitution is an income producing activity rather than a recreational one. This approach is similar to the perspective that Reiss (1961) identified in his now classic study on male prostitutes. Focusing on delinquent peer groups, he found that many males are able to maintain their status within the peer group as well as a positive self-image by viewing prostitution simply as a way to earn extra money. Thus, despite engaging in homosexual acts, these boys are able to separate what they do from who they are. It is the same "lack of role identification" (Reiss 1961) by which the hustlers of Times Square can manage their self-image within the context of their hustling activities.

### **COPING WITH THE RISKS OF INFECTION**

With regard to HIV/AIDS, there is little doubt that many hustlers are at risk. Many are IV drug users who share needles and other paraphernalia and they frequently have multiple heterosexual partners in addition to clients. Thus, they engage in virtually all of the primary risk activities and do so regularly. But many questions arise as to whether or not the hustlers of Times Square know their risk

status, and if they do, how they manage to cope with these risks. The vast majority of hustlers in Times Square are quite knowledgeable about HIV and AIDS, and a few take effective precautionary steps. However, there are many others who, while knowledgeable, think they are immune from the consequences or employ dangerous measures to prevent infection. Still others almost fatalistically accept that they will become infected and do very little to prevent it.

The various means by which the boys cope with the risks of infection can be understood by using the framework created by Walter Miller (1958). Building upon Sellin's (1938) work on conduct norms within the context of a subculture, Miller sees criminal behavior as a function of obedience to the norms and values of a unique and separate lower class culture.

Miller believes that slum areas have a distinct cultural climate which remains stable over long periods of time. The reason for this is that the people in these areas are unable to succeed in the mainstream culture, and a group of value-like "focal concerns" evolve to fit the conditions of life in slum areas. These focal concerns are Trouble, Toughness, Smartness, Excitement, Fate, and Autonomy.

In these communities, people are evaluated by their actual or potential involvement in trouble making activity. These include fighting, drinking, sexual misconduct, or criminal acts. Getting into trouble is a status-enhancing mechanism. Related to this is an emphasis on toughness. Lower class males also enjoy recognition for their masculinity and value physical strength, athletic ability, and ability to withstand physical punishment.

Smartness involves the ability to outsmart or manipulate others in the "ways of the street" such as con games, gambling, or avoiding the police. Smartness also goes beyond intellectual skills and places greater emphasis on being able to successfully navigate oneself within the culture.

There is also a heavy emphasis on fate among the members of this population. Getting lucky, finding good fortune, or winning the lottery is a predominant feature of lower class culture. Finally, a general concern exists in lower class cultures about personal freedom and autonomy. Being in the control of authority figures such as police, teachers, and parents is unacceptable. When conflicts with these groups arise, the usual response is hostility and a lack of respect.

### Figure 1: Techniques for Managing the Risks of HIV/AIDS

Knowledge of Positive HIV Status	
YES	NO
Denial	Invulnerability
Accept with Vengeance	Smartness
Accept without Vengeance	Toughness/Trouble
	Fate
	Autonomy

In sum, Miller argues that by participating in this distinct and separate culture and abiding by these focal concerns, criminal behavior is an inevitable feature of the lower class.

In the same way that crime is a normal response to established community standards, the means by which hustlers reduce the possibilities of becoming infected are also couched in terms of cultural values. Thus, it is because of the cultural lore surrounding HIV/AIDS issues that Miller's "focal concerns" helps us understand how hustlers are unable or unwilling to take the appropriate steps to prevent infection. This is especially true in light of the fact that they possess a relatively clear understanding of the disease.

### FOCAL CONCERNS, HIV, AND HUSTLERS

In looking at how the hustlers of Times Square cope with the risks of HIV, a distinction must be made between those who are aware of their HIV status and those who are not. The reason for this is that this knowledge results in very different behavior with regard to their hustling activities. Figure 1 was developed to describe the various strategies employed by the boys to manage the risks of infection.

For those who are HIV positive there are essentially three responses: denial, acceptance with vengeance, and acceptance without vengeance. Perhaps the most common coping mechanism among those infected is denial. These prostitutes simply deny that they are going to die of AIDS. They cannot accept their fate and believe they will survive and overcome the disease. Apache is the latest in a long line of hustlers to enter this initial stage of coping. He states:

The thing is, they think I'm gonna die soon, bullshit! I don't find no difference between me and anybody else. Whether you got this [the virus] or not you gonna die. I don't believe I'm

gonna be in the hospital with no pneumonia. I mean, I'll die naturally. I'll die just like you die and everybody else, unless somebody walks up to me and puts a bullet in my head. Yeah but you see, my life is full of this. But I don't believe nothin' about dyin' of no pneumonia and all that shit. I don't believe in that. I mean, the way I look at it, I'm just as healthy as you are. The only thing is that I have something in me that you don't have in you.

Thus, Apache views the HIV virus in the same manner most people view a flu virus: something that could be potentially serious, but really isn't and is essentially a short term ailment. For Apache and those like him, they are unable to come to grips with a very real and difficult future.

While some deny, others accept the fact that they are HIV positive. However, with this acceptance comes an added problem: vindictiveness. These hustlers have sought vengeance against clients involved in the trade. Eddie falls into this category. Eddie is only sixteen and is well liked by almost everyone in the hustling community. Once he learned he was infected, his entire outlook changed.

I look at it this way. The only way I could have got it was from some trick who was infected. I think I know when it happened but I ain't positive. But it was some trick who knew he was infected and he didn't care about me. He didn't care about any of these people out here. He probably figured 'since I got it, I'm gonna give it to everyone I can.' Well, when I got it, everything changed. I used to like goin' out and messin' around, doin' drugs, partyin', pickin' up tricks. It was fun. Then when I found out that some sick bastard gave me the virus and now I got to deal with it, I'm gonna make every one of those motherfuckers pay too. I don't tell nobody I got the virus: you the only one I ever told this to. But I'm tellin' you that since some trick gave it to me, I'm gonna give it to every trick I go with. They don't care, I don't neither. It's like what they say about payback.

MC: What about all the other hustlers who go with that trick though? If you infect him, then he goes with them, they get it too right?

Eddie: That's why I tell everybody I know and like to use a condom and to use one every single time cause you never know. You never, never fuckin' know. But if they don't listen and they go

with somebody and get infected? Then that's their fault: They were stupid. But you know what? Of all these hustlers out here, I bet almost all that got it [the virus] got it from some trick that was infected first.

Eddie's comments reflect the feelings of most hustlers. It is generally felt that the transmission of HIV to the hustling community has come from infected clients who either intentionally or carelessly expose them to the virus. Parenthetically, I asked Eddie why he carried condoms if he sought to infect clients. His reply was that he uses the condoms for his sexual partners and he also uses them as a negotiating tool. He will either ask the client to wear a condom or state he must wear one. In response, the client will sometimes offer a bonus for sex without a condom. In this way, Eddie can charge more, and, at the same time, continue his pattern of revenge.

The last category includes those who accept their status and are not vengeful towards others. This group of hustlers is rarely mentioned and even then only in a limited context. These are hustlers who have left the trade and are experiencing the debilitating effects of AIDS. I have not talked to anyone who falls into this category, and judging from the boys' fleeting references to them, they are not a large portion of the hustling population...at least not yet.

In contrast, the vast majority of hustlers do not know their HIV status. Of this group, a small number of younger hustlers, especially those who have little experience in the trade, simply ignore the possibility of infection. This is similar to the perspective offered by Perloff (1983, 1986) and others concerning feelings of invulnerability (Kirscht et al 1966; Synder 1978; Weinstein 1984). These young men simply feel that they are immune from the disease and thus need not worry about preventative measures.

Most hustlers however, use a series of what I call "focal precautions," which were adapted from Miller's theory, and are generally categorized as Smartness, Toughness/Trouble, Fate, and Autonomy.

### **SMARTNESS**

Smartness refers to the ability of the hustler to possess additional knowledge or have devised a more "effective" strategy than others to avoid infection. There are several techniques employed here. Perhaps the most common

risk reduction mechanism is a heavy reliance on the ability to identify an infected client. While the boys admit on one hand that an infected person can look "clean" and healthy, they also point out that they will not go with a client who looks "sick." This means if the client has flu-like symptoms or has suddenly developed a medical problem, or looks pale and sweaty, hustlers avoid him. Prince had this to say about his ability to spot infected clients:

I only go with clean lookin' well dressed men. I don't deal with anybody else. And they got to be healthy lookin' or I ain't goin'. They can't be lookin' sick and shit like they dyin' or nothin' like that. Some of these tricks around here look like they be walkin' corpses or somethin'. But like if I see a trick walkin' around here and he's healthy lookin' and stuff, and then all of a sudden I don't see him for a while and he comes back? Or like if he tells me in conversation he just been to the doctor for a checkup or somethin'? Then I know somethin's up. Or maybe he starts usin' a cane or somethin' like that. He ain't never used no cane before so why does he need one now? See so you got to watch the tricks around here real close and you get like signs from them if they sick or not.

Prince's comments are typical. He believes he possesses some innate ability to identify infected clients. In reality then, this ability to spot infected clients is based on an undefined, superficial assessment. Those that look physically ill are avoided, and the criteria for selecting the "clean" ones probably rests on how much they are willing to pay. To be fair, hustlers do make some type of initial evaluation and this wariness is helpful in assessing other types of risk, such as risks of physical injury.

A second strategy in this category is to limit the range of activities hustlers will perform with clients. Many have stated they will only engage in passive oral sex with clients and since they are not at risk, they are unconcerned about infection. However, oral sex as a means of transmission remains controversial and hustlers are still at risk since an infected client can have sores or cuts on his lips or on the inside of his mouth (Hollander 1990; Lifson et al 1990; Osmond 1990). But perhaps more importantly, one must question whether or not this is the only type of act the hustler becomes involved in. This is especially true for the crack-addicted male prostitute who will do almost anything with anybody for nearly any

price (McNamara 1994).

Third, some hustlers take time off from hustling and in this way believe they can reduce the likelihood of infection by limiting the "law of averages."

**Deadhead:** If you was a hustler, I would tell you use your condoms and don't go with more than one person a day okay? If you're gonna hustle, don't go with more than one person in a day. That will decrease the odds of you catching it. Sometimes you take a week off. Don't have no sex for a whole week! That way you cut down the chance of you gettin' infected with the disease. It's like the law of averages you know? The less hustlin' you do, the less of a chance you have of gettin' it.

Typically, while those who use this strategy refrain from hustling, their drug use increases, they engage in unprotected sex with a partner, or both. The likelihood of this happening is also predicated on having the financial means to take time off: something not all hustlers have the option to do.

Fourth, frequent testing for HIV is perceived by some hustlers as a viable precautionary measure. Scarface believes he is not at risk because he gets tested every six months. Since he has been tested nearly a half dozen times and each time the result has been negative, he does not need to concern himself. He feels as long as he is selective in his choice of clients and is what he terms "careful" about his drug use (in that he cleans his needles with bleach), he is in no danger. When I ask him what would happen if he received a positive test result, he states, "That ain't gonna happen, but if it did? I guess it would be time to make some changes in my lifestyle." Obviously, regular testing does little to prevent infection, only to assess when it occurs. Moreover, negative test results do not necessarily mean he has not been infected.

### **TOUGHNESS/TROUBLE**

Toughness/Trouble refers to the boy's street reputation or being a "bad ass" (Katz 1989). While some may interpret this behavior as mere street bravado, a number of hustlers actually believe that their standing in the street culture will protect them from infected clients. The idea here is that since they have established a reputation in the area, an infected client would not dare risk the violent retaliation they would receive if they solicited him. Raul

has this to say:

Listen man, nobody in his right mind is gonna come around here and even think of fuckin' with me. I don't care if he's got AIDS or not. Anybody that comes around here knows the rules. And if I find out that anybody around here is tryin' to infect me or anybody else, well, let's just say I'll get them to think twice about it.

Despite these strongly held beliefs, almost everyone admits that infected clients do solicit hustlers. The difference of course is that hustlers who cannot spot an infected client are perceived as having less skill, being unlucky, or having reputation that is not a strong enough deterrent.

### **FATE**

Fate as a strategy is essentially a misnomer since there is an inevitability associated with HIV. That is, for a few hustlers there is a general acceptance of the risks of infection. They feel that since they are in the streets, engaging in a variety of high risk behaviors, it is simply a matter of time before they too become infected. They are convinced of this outcome and do nothing to change it. In some ways this is reminiscent of individuals who feel they have no control over their environment or work situation.

For example, in the same way that a coal miner accepts that a cave-in will eventually occur or they will develop a physical ailment, some hustlers tacitly accept that they will one day become infected. Thus, while some hustlers deny the possibility of becoming infected and others use a series of techniques to negate their risks, this group experiences an inevitability to their lives and do nothing to change its course. They feel that hustling is the only way for them to survive and they have no choice but to accept the risks.

### **AUTONOMY**

Finally, an interesting trend has emerged with regard to condom use. When outreach workers, police officers, social workers, health officials, and the like ask hustlers how they prevent infection, they unanimously state they use condoms. While this could be considered a success in terms of awareness of risks, consider what Flacco has to say about this:

Man this thing with condoms? That's what they think they're supposed to say. Some guys use



condoms, mostly gay guys, but we all know that when somebody comes around here and asks us what we do to prevent AIDS, we say condoms. If we don't, we'll have every motherfuckin' do-gooder comin' around here tellin' us about how we should do this and do that and they won't leave us alone. So we just tell them, 'yeah I use a condom with every single trick I pick up and I won't go with them if they don't want to use one.' But it's all bullshit. You and I both know that most of the hustlers out here don't use them. Besides they ain't a hundred percent anyway so a lotta guys figure why bother?

Thus, while the vast majority of boys state they use condoms, only one, Eddie, has ever had a ready supply to show me. And even though condom use is perhaps the most effective means of prevention for them, even those boys who do use them can be persuaded otherwise if the client is willing to pay more. In this way, many hustlers perceive that they retain control over the nature of their transactions. Just as Miller describes the emphasis on personal freedom and a disdain for authority, hustlers can, in their own way, feel as though they are in control of the situation rather than the other way around.

## CONCLUSION

Despite a long history, the study of male prostitution has been largely overlooked. Perhaps the group at highest risk of infection with the HIV virus, only recently have researchers turned their attention to this population. Many studies have concentrated on male prostitutes' knowledge of the disease: what the virus is, how one acquires it, and how one prevents infection.

Yet, despite being surprisingly well informed about the disease and its effects, many hustlers continue to engage in a variety of sexual and drug-sharing behaviors, seemingly without much regard for the potential consequences. It is this puzzling aspect of their behavior that has been the focus of this article.

While educating this population on the risks of infection is important, one must also consider the cultural climate in which this information is given. In other words, the problem lies not in awareness or understanding, but rather in translating that information to behavior. The attempts to educate male prostitutes in Times Square about the dangers of HIV/AIDS has been a success: they know more about the disease than ever before.

However, as I have tried to show in the preceding pages, the vast majority have continued to engage in their risky behavior and few have taken any adequate precautions. Thus, any attempts to reduce risk-taking within this population must also take into account how and in what way this information can be colored, distorted, or ignored in light of the context in which it is interpreted.

## REFERENCES

- Agar M 1980 *The Professional Stranger* NY: Academic Press
- Boulton M, R Fitzpatrick, G Hart, J Dawson, J McClean 1989 High Risk Sexual Behavior and Condom Use in a Sample of Homosexual Men in England. V International Conference on AIDS, Montreal, Quebec
- Calhoun T, B Pickerill 1988 Young male prostitutes: their knowledge of selected sexually transmitted diseases *Psychology J Human Behav* 25 3/4 1-8
- Douglas J 1972 *Research on Deviants* Beverly Hills: Sage
- Elifson KW, J Boles, M Sweat, W Darrow, W Elsea, RM Green 1989 Seroprevalence of human immunodeficiency virus among male prostitutes *New England J Medicine* 321 12 832-833
- Elifson KW, J Boles, M Sweat 1993 Risk factors associated with HIV infection among male prostitutes *Amer J Public Health* 83 79-83
- Hammersley M, P Atkinson 1983 *Ethnography: Principles and Practices* London: Tavistock
- Hollander H 1990 Transmission of HIV in body fluids. in PT Cohen, M Sande, P Volberding *The AIDS Knowledge Base* Waltham, MA: The Medical Publishing Group
- Karp DA 1980 Observing behavior in public places: problems and strategies. in WB Shaffir, RA Stebbins, A Turowetz eds *Fieldwork Experience: Qualitative Approaches to Social Research* NY: St. Martin's Press
- Katz J 1989 *Seductions of Crime* NY: Basic Books
- Kirscht JF, DP Haefner, SS Kegeles, IM Rosenstock 1966 A national study of health beliefs *J Health Human Behavior* 7 248-254
- Lauderback D, D Waldorf 1989 Male prostitution and AIDS: preliminary findings *FOCUS: Guide to AIDS Res* Jan 3-4
- Lifson AR, P O'Malley, N Hessel, S Buchbinder, L Cannon, G Rutherford 1990 HIV seroconversion in two homosexual men after receptive oral intercourse with ejaculation: implications for counseling concerning safe sexual practices *Amer J Pub Health* 80 1509-11
- Luckenbill D 1985 Dynamics of the deviant sale *Deviant Behav* 5 1-4 131-51
- McNamara RP 1994 Vials and tribulations: the effects of crack in male prostitution *Sociological Viewpoints* forthcoming
- Miller W 1958 Lower-class culture as a generating milieu of gang delinquency *J Soc Issues* 14 5-19
- Osmond D 1990 Homosexual transmission. in PT Cohen, M Sande, P Volberding *The AIDS Knowledge Base* Waltham, MA: The Medical Publishing Group
- Perloff L 1983 Perceptions of vulnerability to victimization *J Soc Issues* 39 2 41-61

- Perloff L, BK Fetzer 1986 Self-other judgments and perceived vulnerability to victimization *J Personality Soc Psych* 50 3 502-510
- Pleak RR, HFL Meyer-Bahlburg 1990 Sexual behavior and AIDS knowledge of young male prostitutes in Manhattan *J Sex Res* 27 4 557-587
- Reiss AJ Jr 1961 The social integration of queers and peers *Soc Prob* 9 2 102-120
- Ross M 1988 Social and behavioral aspects of male homosexuals *Medical Clinics of North Amer* 70 3 537-547

- Rotheram-Borus MJ, C Koopman 1991 Sexual risk behaviors, AIDS knowledge, and beliefs about AIDS among runaways *Amer J Publ Health* 81 2 208-210
- Sellin T 1938 *Culture Conflict and Crime* Bulletin No. 41 NY: Soc Sci Res Council 63-70
- Synder R 1978 The illusion of uniqueness *J Humanistic Psychology* 18 3 33-41
- Weinstein ND 1984 Why it won't happen to me: perceptions of risk factors and susceptibility *Health Psych* 3 431-57

## Half-Year Reviewers January - June 1994

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## READERS' INTERPRETATIONS OF AIDS STORIES IN THE PRESS: IMPLICATIONS FOR HEALTH PROMOTION AND SOCIAL POLICY\*

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### ABSTRACT

Reactions of college students to stories about AIDS appearing in the British press were analyzed in this exploratory study. Readers' responses appeared to be based on a negotiation process between the intent of the message sender (the reporter), message content (the text), readers' purpose, and the larger social context (newspaper policy, role of the media and norms of the society). The readers seem to operate within structural and institutional constraints and exhibit selective attention and interpretative biases. Communication of information about HIV infection via the press viewed as ongoing social activity filtered through, and integrated into, the receivers' daily experiences and frames of reference needs to be investigated further.

### INTRODUCTION

AIDS is very frightening and will continue to be so until a cure or vaccine is found. It not only results in premature death, but in the forfeiture of one's valued social goals. It also affects the fabric of society - adding an additional element of distancing between minority subcultures hit hardest by HIV and mainstream society.

In the post AIDS world, people try to protect themselves psychologically at the same time that they are trying to realistically appraise their own vulnerability. They do not always do an adequate job (Douglas 1985; Fischhoff et al 1984; Tversky, Kahneman 1974). They tend to underestimate low probability risks in their everyday lives, and worry instead about dramatic events reported in the media that also have low probability (Douglas 1985). Public opinion surveys conducted in the 1980s found that the media both defined reality and helped shape risk estimates among the uninformed and justified and reinforced existing views among those who already had formed their own set of biases or had been exposed to media messages over a long period of time (Nelkin 1991).

Thus, understanding how viewers and readers react to and process information is pertinent in the design of public health initiatives in the fight against AIDS as the media is the main source of the public's information on medical, scientific and technological problems in the public arena (Lemert 1981; Nelkin 1987; Short 1984; Troyer, Markle 1983; Witt 1983) and is likely to be believed (Robinson, Kohut 1988).

This paper is an *exploratory* investigation of how readers' interpretations of newspaper articles about AIDS influence their beliefs about:

1. their own vulnerability to contracting HIV,
2. the way people infected by HIV should be treated,
3. the social policies toward the AIDS epidemic that should be enacted.

While public health research has investigated the media's influence on the public's knowledge, attitude and behavioral changes on various public health issues (Jones et al 1980; Lemert 1981; Nelkin 1987), it has not focused on the direct link between the presentation of individual news stories and readers' reactions and how they are intertwined.

News is a human construct, a cultural product and the product of a set of institutional meanings. The news journalists act as gatekeepers between different publics. Reporters and editors choose what will constitute "news" for each edition of the newspaper. This selection process is based on intangible criteria and rests upon inferred knowledge about their readers, the society and professional ideology.

...news stories are coded and classified, referred to as their relevant contexts, assigned to different (and differently graded) spaces in the media, and ranked in terms of presentation, status and meaning. (Hall 1981 148).

In order for an audience to accurately decode a message, writers need to draw upon their reservoir of cultural and social learning, encode it in an appropriate format so that the connection between readers' experiences and writers' intended can be executed (Hall 1980). If the readers are not aware of the relevant referent system, then they cannot decode the message (Leiss et al 1986).

For journalists, the society is bureaucratically structured so that they carry around in their heads a map of relevant sources for any type of event that would be newsworthy (Fishman 1980), e.g. The Centers for Disease Control in the U.S.; The Health Education Authority in the U.K. In order to understand what is happening and what is important, reporters rely on the same procedures

followed by the relevant bureaucrats as their own schemes of interpretation while writing a story.

...as a practical consideration in doing investigative work reporters will not consider that different versions of events indicate different realities. (Fishman 1980 117)

Instead the media adopts a mode of selection "which diffuses the reality of alternative conceptions of the social order" (Cohen, Young 1981 32). Most often the structures used to select and analyze events reflect the maintenance of the existing power arrangements.

Thus, when interpreting the possible influence of a newspaper story, at least four interacting variables should be investigated:

- 1) The larger social context - specific newspaper policy, characteristics of mainstream newspaper coverage and the social arena in which both the readers and newspapers operate.
- 2) The intentions of the writer, e.g. to educate, entertain, persuade or shock.
- 3) The text of the article, e.g. words used, images elicited, metaphors presented.
- 4) The readers - their positions in the social structure and their purpose in reading the article.

Readers often choose a "preferred reading" or risk messages by taking out of context words crucial to the intended meaning or by selectively remembering those stories whose overt messages are congruent with their own beliefs. Each reading consists of a decoding - a process of negotiation between the intent of the writer - the content of the text and the psychological and social significance attached to the act of reading (Liebes 1989; Peck 1989). Some readers may search for information on which they can base a decision, others read in order to formulate an opinion, reinforce existing feelings or seek reassurances. Multiple images in the text allow room for a multitude of reactions, some of which may even be diametrically opposite to those the writer wants to create. Thus, readers may be predisposed to accept certain messages, to hone in on key words consonant with their desires and belief systems and to change their opinions within

these parameters.

The negotiation process between reader and text in order to ascertain meaning is likely to be neither idiosyncratic nor random. Instead, readers operate within certain structural and institutional constraints based on their social experiences and place in the social hierarchy. These constraints lead to a filtering of messages, determining those that are systematically selected and framed and those that are under emphasized or rejected (Liebes 1989).

The social context of the society is likely to pervade all aspects of the reader-interpretation process; coloring the sender's perceptions, the text of the message and the repertoire of frames available from which the reader can choose and remain within the normative domain. For example, the risk of AIDS is superimposed on a complex world where high-risk technology and its inherent risks are endemic (Perrow 1984). Moreover, an underlying distrust of the scientific community, corporations and governmental regulatory agencies permeates discourse (Dietz et al 1989). The complexities and variations in the reader-text nexus need to be kept in mind when evaluating the impact of the press on health related beliefs and attitudes.

Furthermore, the media itself both reflects and creates a health/social policy issue that has an evolving culture expressed as metaphors, catch phrases, visual images and moral appeals (Gamson, Modigliani 1989). The media can influence public opinion in two ways. First, by setting an agenda, it influences the public in determining the issues that should be of concern. Second, it affects how the public thinks about these issues by presenting and embellishing dominant clusters of elements indicative of specific viewpoints (Liebes 1989).

For example, British society and the British Press are blatantly more homophobic than American society (Pearce 1981; Watney 1988) and the British tabloids pay scant attention to their weak code of journalistic ethics (Meldrum 1990). In the UK, British Press coverage of AIDS "blocks out any approach to the subject which does not conform in advance to the values and language of a profoundly homophobic culture...." (Watney 1988 52). Their reporting of the HIV epidemic seems to fit Stanley Cohen's (1972) concept of "moral panics." Cohen suggests that periodically a condition becomes defined as a threat to social values and its nature is presented in a

**Table 1: Types of Articles About AIDS in Three British Daily Newspapers For Sixteen Weeks in 1988**

	The Sun	The Daily Mail	The Independent	Total
Human Interest	21	14	11	46
Informational-Editorial	5	19	25	49
Business	1	5	7	13

**Table 2: Types of Articles About AIDS in Three British Sunday Newspapers For Sixteen Weeks in 1988**

	News of the World	The Mail on Sunday	The Observer	Total
Human Interest	17	1	5	23
Informational-Editorial	3	7	9	19
Business	0	0	2	2

stereotypic manner which can produce changes in legal and social policy.

But Great Britain does not have a monopoly on homophobia. Members of the extreme right in the United States voiced their anti-gay attitudes freely.

It is a short step from seeing AIDS as an inevitable result of deviance to claiming that sufferers from AIDS have brought it upon themselves, and, by another short step, that AIDS is a just punishment for the sin of deviance. (MacKinnon 1992 165)

Jerry Falwell called AIDS God's punishment for homosexuals (MacKinnon 1992 165) and Pat Buchanan published a vitriolic piece about the "Gay Plague", referring to the epidemic as a wrath of God (Kinsella 1989 263). This is not surprising as during the 1980s, the UK and the USA were in the throes of Thatcher and Reagan's brand of conservative morality (MacKinnon 1992).

Newspapers, furthermore, develop personal styles and a type of readership. They focus on breaking news and dramatic events (Hilgarten, Bosk 1988; Krinsky, Plough 1988). When an epidemic of the proportion of AIDS occurs, the drama of the story is often a prime ingredient. The focus on breaking news discourages detailed coverage of long-term issues (Gans 1979; Sandman 1986; Sandman et al 1987).

### AN EXPLORATORY INQUIRY

This exploratory inquiry looks at written reactions of college students to AIDS stories in order to understand how the four variables - social context, writers' intentions, specific text, and reader characteristics and goals - interact in decoding and interpreting messages as part of the reader's negotiation process. It is exploratory in nature and at this stage attempts to clarify issues for further investigation, rather

than be generalizable.

### METHODS

All AIDS stories appearing in three daily British national newspapers and three British Sunday papers were collected for two periods totalling 16 weeks in 1988. The first period started with the onset of the Health Education Authority's AIDS media campaign on February 17, 1988; the second commenced with the International AIDS conference held in Stockholm on June 12, 1988.

The selection of newspapers was based on the advice of the Health Education Authority. *The Sun*, *The Daily Mail*, *The Independent*, *The News of the World*, *The Mail on Sunday*, and *The Observer* were suggested as representing both the spectrum of political opinion and style of AIDS coverage, e.g. tabloid, straight news or human interest stories. These newspapers had counterparts in the United States that reflected similar political perspectives and coverage.

AIDS articles for the weeks having the greatest press coverage of AIDS stories in the above newspapers were divided into three packets consisting of 13-15 articles each. All students in three sociology classes in an American college (61 females and 40 males) were given one of these packets to read and were asked to write their reactions to each story in their packet.

Three types of stories appeared in both the U.S. and the U.K. papers, but the degree and consistency of stereotyping, exaggeration, misinformation and homophobia were greater in the U.K.

### Human Interest Stories

The focus is on the life or lives of individuals. Often these are the stories with the scare headline and support the grossest stereotypes. A *New York Post* headline "AIDS

MONSTER" is typical of this genre.

### Information Stories

These mainly present "facts" to the readers about government funding, number of AIDS cases, scientists' predictions about when an AIDS vaccine might be developed. Some of the "facts" were misleading, such as using AIDS and HIV infected interchangeably which was common practice. Loaded words and slanted coverage were also used in these articles. For example, a *Daily Mail* article claims that the Health Education Authority targeted heterosexuals for health promotion campaigns rather than homosexuals, who were the ones at risk. Emotive words such as alarming, victim, plague, epidemic, scary, menace, fault, innocent were liberally used by reporters in the human interest articles and, to a lesser extent, in the news stories.

### Business Articles

These deal with such topics as the development of new AIDS related drugs coming on the market, the cost of insurance policies for young, single males and increases in the sales of condoms. These stories emphasized the financial aspect of the epidemic for businesses, were usually written in a straightforward style and were primarily located in the business section.

After reading each article, students were asked to write which words, phrases, information or arguments influenced their opinions on: 1) being friends with someone who was HIV positive, 2) working with someone who was HIV positive, 3) having an AIDS Hospice or home for babies with AIDS located in their neighborhood, 4) government funding for support services for AIDS patients, 5) government funding of AIDS research, 6) mandatory AIDS tests for job applicants, and 7) mandatory AIDS tests for insurance applicants. These questions dealt with attitudes toward personal social distance, commitment to social responsibility toward others in the society and protection of the individual's right to privacy. The respondents were also requested to explain why the articles did not influence them and to summarize their reactions after reading the entire packet.

Two main reasons governed the decision to use British newspaper articles, written for the British public, as the material presented to American students for their reactions. One was the attempt to limit bias. Students in New

Jersey were likely to be familiar with *The New York Times*, *The New York Daily News*, *The New York Post* and New Jersey papers such as *The Newark Star Ledger*, and *The Trenton Times*, which would be American equivalents of the British newspapers used in this study. If material from these newspapers were used, it would be difficult to separate the students' reactions to the text, headlines and placement of articles from their expectations associated with those newspapers. Thus, asking American students about their reactions to articles in unfamiliar British papers should reduce their preconceived notions of what messages to expect.

Second was to see how underlying prejudice toward gays and minority groups (that otherwise might not be expressed) could influence the reader's decoding process. Fears generated by "yellow" journalism run rampant can release latent prejudice (Smithurst 1990). Some progress toward acceptance of divergent life-styles and cultures was being slowly made in parts of the United States, despite the opposition of the Moral Majority. What was unclear was the extent and depth of this acceptance. There is reason to believe that substantial prejudice still exists as findings from a Roper survey

suggest that the role of attitudes toward homosexuals should be at the center of future explorations of the relationship between the media coverage of AIDS and public opinion. (Stipp, Kerr 1989 98)

While using articles from the UK addresses methodological issues pertaining to the text being viewed, the use of a captive student population involves other possible kinds of biases. The frame students use in decoding articles may differ when they are reading for a required assignment rather than of their own volition. Also, students may fake reactions just to have something to say. To offset the possibility of faking, students were told beforehand not to expect that all articles would influence them and to indicate when they did not think that they were influenced by a specific story. Many availed themselves of this option.

### FINDINGS

While the writer's intentions, textual material, reader's purpose and social context are always part of the reader's decoding and interpretative process in the negotiation of

meaning derived from the print media, these factors are not always of equal significance. One, or more, can dominate the negotiation process, even when the stories cover one major topic. This can be seen from the readers' responses.

### The Text: Facts or Fancy?

The text of the articles appeared to influence many of the students. Pieces of information that were ambiguously worded or taken out of context frequently led to substantial misunderstanding. For example, an article in *The Observer* provocatively titled "Danger of the AIDS Virus Super Carriers" (March 6, 1988) also illustrated the impact of the text on the reader. The story reported on a scientist's explanation of the *variability of transmission rates*. Both the title and the information led many readers to focus on one aspect, not necessarily the point the author was trying to make.

This is scary because only after one sexual contact a person contracted AIDS. What would happen if one night at a party I got drunk and had sex with the girl who had AIDS and I got infected....The reason I am uncertain about being friends with someone is let's say she is a girl and one night something happens.

Again others focused on casual contact even though the article was discussing sexual contact.

I was influenced by the use of documentation in this article....This article strengthened my fear of casual contact which made me reconsider being friends with AIDS victims.

The quote "Quite simply, there are people who just happen to be extraordinarily infectious" influenced my opinion. Some jobs may give more opportunities than others to pick up the virus and with these extremely infectious people in the environment - I don't think it's safe.

### Writer's Intentions: The Many Facets of Persuasion

Along with the text, perceptions of the writer's intentions also played a dominant role in respondents' interpretations. Both the reporter's perspective and the newspaper's political stance affected extent and coloring of coverage. The British Medical Authority and the medical community were often used as the

scapegoats for supposedly mishandling the AIDS crisis. For example, one brief article (*The Sun*, Friday, March 11, 1988) stated that some general practitioners did not mention AIDS on the death certificate "to spare relatives extra grief" and that this under reporting had led to an underestimation of the number of AIDS related deaths. This seemingly "objective" piece of information, however, was reported under the headline "AIDS COVER-UP CLAIM." The first paragraph further reinforced a "cover-up scenario" rather than a "sensitivity to clients feelings" perspective.

AIDS is killing more people than thought because of a cover-up by doctors, it was claimed yesterday. (John Kay, *The Sun*, March 11, 1988 13)

Several students accepted the "cover-up" scenario at face value and even extended the interpretation. The second quote refers to an AIDS cover-up protecting patients rather than their families after the death of a loved one, while the third quote describes a *mass cover-up*.

I was surprised to read that doctors would be involved in a "cover-up" concerning AIDS deaths.

...the fact that doctors are covering-up for AIDS patients bothers me. If the doctors aren't being honest, then how can tests, census, and research be accurate?

This article can illustrate the mass cover-up that is occurring in the name of human condolence, and humanity, dignity and respect.

Judging from prior comments about the "AIDS Supercarrier" and "Cover-Up" stories, some students accepted information presented in a biased fashion or associated with an authority figure as being accurate. An example of this was *The Mail on Sunday's* exclusive feature on the Masters and Johnson book *Crisis: Heterosexual Behavior in the Age of AIDS* where the more far-fetched inferences about becoming infected through casual contact were presented in bold-faced headlines as being the latest and most accurate scientific truths from these great experts. In the United States, *Newsweek* magazine also put this misinformed and misguided book on its cover. A typical reaction of the minority who believed Masters and Johnson was:

The only article that made me sway toward not wanting to have a friend with AIDS was the one concerning the Masters and Johnson study that you can get AIDS from kissing because many of my friends are of the opposite sex and a kiss can be out of friendship.

A few others, however, seemed quite sophisticated and sensitive to choices of words and nuances in the articles they read. *The Daily Mail* attacked the book and its authors for their unscientific findings and unprofessional conduct. The student reaction to this article supported the criticism.

This book *Crisis: Heterosexual Behavior in the Age of AIDS* is very misinforming. Many will buy the book because it deals with questions that most people want to know about. But by publishing misinformation, and half truths, the authors are running the risks of having mass hysteria break out...

Furthermore, some were aware of the influence exerted by newspapers' political stances and journalists' personal perspectives. They delved behind the text and searched for the "behind the scenes" explanation of the writer's agenda.

To me, writers seemed uneasy about the disease AIDS. They did not know what to write or they seemed to beat around the bush, so to speak. For example, many of the authors of the articles used such words as, "probably," "implications" and "believed." These words mean a lot when you are writing an article on AIDS. Writers are telling me that the AIDS victims which they are writing about may or may not have contracted the virus from the unknown source.

### Newspaper Styles

The text and perception of reporters' intentions appeared to have influenced the readers' decoding and interpretation process. When the material was written as a straight news or human interest story, it was taken seriously. Many students, however, claimed to be "turned off" by scandalous headlines and strident language. They found the AIDS coverage of the rich and famous churned out by the tabloids to be ludicrous and tasteless. Neither did scare words like "alarming", "fear", and "menace" seem to trigger reactions. Instead of

the deliberately loaded words having a strong effect, the students indicated that it was facts, information, and scientific evidence that either reassured or frightened them.

After reviewing the assigned articles, it was clear that the type of reporting was the most important element. This determined if I formed new opinions, changed my previous opinions, or strengthened my already existing ones....The articles that were more intelligently written, well-documented and unbiased were most effective. I found this type of reporting to influence me much more.

One respondent even became very skeptical of any scientific data written in the tabloids because of their "yellow journalism" image.

The article ("Prize for AIDS Ref" *The Sun*, June 29, 1988) did not change my opinion at all. Even if it contained detailed medical statistics and had quotes from medical professionals, I could not believe it. I find it very difficult to believe anything written next to articles entitled "Selfish Bitch" and "I'm too Scared to Kiss." I doubt the truthfulness of the story.

### Social Norms at Work: The Guilty and the Innocent

The norms of society appeared to affect readers' interpretations of stories dealing with "AIDS victims." The press supported an invisible borderline between "us" and "them" (Watney 1988; Wellington 1988) - the ones who are the innocent victims of AIDS, receivers of blood transfusions, babies, hemophiliacs, and the ones who deserve AIDS, the homosexuals, the intravenous drug users and prostitutes. A minority of the student readers reflected this conservative public. They were judgmental and differentiated between "innocent victims" who deserved help and understanding and "those who deserved what they got."

I only feel compassion towards AIDS victims when they contract the virus in a way that is not their fault. For example, a sickly patient needs a blood transfusion; the new blood is infected with the AIDS virus....

....I feel no compassion towards dope dealers that get infected, or a pregnant woman who does not exercise proper prenatal care by taking drugs. My heart breaks for the baby born to an



AIDS victim because there is no hope in the world for that child.

Human interest articles about "nice" people who had AIDS and even those about stigmatized members of society who were treated inhumanely strengthened feelings of compassion. A collection of human interest vignettes called "AIDS - Living With the Killer" (*News of the World*, March 27, 1988) evoked mainly sympathetic, but at times ambivalent, feelings reflecting the mixed messages in the readers' social worlds.

The most reassuring point in this article is that AIDS can't be spread as easily as the public seems to think. This fact strengthens my attitude toward working with HIV positive persons and befriending them to a degree. Through victims' comments, I realize they need to feel accepted by their families (obviously) and their peers. I certainly would try to make them feel accepted. If it weren't for my prejudice against homosexuals, I may have even felt bad for them.

### **Social Norms at Work: Not In My Back Yard**

Reaction to stories about hospices and homes for children with HIV infection also reflected ambiguities in society. Students seemed to factor conflicting emotions and values into the interpretation process. Fear of catching AIDS and fear of undesirable people (parents, families and friends of drug addicts who would visit an AIDS home for children or an AIDS hospice) were the reasons given by those opposed to having these facilities located in their communities. The information in the texts regarding these points as well as humane social attitudes toward the ill and dying, particularly toward children, also were salient. Furthermore, some students explicitly expressed awareness of their double standard - fearing a hospice for others but wanting one for themselves if they ever were unfortunate enough to develop AIDS.

I feel that homes for AIDS babies and AIDS hospice would be beneficial to the victims because they would be surrounded by people who understand what they are going through. They could provide support for each other. I am not quite sure where these homes could be located because of the uneasiness of the general public. I must say honestly that I am not sure whether or not I would feel comfortable with this kind of home in my neighborhood but then again

if I had the virus I think I would want a place like this to turn to.

### **Text-Reader Interaction. Mandatory Testing as a Panacea**

Self-interest, altruism and misinformation were threads students wove into the decoding process pertaining to articles about mandatory HIV testing for insurance and jobs. Students' attitudes toward mandatory testing were mixed, but in general their support increased after reading the articles. Approval of mandatory testing permeated HIV coverage by the British press. The reports, regardless of the accuracy of this position, "framed" mandatory testing as a way to retard the spread of HIV infection. This was congruent with the readers' desires to avoid contracting the infection. The coverage played on fear and panic while at the same time the text stressed the elimination or containment of AIDS, a universally accepted social value.

1st surgeon to get AIDS from surgery - proves everyone must be careful.... The fact that there is no case is a bit reassuring, but the fact that he was never tested may make mandatory testing seem logical.

Doctor 'First to Get AIDS in Operation' The title was enough influence for me. It's really frightening to think you can catch AIDS in surgery. It makes me not want to work with an AIDS patient being that I'm going into the field of Nursing.

### **DISCUSSION**

The essential problem with the mass media's coverage of AIDS is due to the historical accident that in the United States AIDS struck gay men first, even though worldwide, most transmission of HIV is through heterosexual contact. Thus, in the early years of the epidemic, no coverage or "Gay Plague" coverage was the norm in the United States and Britain. The media amplified and gave expression to anti-homosexual feelings and other kind of prejudice, reflecting strong taboos in American society, and even stronger ones in British society, about sex and drug taking (Meldrum 1990; Smithurst 1990).

In the first half of the eighties, the Reagan administration ignored the emerging HIV health crisis, refusing to listen to the government scientists who requested additional funding for research and treatment. The press also paralleled this reticence by deciding that

information about the spread of HIV did not deserve much coverage. When reporters did write an AIDS story, their writing strategies reflected their own membership in communities, particularly the pattern of identifying with schemes of interpretation supported by relevant bureaucracies. While interpretive strategies of readers also reflect membership in communities, these communities may, or may not, be the same as those of the reporters. Thus, readers belonging to various subgroups might use different "frames" to interpret the AIDS articles; decoding signifiers dissimilarly and focusing on disparate key words. This was shown by the reactions to the "AIDS surgeon" and Masters and Johnson stories discussed previously.

From their comments, some students in this sample appeared to adhere to the "logic of fear" - when fear dominates reason - (Eskola et al 1988), others seemed to belong in the "worried well" category (DiClementi et al 1986) and still others maintained what Mary Douglas (1985) refers to as a "strong but unjustified sense of immunity."

Respondents' attitudes regarding their own vulnerability to contracting AIDS, toward the treatment of individuals suffering from AIDS and their opinions about social policies toward the AIDS epidemic varied substantially and these mind sets interacted with the text to produce preferred readings. These perspectives need to be studied further with more rigorously designed studies. What are the characteristics of the people holding each "mind set?" What percentage of the public falls into each category? Are these categories more likely to be mutually exclusive or overlapping? What kind of health promotion would likely be most effective for members of each category?

A few additional findings also need to be investigated more fully. The public is apparently "of two minds" with regard to its fear of AIDS. Despite an increase in the percentage of people reporting that they knew someone who had AIDS, public opinion polls did not find a trend of increasing concern about AIDS as a problem for one's own health but some indication of an increasing concern about spread of AIDS beyond present at-risk groups to the general population (Rogers et al 1993). These diverse attitudes were expressed both in the newspaper articles and by the respondents depending on the reader's primary frame of interpretation.

Newspapers also placed their stories in a social context often expressed by the newspaper's style. For example, the tabloids - *The Sun* and *The News of the World* - are expert at simultaneously promoting closeness and distance between their readers and the central characters in their AIDS articles. By describing the hero, heroine, or victim as having similar daily life problems and fears as the general public, reporters are able to generate reader identification with them. At the same time, readers can distance themselves because their own life styles or social class positions are so far removed from those depicted in the press, e.g. a pornographic film star, a doctor who practiced in Zimbabwe, or a divorced, gay member of the peerage. One can speculate that readers' interpretation of this type of press coverage might help explain why some heterosexual couples appear to have only changed their sexual behavior slightly (Becker, Joseph 1988; Campbell, Waters 1987; Department of Health and Social Security, Welsh Office 1987) and why college students express little concern about getting AIDS from their present partners. After all, how many readers have slept with 1000 women or played around with Soho "toyboys"!

Furthermore, these speculations are compatible with attribution theory which acknowledges that if society is already hostile to the presumed agents of harm, the blame will be stronger (Douglas 1985; Hastings et al 1987). Data from a Roper Poll is consistent with the hypothesis that people who are prejudiced against homosexuals are more resistant to the media's messages about risk factors and how the disease is transmitted (Stipps, Kerr 1989). These prejudices against homosexuals and drug addicts showed up clearly in students' reactions to the human interest stories.

The emphasis on monogamous relationships in the press and in health promotion campaigns seems to have led some readers to place loved ones and strangers into entirely distance risk categories based on social distance rather than risk behavior criteria.

The article also pointed out again how AIDS can be spread through normal sexual intercourse. But this has no effect on me because I know who I am going with.

This is consistent with research findings indicating that people tend to cope with

dangers in everyday life by underestimating low probability risks in familiar situations (Douglas 1985; Fischhoff et al 1984; Tversky, Kahneman 1974).

While the press obviously influences its readers, it is difficult to conclude whether the media primarily clarifies or mystifies the public about significant public health policy issues. The evidence is mixed with regard to AIDS, as the accuracy of the coverage improved over time (Rogers et al 1993). A conclusion drawn in 1994 would not necessarily have been made in the mid-1980s.

In the early days of the HIV epidemic, the newspapers in both the United Kingdom and the United States framed their stories in several ways that needed to be overcome later. First, they often did not report HIV stories at all. Ignoring a story frames an event as much as reporting it as it then becomes transformed into a "nonevent." Then reporters emphasized AIDS as a gay disease. When it was evident that HIV could be contracted heterosexually, the emphasis was on intravenous drug users and prostitutes. Then the emphasis was on fear stories dealing with catching AIDS through casual contact. AIDS messages have been polarized, emphasizing everyone's vulnerability on the one hand, while on the other hand pointing the finger at "high risk groups," i.e. gays, drug users, Africans, Haitians who are in some sense considered immoral (Nelkin 1991).

Though many newspapers carried health education articles throughout the years, it is not clear how well these messages stood up when the constant barrage of scare stories repeatedly undermined the impact of the more reliable articles (Wellington 1988). Even after the expansion of AIDS coverage in the United States in 1986, when reporting became more comprehensive and accurate, there have been significant gaps in the reporting (Nelkin 1991). What is new is not necessarily newsworthy and incomplete information can have a serious negative impact on public social and health policy.

But, on the other hand, international evidence indicates that a hopeful pattern in AIDS coverage is emerging. Reporting on AIDS seems to have developed in three phases and these phases substantially differ in their provision of accurate and needed AIDS messages for the public. The first phase was based on fear, ignorance and prejudice, a second phase emphasized responsible reporting and the third emerging phase stresses scientific and policy

developments (Netter 1992).

Despite all the problems with inaccurate and stereotyped media coverage in the early days, the press has played a major role in informing, if not educating, people of the risk of HIV infection. Moreover, the media has set the agenda and influenced the way in which survey opinion polls addressed the issue of AIDS. The journalists then reported on the poll findings, further expanding their impact (Dearing 1989). Thus, journalists, directly and indirectly, played a significant role in framing social policy and health promotion messages regarding AIDS.

In conclusion, this exploratory study lends support to the position that delivery of direct and indirect AIDS health behavior messages via the press can be viewed as an aspect of ongoing social activity negotiated through the interaction of the writer, text, reader and social world and filtered through and integrated into the receivers' daily experiences and frames of reference. Furthermore, experience indicates that when the lenses of the encoder and decoder are not "tuned in" to a perceived health problem, particularly one that is not part of their experience, or one that invokes latent social prejudices and taboos, the press cannot be counted on as a viable tool of the public health community. In fact, the media may have already failed in sufficiently alerting their audiences to the next epidemic - tuberculosis.

## REFERENCES

- Becker M, JG Joseph 1988 AIDS and behavioral change to reduce risk: a review *Amer J Public Health* 78 4 394-410
- Campbell MJ, WE Waters 1987 Public knowledge about AIDS increasing *Brit Medical J* 294 892-893
- Cohen S 1972 *Folk Devils and Moral Panics: The Creation of the Mods and Rockers* London: Martin Robertson
- Cohen S, J Young 1981 The process of selection. in S Cohen, J Young eds *The Manufacture of News: Social Problems, Deviance and the Mass Media* rev ed Beverly Hills: Sage
- Department of Health and Social Security and Welsh Office 1987 *Monitoring Response to the Public Education Campaign, February 1986-February 1987* London: HM Stationery Office
- DiClemente RJ, J Zorn, L Temoshok 1986 Adolescents and AIDS: a survey of knowledge, attitudes and beliefs about AIDS in San Francisco *Amer J Public Health* 76 1443-1445
- Dietz T, PC Stern, RW Rycroft 1989 Definitions of conflict and the legitimation of resources: the case of environmental risk *Sociological Forum* 4 1 47-70
- Douglas M 1985 *Risk Acceptability According to the Social Sciences* NY: Russell Sage

- Eskola A, M Jyhliä, K Weckroth 1988 On the logic of AIDS. unpublished paper, Department of Sociology and Social Psychology, Department of Public Health, University of Tampere, Finland
- Fischhoff B, S Lichtenstein, P Slovic, S Derby, RL Keeney 1984 *Acceptable Risk* NY: Cambridge U Press
- Fishman M 1980 *Manufacturing the News* Austin, TX: U Texas
- Gamson W, A Modigliani 1989 Public opinion on nuclear power: a constructionist approach *Amer J Sociol* 95:1-37
- Gans HJ 1979 *Deciding What's News* NY: Random House
- Hall S 1980 Encoding/decoding. in S Hall et al eds *Culture, Media, Language* London: Hutchinson
- \_\_\_\_\_ 1981 The world at one with itself. in S Cohen, J Young eds *The Manufacture of News* Beverly Hills, CA: Sage
- Hastings G, D Leather, A Scott 1987 AIDS publicity: some experiences from Scotland *Brit Medical J* 294 48-49
- Hilgartner S, CL Bosk 1988 The rise and fall of social problems: a public arenas model *Amer J Sociol* 94 1 53-78
- Jones EF, JR Beniger, C Westoff 1980 Pill and IUD discontinuation in the United States, 1970-1975: influence of the media *Family Planning Perspectives* Nov/Dec 12 293-300
- Kinsella J 1989 *Covering the Plague: AIDS and the American Media* New Brunswick, NJ: Rutgers
- Krimsky S, A Plough 1988 *Environmental Hazards: Communicating Risks as a Social Process* Dover, MA: Auburn House
- Leiss W, S Kline, S Jhally 1986 *Social Communication in Advertising* NY: Methuen
- Lemert JB 1981 *Does Communication Change Public Opinion After All?* Chicago: Nelson-Hall
- Liebes T 1989 On the convergence of theories of mass communication and literature regarding the role of the reader. 123-144 in B Dervin, M Voigt eds *Progress In Communication Sciences* Norwood, NJ: ALEX
- MacKinnon K 1992 *The Politics of Popular Representation: Reagan, Thatcher, AIDS, and the Movies* Rutherford, NJ: Fairleigh Dickinson
- Meldrum J 1990 The role of the media and the reporting of AIDS. 85-98 in B Almond ed *AIDS: A Moral Issue* London: Macmillan
- Nelkin D 1987 *Selling Science* NY: WH Freeman and Co
- \_\_\_\_\_ 1991 AIDS and the news media *The Milbank Qrtly* 69 293-307
- Netter T 1992 The media and AIDS. A global perspective. 241-253 in J Sepulveda, H Fineberg, J Mann eds *AIDS Prevention Through Education: A World View?*?
- Pearce F 1981 The British press and the 'placing' of male homosexuality. in S Cohen, J Young eds *The Manufacture of News: Social Problems, Deviance and the Mass Media* rev ed Beverly Hills, CA: Sage
- Peck J 1989 The power of media and the creation of meaning: a survey of approaches to media analysis. 145-182 in B Dervin, M Voigt eds *Progress In Communication Sciences* Norwood, NJ: ALEX
- Perrow C 1984 *Normal Accidents: Living With High-Risk Technologies* NY: Basic Books
- Robinson M, A Kohut 1988 Believability and the press *Public Opinion Qrtly* 52 174-189
- Rogers T, E Singer, J Imperio 1993 The polls: poll trends, AIDS—an update *Public Opinion Qrtly* 57 92-114
- Sandman PM 1986 Explaining environmental risk *Report for Office of Toxic Substances of the United States Environmental Protection Agency* Nov
- Sandman P, D Sachsman, M Greenberg 1987 *Risk Communication For Environmental News Sources* New Brunswick, NJ: Rutgers University & Robert Wood Johnson Medical School
- Short J Jr 1984 The social fabric at risk: toward the social transformation of risk analysis *Amer Sociol Rev* 49 711-725
- Smithurst M 1990 AIDS: risks and discrimination. 99-111 in B Almond ed *AIDS: A Moral Issue* London: Macmillan
- Stipps H, D Kerr 1989 Determinants of public opinion about AIDS *Public Opinion Qrtly* 53 98-106
- Troyer R, G Markle 1983 *Cigarettes: The Battle Over Smoking* New Brunswick, NJ: Rutgers U Press
- Tversky A, D Kahneman 1974 Judgment under uncertainty: heuristics and biases *Science* 185 1124-1131
- Watney S 1988 AIDS, 'moral panic' theory and homophobia. in P Aggleton, H Homans eds *Social Aspects of AIDS* London: Falmer
- Wellings K 1988 Perceptions of risk - media treatments of AIDS. in P Aggleton, H Homans eds *Social Aspects of AIDS* London: Falmer
- Witt E 1983 Here, there and everywhere: where Americans get their news *Public Opinion* Aug/Sept 6 45-48

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## **WE'RE GOING TO DISNEY WORLD: CONSUMER CREDIT AND THE CONSUMPTION OF SOCIAL EXPERIENCE**

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### **ABSTRACT**

Consumer credit is an important facet of everyday social life. Public interest in material items, services, and social experience is facilitated by the instantaneous availability of the various commodities. Social experience is a unique product available through credit cards. Cultural wants and desires are marketed and made accessible to consumers through extended consumer credit lines. DisneyWorld, and its Disneyland forerunner, are prototypical models for escapist entertainment made financially available to average consumers through credit cards. This paper offers an analysis of consumer credit and how credit cards facilitate tourism and the consumption of cultural experience. A theoretical analysis of tourism, and the influence of culture, accompanies a discussion of how consumer credit (in the form of credit cards) enhances the marketing of DisneyWorld as a renowned cultural experience.

### **INTRODUCTION**

The development of consumer credit (as facilitating the purchase of products, services and experiences with the promise to provide future reimbursement) is symptomatic of social-economic changes occurring in post-industrial society. Post-industrial society is transformed through expanded demand for different goods and services. The resulting post-Fordist period, where evolving consumer demand is fulfilled, encourages manufacture and distribution of various consumer goods and invites expansion of the marketplace.

Sociologists or economists generally emphasize the mechanistic market manipulations and relationships between producer and consumer. However, the analysis offered in the discussion of leisure and tourism assumes that a social relationship exists between consumer culture and the consumption of tangible goods and intangible experiences. The credit card facilitates leisure and the acquisition of cultural capital through arranging expensive airline travel; car rental; the attainment of food, lodging, souvenirs, and specialized tours; and provides cash for unexpected emergencies. Further, the images and experiences offered in the travel experience encompass a staged authenticity transferring sightseeing into a cultural pursuit. Workers can only achieve the cultural experience through utilizing the credit card throughout the vacation or leisure activity.

The everyday conception of consumer credit eventually extends credit card ownership beyond the everyday use as a financial device enabling the purchase of tangible consumer goods. Consumer credit promotes and facilitates the acquisition of recreation activities, tourism and the search for alternative social experiences. Credit cards form the gateway for

accessing experiences previously unaffordable for the average consumer.

The normal sociological conception of consumer culture assumes that manufactured goods (or the products stemming from the concept of the production of consumption as advanced by Featherstone (1991 14) carry a specific exchange value justifying their pricing in the marketplace. Marx (1850) and members of the subsequent Neo-Marxist Frankfurt School (Horkheimer, Adorno 1972; Lefebvre 1971; Marcuse 1964) reiterate the establishment of culture value inherent in the creation of markets for new commodities.

Featherstone (1991 14) reiterates the tendency toward product diversification, promotion of new consumer goods and services, and consumption of the specific commodities (otherwise known as post-Fordism). The relationship between the creation and consumption of new products, leisure time and cultural value is rather interesting. As Schor (1991) observes in a recent book on the decline of leisure time, leisure was commoditized into a diversified product incorporating many different goods and services. Productivity increased while leisure was transformed into a scarce commodity. Schor refers to increased productivity:

Since 1948, productivity has failed to rise in only five years. The level of productivity of the U.S. worker has more than doubled. In other words, we could now produce our 1948 standard of living (measured in terms of marketed goods and services) in less than half the time it took in that year. We actually could have chosen the four-hour day. Or a working year of six months. Or, every worker in the United States could now be taking every other year off from work—with pay. Incredible as it may sound, this is just the simple arithmetic of productivity growth in

operation. (Schor 1991 2)

Schor continues by noting that the narrowing of time for leisure time pursuits has a significant impact on the marketing of specific alternatives:

But between 1948 and the present we did not use any of the productivity dividend to reduce hours. In the first two decades after 1948, productivity grew rapidly, at about 3 percent a year. During that period, work time did not fall appreciably. Annual hours per labor force participant fell only slightly. And on a per-capita (rather than a labor force) basis, they even rose a bit. Since then, productivity growth has been lower but still positive, averaging just over 1 percent a year. Yet hours have risen steadily for two decades. In 1990, the average American owns and consumes more than twice as much as he or she did in 1948, but also has less free time. How did this happen? Why has leisure been such a conspicuous casualty of prosperity? In part, the answer lies in the difference between the markets for consumer products and free time. Consider the former, the legendary American market. It is a veritable consumer's paradise, offering a dazzling array of products varying in style, design, quality, price, and country of origin. The consumer is treated to GM versus Toyota, Kenmore versus GE, Sony, or Magnavox, the Apple versus the IBM. We've got Calvin Klein, Anne Klein, Liz Claiborne, and Levi-Strauss; McDonald's, Burger King, and Colonel Sanders. Marketing experts and advertisers spend vast sums of money to make these choices appealing—even irresistible. And they have been successful. In cross-country comparisons, Americans have been found to spend more time shopping than anyone else. They also spend a higher fraction of the money they earn. And with the explosion of consumer debt, many are now spending what they haven't earned. (Schor 1991 2)

Schor (1991 3) then points out that the American standard of living is the highest in the world. Schor also observes that increased work hours result when manufacturers seek even more productivity and workers need additional income for satisfying consumer debt and increased spending. Leisure (or the consumption of free time) is sharply curtailed and therefore becomes a more valuable commodity.

Schor (1991) staunchly believes that the

decline in leisure time places greater premium on the limited time that American workers can enjoy. Workers utilize alternatives provided by the consumer culture in enjoying their limited leisure time. Consumption is commoditized in terms of its cultural value. Featherstone offers an interesting Marxist interpretation of the relationship between leisure and exchange value:

Leisure time pursuits, the arts and culture in general become filtered through the culture industry; reception becomes dictated by exchange value as the higher purposes and values of culture succumb to the logic of the production process and the market. Traditional forms of association in the family and private life as well as the promise of happiness and fulfillment, the 'yearning for a totally different other' which the best products of high culture strive for, are presented as yielding to an atomized, manipulated mass who participate in an ersatz mass-produced commodity culture targeted at the lowest common denominator. (1991 14)

As Featherstone claims, the post-modern interpretation of leisure and culture emphasized the view that

emphasis shifts from production to reproduction, to the endless reduplication of signs, images and simulations through the media which effaces the distinction between the image and reality. (1991 15)

Consumer society becomes cultural as social life becomes deregulated and social relationships become more variable.

The postmodern view of consumer credit and consumer culture views credit cards as variable symbols useful in extending cultural capital (or credit cards as quantifiable financial instruments). The credit card extends the acquisition of cultural experience by making the unaffordable "affordable." Few people will express surprise with the notion that credit cards act as symbols enabling us to consume other symbols of consumer and popular culture.

Experiences made accessible through consumer credit dictate a new realm of social reality. Consumer culture bridges the cultural bound elements of our sensual society with economic propriety. Each tourist or lifestyle device examined in this section embodies cultural experiences that are facilitated or made

accessible through consumer credit. In some cases, experiences are marketed as tangible products. Some examples of cultural products intended for consumer consumption include the proliferation of economically profitable theme parks. Zukin's (1991) examination of Disneyland as a cultural manifestation planned for economic gain is one such example. One could also apply these ideas as a rationale for why Jim and Tammy Fae Bakker's Heritage USA was the second most attended theme park in the United States.

The economic facilitation of consumer credit promotes the accessibility of these niche marketed cultural alternatives. The link between actual tourist sites and para-social services rests with a consumer desire for real or figurative escape within an ever changing social world. DisneyWorld met consumer desires through marketing promotion and emphasis upon intangible consumer desires (e.g., the fulfillment of cultural fantasies or the immediate consumption of heavily marketed cultural images, such as the opportunity to attend world renowned stage spectacles or actually meet legendary Disney characters).

These artifacts, as derived from a post-modern society, are meaningless unless we reflect on the social historical process leading to current cultural expression. The original relationship between marketing and consumer purchasing decisions consisted of advertising goods for sale. Greatly expanded manufacturing capacity and consumer desires lead to more choices within the marketplace. The post-Fordist period ushered in an era of diversified products and choices available for consumer acquisition. The cultural desires prompting acquisition of the produced goods and services was facilitated through the introduction of installment credit and eventually the distribution of credit cards. Consumers can utilize credit cards in lieu of available cash. Theme parks are immediately affordable for the average consumer.

Instantaneous consumer choices fit right into the postmodern conception of American society. Contemporary society is a place noted for ever-changing cultural patterns. Advertised products are the result of predetermined marketing efforts designed for pin pointing what consumers will purchase. One example of this is a device known as "The Club." It fits on the automobile steering wheel to prevent auto theft. "The Club" was phenomenally successful upon introduction into the

marketplace. Since then, there have been numerous imitations produced by competing companies. The original manufacturer countered with the marketing of the same product in various colors. The last step was successful in redefining the product according to appearance instead of original utility.

Human experience works according to the same principle. The introduction of the original Disneyland brought forth cultural alternatives enabling the formation of redefined consumer cultural experiences. Consumer credit as an economic resource facilitates the immediate acquisition of knowledge, para-social experience, or a temporary escape from the realities of everyday life. The imagery associated with interactional cues from actual surroundings in theme parks or malls encourages exposure to the product of human experience and encouraged consumption. The inevitable outcome of niche marketing is a myriad number of personal choices reflecting products gaining cultural acceptance at any given time.

#### **"TOURISM" AND THE DEVELOPMENT OF CONSUMER CULTURE**

Acceptance of the postmodern condition wherein cultural choices and consumer purchasing choices shift over time characterizes the transitory nature of American society. Economic power in the form of credit cards and installment credit provides a means for consuming the latest products, trends or experiences. The formation of cultural capital results in consumable social alternatives immediately unaffordable without various credit instruments.

In a sense, we are all "strangers in a strange land" (a cliché derived from a popular science fiction novel written by Robert Heinlein 1959). The cultural objects or environments that we consume give meaning to our lives. In effect, we are reminded of the philosophy espoused in *Field of Dreams*. "You build it and they will come" is an appropriate corollary to the development of the tourist industry. Cultural events provide a context of references shared or sought by numerous people. Americans define their lives in terms of a special experience enjoyed while on vacation, a meaningful dinner with friends, mutual activities enjoyed in a unique place or shared interaction in the company of other people or through the auspices of a telephone.

Veblen (1967) was correct in positing the assumption that the consumption of particular

goods or things was conducive to building status formations. MacCannell (1989) takes the analysis one step further in referring to people as fellow travelers seeking everything that life offers. MacCannell (1989) suggests that the "tourist" is "one of the best models available for modern-man-in-general." In effect, the tourist represents how an average person makes his or her way through everyday life. MacCannell (1989) imposes an anthropological view of social existence based upon structural analysis. Tourist attractions represent "an unplanned topology of structure that provides direct access to the modern consciousness or 'world view.'" In other words, tourism serves to structure the creation of social meaning. MacCannell (1989) utilizes formulations of Goffman, Garfinkel, Veblen, Marx, Simmel and other social theorists in demonstrating how experience, rather than Veblen's reliance upon social class, dictates the social reality of everyday life.

Further, MacCannell (1989) compares tourist attractions with the "religious symbolism of primitive peoples." He is basically viewing modernity as "disorganized fragments, alienating, wasteful, violent, superficial, unplanned, unstable and unauthentic." The worldwide shift in national governments incorporate nostalgia and a search for authenticity. MacCannell sees

the empirical and ideological expansion of modern society to be intimately linked in diverse ways to modern mass leisure, especially to international tourism and sightseeing. (in Featherstone 1991 3)

MacCannell (1989) places particular significance in Goffman's model of everyday activity. MacCannell repeatedly refers to Goffman's (1959) conception of front stage and back stage as the basis of understanding everyday social reality. MacCannell is interested in the structure of social space. Tourist activities are centered around relating with "the natives" in a quest for "authentic experiences, perceptions and insights." The tourist is trapped within an endless process wherein the truth about native populations is illusive. Economic instruments (in the form of consumer credit) aid and abet in the perpetual search for social meaning through the acquisition of actual or para-social experience in the form of cultural capital.

Economic formation and the implicit shifts

emphasizing the consumption and experience as a tangible product incorporates the development of consumer culture. Tourism, as facilitated by available consumer credit, enables the consumption of hitherto unaffordable experiences. The consumer culture transforms places or experiences into symbols for intrinsic cultural capital. Peer value or self fulfillment is associated with visiting places like DisneyWorld.

### CULTURAL IMPACT OF DISNEYMANIA

Perhaps the ultimate postmodern experience is found in an examination of Disneyland and DisneyWorld. The Disney organization constructed idyllic theme park settings offering the prototypical tourist setting. Tourism and the purchase of souvenirs, lodging or food is facilitated through the use of consumer credit. A family of four cannot easily afford \$49 admission per person, overnight hotel lodgings, food and other items without the use of credit cards.

Cultural capital and nostalgia are two important factors explaining the appeal of the Disney theme parks. The tourist attraction must offer a special appeal before travelers will spend their hard earned money. Cultural capital is built right into the appeal and image making efforts of Disney Productions and subsequent by-products. Featherstone (1991) explains that cultural capital is derived from economic and social values placed upon experiences and intangible elements linked with social prestige.

Disneyland and DisneyWorld operate according to a similar principle. Cultural capital in the case of Disneyland and DisneyWorld means that the environment transcends the economic value attached to admission, souvenirs and other tourist expenditures. The frequent utilization of consumer credit enables the physical and emotional purchase of experience. The tourists are actively consuming and buying the ideal experience offered by the theme park. Image makers at the Disney theme parks work towards establishing a product with appeal for the average tourist. The product in question is a spotlessly clean, well managed utopia wherein the problems of outside society are eradicated. The clockwork nature of the theme park environment and the staged authenticity of past, present or future motifs comprise a prototypical postmodern setting. Disneyland and DisneyWorld are transformed into ersatz cities. A suspension of



disbelief turns the idealized vision of society into a real experience in the mind of numerous tourists.

On a more universal level, Zukin views the architectural restructuring of inner city areas (and, by extension, the idealization of theme parks as realms of power) as a postmodern reconstruction of

socio-spatial relations by new patterns of investment which lead to counter-tendencies to urban decentralization through the redevelopment of inner city areas and docklands, which become gentrified by members of the new middle class and developed as sites of tourism and cultural consumption. (in Featherstone 1991 107)

In effect, the environment becomes museumified and equivalent to a theme park atmosphere.

Interpersonal escape is one of the commodities purchased by consumers through utilization of credit devices. Featherstone underscores the point with a deliberate comparison between fairs and the experiences offered by department stores or other exhibitions:

The excitement and fears the fair can arouse is still captured today in films which highlight the way in which these liminal spaces are sites in which excitement, danger, and the shock of the grotesque merge with dreams and fantasies which threaten to overwhelm and engulf the spectators. Today fun fairs and theme parks such as Disneyland still retain this aspect, albeit in a more controlled de-control of the emotions, where adults are given permission to behave like children again. (1991 80)

The problem does not end with the idealization of experience permitting an exchange of economic transaction for cultural transaction. The task remains for the efficient construction of the staged authenticity. Popular appeal leads to a modernization of travel devices moving crowds from one area into another at Disneyland and DisneyWorld. Ritzer analyzes how efficient theme parks are equated with McDonald's as organizations establishing rational procedures for controlling the flow of people:

New Heights in people-moving have been reached by modern amusement parks, particularly Disneyland and DisneyWorld. At DisneyWorld and Epcot Center in Florida, for

example, a vast highway and road system funnels many thousands of cars each day into the appropriate parking lots. Once the driver has been led to a parking spot (often with the help of information broadcast over the car radio), jitneys are waiting, or soon will arrive, to whisk family members to the gates of the park. Once in the park, visitors find themselves on what is, in effect, a vast (albeit not self-propelled) conveyor belt which leads them from one ride or attraction to another. One may get off the larger "conveyor system" to enter one of the local systems that move people to a particular attraction. Once the attractions themselves are reached, the visitors find themselves on one conveyance or another (cars, boats, submarines, planes, rocket ships, or moving walkways) that moves them through and out of the attractions as rapidly as possible. The speed with which one moves through each attraction enhances the experience and reduces the likelihood that one will question the "reality" of what one sees. (1993 51-52)

Rationalization, efficiency and a staged authenticity capable of enhancing the cultural capital of the Disney theme parks are only one aspect of their appeal. Nostalgia and a look toward the future are another major reason for the success of these two major theme parks and their later spin-offs into resort areas, movie studios and Epcot Center. A tourist can visit Tom Sawyer's Island, the Main Street Cinema, or explore projected advances in nuclear physics, space travel and electronic devices. Featherstone most appropriately summed up the postmodern appeal of DisneyWorld:

If postmodern cities have become centres of consumption, play and entertainment, saturated with signs and images to the extent that anything can become represented, thematized and made and object of interest, an object of the 'tourist gaze', then it is to be expected that leisure activities such as visiting theme parks, shopping centres, malls, museums and galleries should show some convergence here. To take some examples, DisneyWorld is often taken as the prototype for postmodern simulational experiences and it is interesting to see that the format of moving between spectacular experiences (white-knuckle rides, hologram illusions etc.) and the simulation of historical national-founder or childhood worlds (the Magic Kingdom) or wandering through simulations of building, which

are chosen to symbolize selected national cultures (such as the Merry England Pub) or futuristic scenarios (EPCOT) in sanitized, highly controlled surroundings, has not only been imitated by theme parks around the world, but has also been merged with other formats such as museums. (Featherstone 1991 101-102)

The relationship between the postmodern aspects of Disneyland and DisneyWorld is further explained by Featherstone's (1991 103) reference to the relationship between consumption and leisure (a reflection of cultural capital). Featherstone begins the section with a discussion of The West Edmonton Mall in Canada and the Metrocentre in England. He would no doubt add the recently opened Mall of America in Bloomington, Minnesota. Featherstone comments that the people become audiences moving through imagery designed to represent "sumptuousness and luxury", or to "summon up connotations of desirable exotic far-away places, and nostalgia for past emotional harmonies."

Each of the sections is meant to invoke youthful feelings among adults bringing their children. Both Disneyland and DisneyWorld are divided into distinct sectors. The various sub-themes incorporated as separate sections include Tomorrowland, Fantasyland, Adventureland, Liberty Square and Main Street. The attractions combine many theme rides (rocket ships, submarines, automobiles) and thrill rides (space mountain). In addition, Michael Jackson's 3-D attraction *Captain EO* is offered at Disneyland and DisneyWorld. Disneyland recently added Toonland, a section containing cartoon characters starring in *Who Framed Roger Rabbit*.

The Disney organization encapsulates a history of the Disney empire with extensive background detailed in their training manual. (The material was obtained in February 1992 after contacting Disney representatives.) Disneyland opened in 1955. The original Disneyland offered a connection between the past and hopes for the future. A regular Disney series on the television networks drew people to the theme park. Walt Disney expanded the reach of his theme park with several attractions at the 1964 World's Fair in New York. "Great Moments With Mr. Lincoln" (a truly postmodern spectacle where an electronic robot replicated Abraham Lincoln's notable speeches) and "It's a Small World After All" were a few of the famous attractions offered at

the fair. Both attractions are staples at Disneyland and DisneyWorld.

Major planning for DisneyWorld started in the mid-1960s. DisneyWorld was a portion of an extensive Walt Disney World Resort. The facility opened on October 1, 1971. Some early features of the development included the Magic Kingdom, the Contemporary Resort Hotel, and the Polynesian Resort. Space-Mountain, the Disney Inn, Walt Disney World Village, Typhoon Lagoon, Pleasure Island, Disney Village Marketplace, and numerous resort areas followed.

Epcot Center opened in 1982. The theme park is a showcase for new technologies and cultures of man. Epcot Center emphasized the relationship between humans and the environment. The Epcot resort area included a Yacht and Beach resort, the Walt Disney World Dolphin, the Walt Disney World Swan and Disney's Caribbean Beach Resort.

More recently, the Disney organization built theme parks in Japan (Tokyo Disneyland) and Paris, France (Euro-Disney). Both theme parks charge higher admission charges than their American counterparts but are immensely successful.

The Disney-MGM Studios Theme Park was added several years ago. The area includes an active movie studio modeled after the long standing Universal Studio attraction in Southern California. Many television shows are also produced in the theme park. The theme park features many movie and television related rides (e.g., Indiana Jones Stunt Show, Beauty and the Beast, a StarWars Thrill Ride, and Teenage Mutant Ninja Turtles). The theme park also features a Superstar Television exhibit. In a real postmodern twist, visitors are electronically juxtaposed with videotape from "The Today Show", "Golden Girls", "General Hospital", "Howdy Doody" and even Johnny Carson on "The Tonight Show."

How do we explain the postmodern appeal of a Disney theme park and related economic implications? Aside from the previously discussed concept of experience drawing upon and creating cultural capital, the theme parks continually play upon childhood nostalgia and the "little boy or girl in all of us." Zukin (1991) and other urban sociologists emphasize the development of theme parks into idyllic micro-cosmic cities. The afore discussed Disney organization training manual amplifies DisneyWorld's considerable symbolic (or cultural) success in stating that Walt Disney

World Resort is more than a theme park. According to the text, "It is a worldwide legend." The manual then continues in a summation of all the postmodern attractions contributing to popular tourist acceptance and economic success.

The DisneyWorld marketing plan reflects the tradition of postmodern segmentation. Niche marketing is operative in the process. Each individual group has its own predispositions which must be analyzed and defined according to Disney's own marketing calculations. Discrete consumer categories are created and defined according to individual groups of different types of people, "each of which must be talked to in a different way." The specific groups are national, in-state, family, non-family, new markets and international. The consumer groups, all of which are categorizable according to discernible characteristics, are approached according to family size, travel distance, and monetary cost managed through credit card expenditures.

The message itself is a product of astute promotional efforts. A "campaign" recognizable throughout the marketplace is constructed for the general media campaign. The marketing section within the training manual specifically mentions the 1981 campaign celebrating the World Disney World Tencennial; the 1982 opening of Epcot Center; the 1986 15th anniversary party featuring a prize given to a guest every 15 seconds and a new car given away every day, all year long; and the 1988 theme highlighting the 60th birthday of Mickey Mouse.

The so-called "marketing mosaic" is based upon publicity derived from anything seen or heard in the news media (newspapers, magazines, television and radio). The marketing, in a version of the gatekeeper process, involves news releases and photographs packed into press kits and sent to newspapers around the country. Video press kits incorporating completed video stories are distributed to TV reporters. Press tours feature local meetings with Walt Disney World representatives in cities throughout the country. Satellite hook-ups make press events available to media throughout the country.

Advertising is specifically directed into television, print advertising and on-sight advertising. The various segments discussed previously are isolated, targeted and approached on the basis of the following strategy:

Television is the most powerful means of

advertising to many market segments because the visual nature of TV allows us to show our very visual product. A picture is worth ten thousand words when we show the smile on a youngster's face, or the bright blue water and snow-white sand of a beach scene. We often buy television on a regional network (only parts of the country) and a spot-buy (selected cities) basis. Because research can tell us the average age of viewers watching a particular program, we can choose whether to talk to young or old, family or non-family groups.

We can also use television advertising to tie in to timely events, such as the Olympics or World Series, and generate special interest in the commercials themselves. You may have seen our commercials asking top sports figures who've just won the Super Bowl, etc., what they're going to do next, to which they reply "I'm going to Walt Disney World!" These are good examples of this type of timely, or "topical" advertising.

Co-Operative Advertising is an art nearly perfected by our company. In this form of print advertising, we offer other companies the chance to buy space in multi-page advertising sections which we design and produce. These ad sections appear in such publications as People, National Geographic, and Reader's Digest. Companies which take part in these cooperative efforts include other tourism-oriented Florida businesses, such as cruise lines and rental car companies. They benefit from being in our advertisements, because they are perceived as being part of an ideal Disney vacation. Co-operative advertisers, in paying us for ad space, help offset the cost of our ads in these same sections, and greatly reduce the overall cost of the section to us.

On-Site Advertising is another important part of our advertising effort. It consists of materials displayed to guests already on our property, informing them of the many things there are to see and do here. Everything from lobby posters to the sophisticated information channel on guests' in-room TVs falls into this category. Extending guests' length-of-stay or increasing the number of activities they participate in while they're here is a very real and cost-effective way of increasing revenues. (*Disney Training Manual* 1992 6-8.)

The DisneyWorld marketing scheme stemmed from the original vision for Disneyland as posed by the Disney Corporation. According to Zukin, Disneyland's original critics "failed

to understand that Disneyland was an ideal object for visual consumption, a landscape of social power." In effect, Disneyland projected

a 'Disneyland realism,' sort of Utopian in nature, where we (Disneyland's planners) carefully program out all the negative, unwanted elements and program in the positive elements. (Zukin 1991 222)

## CONCLUSIONS

Disneyland and DisneyWorld were designated as unique tourist attractions. The theme parks comprise "fantasy architecture for mass entertainment" (Zukin 1991 232). The collective desires of the mass society were incorporated into the planning for specific themes appealing to tourist interests. Mass consumption, in a manner not unlike the previous forms of cultural capital discussed in this chapter, was facilitated through the symbolic settings (or liminality-otherwise known as barriers-set by the physical background and nostalgia or yearning for utopian society).

The Disney theme parks were also important in the impact of market, place, and landscape. Zukin (1991 7) forcefully argues that market culture was determined by place. Settings dictated existing culture. Place subsequently becomes less important with the homogenization of American society. Experiences lack individual creativity with the imposition of global cultures. Landscape is the symbolic representation of cultural values.

The landscaped setting is trivialized as an archetype consumable just like physical objects purchased by zealous shoppers.

In effect, the cultural values marketed in the theme park perspective are indicative of a longing to escape. We are told what to see and programmed into reacting in particular fashion while consuming incessant fantasy images. Perhaps credit cards are the 'ticket' permitting a sampling of utopian experiences at Epcot Center and the staged authenticity of utopian worlds.

## REFERENCES

- Disney Organization 1992 *Disney Training Manual* provided by Walt Disney, Inc.  
 Featherstone M 1991 *Consumer Culture and Postmodernism* Newbury Park: Sage  
 Goffman E 1959 *The Presentation of Self in Everyday Life* NY: Anchor  
 Heinelein R 1961 *Stranger in a Strange Land* NY: Putnam  
 Horkheimer M, T Adorno 1972 *The Politics of Enlightenment* NY: Herder and Herder  
 Lefebvre H 1971 *Everyday Life in the Modern World* London: Allan Lane  
 MacCannell D 1989 *The Tourist: A New Theory of the Leisure Class* NY: Schocken Books  
 Marcuse H 1964 *One-Dimensional Man* Cambridge: Routledge and Kegan-Paul  
 Marx K 1967 (1850) *Capital: A Critique of Political Capital* NY: International Publishers  
 Ritzer G 1993 *The McDonaldization of Society* Newbury Park: Pine Forge Press  
 Schor J 1991 *The Overworked American: The Unexpected Decline of Leisure* NY: Basic Books  
 Veblen T 1983 (1899) *Theory of the Leisure Class* NY: Penguin  
 Zukin S 1991 *Landscapes of Power: From Detroit to Disney World* Berkeley: U California Press

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## **FACING AN UNWANTED PREGNANCY: WOMEN WHO ABORT AND THOSE WHO CHANGE THEIR MINDS**

**John Lynxwiler, The University of Central Florida**

### **ABSTRACT**

The majority of research on abortion decisions involves case studies of women who have obtained abortions or comparative analyses of fertility behaviors at the aggregate level. Few studies focus on women who initiate, but fail to complete, their abortion procedure. This paper explores this question using a sample of women who visited an abortion clinic to terminate an unwanted pregnancy. All of the women completed the necessary paperwork, medical exams, and counseling sessions for a therapeutic abortion. While the majority of women had abortions, a portion did not return. The women's background characteristics and aspects of their decision to abort are examined to compare those who aborted with their counterparts who did not. Statistical analysis of the data reveals that the most significant difference is related to interpersonal features of the decision making process.

### **INTRODUCTION**

Approximately 1.6 million abortions are performed in the United States each year (Henshaw, Van Vort 1990). Despite the increasing commonplace of abortion in our society, the decision to terminate an unwanted pregnancy is a difficult and morally significant choice for many women. Understanding the decision making process of women who face an unwanted pregnancy has important applied applications. Women who experience decisional dilemmas are more likely to delay their procedure, and thereby, increase the financial, physical, and psychological problems associated with late abortions (Franz, Reardon 1992; Grimes 1984; Joseph 1985; Muller, Jaffe 1972). A more tragic outcome for women who cannot work through their decisional dilemma is the birth of an unwanted child. By increasing our understanding of the decision making process, we can help women avoid the problems associated with abortion delays.

This paper represents an effort to extend current understandings of women's abortion decision making. The analysis compares a sample of women who terminated an unwanted pregnancy with those who elected to carry their pregnancy to term. The findings from our research will be of particular value to medical, social service, and teaching professionals who counsel women seeking abortions.

### **ABORTION DECISION MAKING**

Even among those women who support legal abortion, there remains a concern over its moral status (Scott 1989). Gilligan (1982) characterizes the decision to abort as a choice between two wrongs. Her conclusions are echoed in the work of Kristin Luker (1984) who argues that, for many women, abortion decisions represent a conflict between their

practical concerns about childbearing and their internalized perceptions of motherhood, family, and womanhood. Current research on the decision making process of women who terminate an unwanted pregnancy suggests two principle explanations.

The first may be termed a social cost model. This perspective theorizes that cost-benefit considerations associated with childbearing are central features in the decision to undergo an abortion or carry a pregnancy to term (Trent, Powell-Griner 1991). Simply put, the greater the social costs that pregnant women attach to motherhood, the more likely they are to seek an abortion. Examples of social costs include perceptions of stigmatization associated with childbearing out of wedlock, the financial burden of raising a child, and the career opportunities that may be threatened by an unplanned pregnancy. The interplay of variables such as income, age, education, marital status, and race are thought to shape women's perceptions of these social costs, and thereby, their decision to abort or give birth (Trent, Powell-Griner 1991).

Although a few case studies have used a social costs approach (Luker 1984), the majority of support for this model is found in aggregate level research that compares the sociodemographic characteristics of women who abort with baseline data found in the larger population of those who give birth (Hogan, Kitagawa 1985; Marini 1984; St. John, Grasmick 1985). As a result, the social cost model remains somewhat speculative and oriented to macro levels of analysis. Moreover, it offers little empirical insight into the interpersonal features of the decision making process and their impact on women's perceptions of the social costs of childbearing.

A second line of research offers insight into the role that social support systems play in

abortion decisions. This explanation emphasizes aspects of women's interpersonal relationships with significant others. Initial interest in social support and abortion was developed by scholars who examined its impact on the post-abortion psychological sequelae of women (Dagg 1991). For example, research by Major et al (1990) found that women's perceptions of positive social support for their abortion decision significantly reduced post-abortion stress.

Although scholarly interest in the impact of social support on decisions to have an abortion has not been developed fully, a few studies point to its importance. Smith and Kronauge (1990) found that perceptions of support from significant others influenced a woman's decision to tell others of her abortion decision. Also, work by Lynxwiler and Wilson (1994) found that the amount of support black women received for their abortion decision significantly increased their pregnancy duration, and thereby, delayed their abortion procedure. The findings of their research indicates that more studies are needed to determine the degree to which social support impacts on women's decisions to terminate an unwanted pregnancy or carry it to term.

This paper provides an initial effort to consider aspects of these explanatory models. The research reports on a sample of women who, after their initial contact with personnel and counselors at an abortion clinic, never returned for their planned procedure. As this is the primary clinic in the area and due to the very real fact that abortion decisions cannot be postponed beyond a few weeks, the women who did not keep their scheduled appointments are considered to have changed their abortion decisions. Questionnaire data collected during the initial clinic visit provide a means to examine a set of variables that compare the women who did not keep their scheduled appointment with those who followed through on their decision to abort. The analysis is unique in that it provides a means to examine women who change their decision after they have committed themselves to an abortion. As such, it provides a reliable source of baseline data for exploring aspects of a social cost and a social support explanation of women's abortion decisions.

## METHODS

The data were collected at a women's health clinic that is located in a large Southern

city. The clinic performs the majority of first and second trimester abortions in the state. To collect the data, a questionnaire was included with the clinic's routine medical forms. The questionnaire tapped several facets of the women's background, lifestyle, and attitudes. Women who inquired about the survey were encouraged to complete the questionnaire, but it was stressed that the survey was not mandatory for treatment. This procedure resulted in a response rate of just over 95 percent.

The paper uses clinic data on women who had late abortions between August 1988 and January 1989. During this time period, 1025 usable questionnaires were recorded. All of the women sampled obtained abortions to resolve unintentional or accidental pregnancies; none obtained abortions for health related reasons. Ten women in the sample represented a racial category other than black or white, and they were dropped from the analysis. This resulted in a sample size of 1015 women.

The background variables used in the analysis include age (in years), years of education completed, marital status (married=0, not married=1), annual household income, and race (black=0, white=1). Response categories for annual household income ranged from 0-5 with a higher score indicating income in excess of \$40,000 per year. The range for each income category was as follows: less than \$10,000 per year (0); \$10,000 to \$15,000 (1); \$15,000 to \$20,000 (2); \$20,000 to 30,000 (3); \$30,000 to \$40,000 (4); and, over \$40,000 per year (5). In addition, the women were asked if they used birth control devices on a regular basis (no=0, yes=1), if they had obtained an abortion before (no=0, yes=1), and if they had any children from a previous pregnancy (no=0, yes=1).

To assess the women's reservations about abortion, they were asked to respond to the following question: "A woman should have the right to obtain a legal abortion if she wants one for any reason." The question allowed the women to indicate if they agreed or disagreed (disagree=0, agree=1). A higher score reflects a stronger pro-choice attitude toward legal abortion.

A final set of questions focused on aspects of the decision making process. The women were asked to list how many people supported their abortion decision and how many discouraged their abortion decision. Responses to

**Table 1: Mean Comparisons of Women Who Abort and Those Who Do Not**

Variable	Had Abortion	Did Not Abort
Age	23.67	21.35**
Education	12.32	12.07
Annual Household Income	1.80	1.44*
Race	.64	.58
Currently Unmarried	.87	.92
Have Children	.40	.35
Had Abortion Before	.30	.25
Regular Contraceptive Use	.51	.42
Misjudgment of Gestation Length	1.90	3.70**
Support Abortion For Any Reason	.79	.72
Reasons For Delay		
Ignorance	.36	.23**
Distress	.29	.38*
Money	.13	.27**
Other/Time	.22	.12**
Support For Abortion Decision	1.31	1.17
Discouragement For Abortion Decision	.19	.37**
N=	888	127

\*Mean difference significant at .05 level.

\*\*Mean difference significant at .01 level.

these questions were coded as follows: none=0, one person=1, two people=2, and three or more people=3 (97% listed three or fewer people for each question). Finally, the women were asked why they delayed their decision to seek an abortion. Their responses were grouped into the following categories: *Ignorance*, she did not know she was pregnant or how far along she was; *Money*, she had trouble getting enough money together to pay for the procedure; *Distress*, she was frightened and could not decide whether to have an abortion or carry the pregnancy to term; and, *Other/Time*, a residual category in which the majority of responses involved difficulties in scheduling a visit to the clinic.

These thirteen variables are used to examine differences among women who returned and those who did not return for their scheduled abortion. Dichotomous and nominal variables are dummy coded as 0 and 1 for the analysis. Discriminant analysis is used to extract a combination of variables that best differentiates between the sample of black and white women. In a two group analysis the standardized discriminant coefficients can be interpreted in a fashion similar to those from a

multiple regression; they identify those variables which contribute the most to the differentiation (Klecka 1980; Pedhazur 1982). Along with information on those variables that produced significant standardized coefficients, the structure coefficients for all variables are reported. Similar to factor analysis, structure coefficients are helpful in giving a substantive interpretation to the discriminant function (Tatsuoka 1970).

Two cautionary notes concerning the analysis should be noted. First, because the clinic performs the majority of abortions in the surrounding area and due to the timely nature of abortion decisions, those women who did not keep their scheduled abortion appointments are treated as individuals who elected to carry their pregnancy to term. It is possible that some of these women may have driven to another clinic in the State to schedule an appointment and then returned for their abortion. Such action would have delayed their abortion by another two to three weeks. However, given the probability of this outcome and its impact on their pregnancy duration, these women are assumed to have changed their minds about obtaining an abortion. Second,

**Table 2: Discriminants of Women Who Abort and Those Who Do Not**

Variable	Standardized Coefficients	Structure Coefficients
Age	-.18**	-.22
Education		-.13
Annual Household Income		-.15
Race		-.15
Currently Unmarried		.16
Have Children		-.04
Had Abortion		-.06
Regular Contraceptive Use		-.08
Misjudgments of Gestation Length	.79**	.79
Support For Legal Abortion		-.04
Delay Due to Ignorance		-.16
Delay Due to Distress	.18**	.10
Delay Due to Money	.32**	.30
Support For Decision	-.19*	-.24
Discouragement For Decision	.22**	.27
N=	786	119
Cases Classified Correctly=83.98%	Canonical Correlation=.498	

\*Change in RAO's V significant at .05 level.

\*\*Change in RAO's V significant at .01 level.

the analysis represents a case study of women who sought abortions in a Southern city. As such, the findings may not be generalizable to other populations. With these cautions in mind, the remainder of the paper reports on the analysis of the data.

## ANALYSIS

Of the 1015 women who scheduled abortions at the clinic during the data collection period, 888 returned for their scheduled abortion while 127 did not. The gestation period for the women sampled ranged from a low of six weeks to a high of twenty-four weeks as reported by clinic staff. The average pregnancy duration of women who aborted is slightly lower than those who did not return; however, the women in both categories reported pregnancy durations across this range. Although the percentage of women who never returned for their abortions is small (13%), they represent an important category. Unlike other studies that report on the characteristics of women who abort with women in the general population who give birth, the women in this study visited the clinic to terminate an unwanted pregnancy for non-health related reasons. All of them completed the necessary paperwork and scheduled an appointment for their

abortion procedure. Thus, the analysis focuses on examining why some women change their abortion decisions in, what may be considered, the final hour.

Table 1 presents mean score differences for the thirteen variables in the analysis. As Table 1 shows, there are several differences between women who had abortions and those who changed their minds. Those women who completed their procedure tend to be older (mean = 23.67 v. 21.35) and white (68% v. 54%) with slightly higher educational levels (mean = 12.52 v. 12.07). Given these differences, it is not surprising that they also reported higher annual household incomes than women who did not return for their abortions (mean = 1.8 v. 1.44 respectively). In addition, when compared to women who did not return for their abortion procedure, women who completed their abortions also are more likely to be married (15% v. 8%), use birth control devices on a regular basis (51% v. 42%), have children (40% v. 35%), and to have obtained abortions in the past (33% v. 25%).

The most striking difference between women who completed their scheduled abortion and those who did not is the reported difference in each group's perceptions of their pregnancy duration. On average, the women who aborted



misjudged their pregnancy duration by 1.9 weeks while those who did not return for the procedure were in error by an average of 3.7 weeks. This difference may be related to the finding that women who completed their abortions were older, and thus, they were better able to recognize the physical changes associated with their pregnancy. Their higher rates of childbearing and past experiences with unwanted pregnancies also may have contributed to their greater understanding of pregnancy symptoms which increased their accuracy in judging gestation length.

Responses to the pro-choice attitude question reveal that the two groups of women do not differ significantly in their support for legal abortion. However, the two groups are different in the amount of support and discouragement they received from others. On the one hand, women who aborted reported greater support for their abortion decision than did their counterparts who never returned (mean scores of 1.31 and 1.17 respectively). On the other hand, women who did not return for their abortions reported higher levels of discouragement from significant others than did women who aborted (mean = .37 versus .20).

Finally, Table 1 shows significant variations between the two groups for the delay variable. Women who aborted were more likely to report that they did not realize they were pregnant (36%) or experienced dilemma over abortion decision (29%) as the primary reasons for delay. Women who did not abort listed decisional dilemma (38%) and money (27%) as the main reasons for their delay. While the experience of decisional distress is somewhat higher for women who changed their minds, it is common for both groups.

Significant variations in the gross mean differences reported in Table 1 indicate that when compared to those who abort, women who change their abortion decisions are younger, single women with lower household incomes. In addition, they are more likely to misjudge the length of their pregnancy. This finding may be related to youth and sexual inexperience. Women who change their abortion decision also are more likely to report difficulties in reaching their initial decision and in raising the money for the abortion procedure. Finally, more often than women who abort, they report more discouragement for their abortion decision.

Table 2 reports on the discriminant analysis. Six variables are included in the final

equation. Together, the variables produced an equation with a Wilk's lambda of .498 which, when converted to a Chi-square statistic, was significant at the .001 level. The variables in the equation include age, perception of gestation length, receiving support for the decision to have an abortion, receiving discouragement for the decision to have an abortion, difficulty in raising the money to pay for the procedure, and experiencing distress in reaching the decision to abort. Each of these variables produced a significant change in RAO's V when added to the equation.

An indication of the model's utility for differentiating between women who aborted and those who did not keep their scheduled abortion appointments are the group centroids (mean = -.28 and .98 respectively). This relatively strong separation of group means, is highlighted by the fact that 83.98 percent of the cases were classified correctly. A more familiar statistic for determining the adequacy of the model is the canonical correlation. In a two group discriminant analysis, the canonical correlation functions like a Pearson's correlation coefficient. When squared, it reveals the proportion of explained variance in the discriminant function. The variables in the final equation account for 24.8 percent of the variance between the two groups of women.

Although sensitive to fluctuations among the other variables in the model, the standardized coefficients (sc) provide insight into the contribution that each variable makes in discriminating between the groups. In the present analysis, a positive coefficient indicates that women who did not abort scored higher on the variable. A negative coefficient indicates that women who kept their scheduled abortion appointments scored higher on the variable.

Perceptual errors in judging pregnancy duration made the most significant contribution to discriminating between the two groups with women who did not abort more likely to misjudge their gestation period (sc = .79). In addition, difficulty in raising money to pay for the abortion was a significant variable in discriminating between the two groups (sc = .32). Women who did not return to the clinic were more likely to report that they delayed their initial visit because they had trouble paying for the procedure. This finding probably is not related to some aspect of social class location as education, income, marital status, and race did not differentiate between women

who aborted and those who did not. A more likely relationship is found in the age of the women and the increased probability of employment. Older women were more likely to follow through on their decision to abort ( $-.18$ ).

In addition, women who completed their abortions are differentiated by higher levels of support for their decision ( $sc = -.19$ ). Those who did not return to the clinic were more likely to report higher levels of discouragement for their initial decision to abort ( $sc = .23$ ). Finally, women who did not return to the clinic also were distinguished from those who did by higher levels of distress in reaching their initial decision ( $sc = .18$ ). While these findings do not offer strong support for the social cost model of decision making, they are encouraging results for a social support explanation.

Table 2, column 2 presents the model's structure coefficients. The coefficients provide insight into the combination of variables that contribute to classifying the sampled cases. While the standardized coefficients help discern each variable's contribution to differentiating between the groups, the structure matrix determines the nature of the function on which the groups are discriminated. In this manner, the structure coefficients in Table 2, column 2 also present the combination of variables that contribute the most to classifying the sampled cases. Following Pedhazur's discussion of the theoretical relevance of structure coefficients, those coefficients approaching .25 are considered important for understanding the discriminant function (Pedhazur 1982).

Five structure coefficients are useful in interpreting the dimension on which the groups differ. The structure coefficients that are of interest include age of the respondent ( $-.25$ ), the amount of error in respondents' perception of their pregnancy duration (.75), the measure of respondents who reported difficulty in obtaining payment for their abortion (.30), the number of people who supported the respondent's decision ( $-.24$ ), and the number of people who discouraged her decision (.29). The remaining standardized coefficients that are statistically significant do not provide strong contributions to the discriminate function. The five variables that are important contributors to the discriminant function suggest that women who change their abortion decisions are distinguished from those who abort by an interpersonal. The remainder of this paper examines the features of this dimension and its relationship to women who alter their abortion

decisions.

## DISCUSSION

The strongest variable in this interpersonal dimension is the variation in perception of pregnancy duration among the two categories of women. Women who did not return for their scheduled abortion recorded significantly higher levels of misjudgment concerning their gestation period than their counterparts who aborted. It is possible that when these women discovered the actual length of their gestation period, they began to reconsider their decision. Although the clinic personnel did not refuse to schedule an abortion, the realization of their pregnancy duration may have resulted in a measure of dissonance that resulted in a decisional change. Perhaps their inability to gauge their pregnancy duration is related to the respondent's age.

As a group, women who change their decisions are younger and thereby, less knowledgeable about the physical symptoms of pregnancy. Although they are not significant variables in the discriminant analysis, other variables in Table 1 support this conclusion (e.g., contraceptive use). In addition, their younger age suggests that they are less committed to a life trajectory than others, and thus, the social costs of giving birth were less relevant in their final decision.

Moreover, the women who change their decision are more likely to delay their visit to the clinic due to problems in obtaining payment for their abortion. In addition to a lack of personal funds, this also suggests that they lack support from their sex partner who was either unable or unwilling to help. It also may indicate that the women did not want to approach their families for financial help. Given the finding of reduced support and high discouragement for their initial abortion decision, they may have found or suspected that family members would not be forthcoming with financial support. In sum, it appears that women who change their abortion decisions are young women whose final decision relies heavily on the impact of significant others. The analysis points to the importance of social support systems in the decision making process of women faced with an unwanted pregnancy. Women who change their decision to abort report lower support and more discouragement for their abortion decision.

Research by others finds that positive perceptions of social support reduce stress prior

to the abortion procedure and enhance post-abortion psychological adjustment (Bracken et al 1974; David, 1985; Mosley et al 1981). In addition, research by Major et al (1990) finds that women who tell others about their pregnancy and decision to abort but perceive them as non-supportive report more stress than either women who perceive others as supportive or women who tell no one. Thus, perceived social support from others increases women's self-efficacy for coping with abortion and serves as an important determinant in predicting successful psychological adjustment before and after the decision to abort (Dagg 1991).

The findings of this paper demonstrate that social support also plays an important role in the decision making process itself. That is, a lack of support for their decision may cause some women to change their minds about obtaining an abortion. This is especially the case for younger women who also lack the financial means to pay for the procedure. It appears that definitions of social support should be expanded to include not only perceptions of approval or disapproval but also the real impact of material support. Moreover, social support appears to both reduce women's reservations about their abortion and enhance their self-efficacy and resolve once they have made the decision to terminate an unwanted pregnancy. Because the women who did not abort reported less social support for their decision, it also may help explain why they delayed coming to the clinic, and why they experienced more decisional distress.

The value of the social costs explanation should not be discounted. Research has demonstrated its use for mapping out the context in which abortion decision making takes place. However, this paper has pointed to the critical role played by social support. It would appear that some women are more likely than others to experience intrapersonal conflict due to moral considerations that emerge within their social support network of interpersonal relations. Gilligan (1982) argues that women who contemplate an abortion must resolve a conflict between self and other. The present findings suggest that among women who change their abortion decision, the decision to abort is a conflict between self and others. Abortion decisions are made within a constellation of relationships that may increase personal dilemmas for women who encounter resistance to their decision.

Recent trends in abortion legislation may

have considerable impact on the level of intrapersonal and interpersonal conflicts experienced by these women. Smith and Kronauge (1990) report that a woman's expectations regarding spousal support for her abortion are related to aspects of the decision making process. It appears that this relationship extends to significant others in general. If women must notify their parents or male partner, it may cause some women to change their abortion decisions. This trend may increase the health and psychological risks associated with postponing the decision to abort for some women. For others it may result in an even greater tragedy — giving birth to an unwanted child.

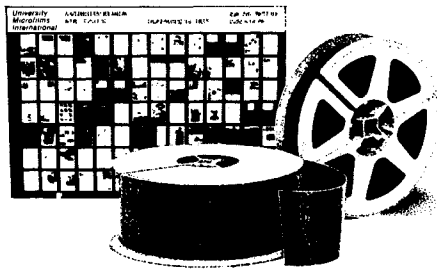
## REFERENCES

- Bracken MB, M Hachamovitch, G Grossman 1974 The decision to abort and psychological sequelae *J Nervous Mental Disease* 158 320-334
- Dagg PKB 1991 The psychological sequelae of therapeutic abortion — denied and completed *Amer J Psychiatry* 48 578-585
- David HP 1985 Post-abortion and post-partum psychiatric hospitalization *Ciba Foundation Symposium* 115 150-164
- Franz W, D Reardon 1992 Differential impact of abortion on adolescents and adults *Adolescence* 27 161-172
- Gilligan C 1982 *In a Different Voice* Cambridge: Harvard U Press
- Grimes DA 1984 Second-trimester abortions in the United States *Family Planning Perspectives* 16 260-266
- Henshaw SK, J Van Vort 1990 Abortion services in the United States, 1987 and 1988 *Family Planning Perspectives* 22 102-108
- Hogan DP, E Kitagawa 1985 The impact of social status, family structure, and neighborhood on the fertility of black adolescents *Amer J Soc* 90 825-855
- Joseph C 1985 Factors related to delay for legal abortions performed at a gestational age of 20 weeks or more *J Biosocial Sci* 17 327-337
- Klecka WR 1980 *Discriminant Analysis* Beverly Hills, CA: Sage
- Luker K 1984 *Abortion and the Politics of Motherhood* Berkeley: U of California Press
- Lynxwiler J, M Wilson 1994 A case study of race differences among late abortion patients *Women & Health* 21 43-56
- Major B, C Cozzarelli, AM Sciacchitano, ML Cooper, N Testa, PM Mueller 1990 Perceived social support, self-efficacy, and adjustment to abortion *J Personality Soc Psych* 59 452-463
- Marini MM 1984 Women's educational attainment and the timing of entry into parenthood *Amer Soc Rev* 49 491-511
- Mosley DT, DR Follingstad, H Harley, RV Heckel 1981 Psychological factors that predict reactions to abortion *J Clinical Psych* 37 276-279
- Muller CF, FS Jaffe 1972 Financing fertility related health services the United States, 1972-1978: a preliminary projection *Family Planning Perspectives* 4 6-19

Pedhazur EJ 1982 *Multiple Regression in Behavioral Research* 2nd ed NY: Holt, Rinehart and Winston  
 Scott J 1989 Conflicting beliefs about abortion: Legal approval and moral doubts *Soc Psych Qrtly* 52 319-26  
 Smith HW, C Kronauge 1990 The politics of abortion: Husband notification legislation, self-disclosure, and marital bargaining *Sociological Qrtly* 31 585-98  
 St. John C, HG Grasmick 1985 Decomposing the black/white fertility differential *Soc Sci Qrtly* 66 132-146

Tatsuoka MM 1970 *Discriminant Analysis: The Study of Group Differences* Champaign, IL: Institute for Personality and Ability Testing  
 Trent K, E Powell-Griner 1991 Differences in race, marital status, and education among women obtaining abortions *Soc Forces* 69 1121-1141

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## THE CYCLE OF FAMILY VIOLENCE AMONG CRIMINAL OFFENDERS: A STUDY OF INMATES IN ONE LOUISIANA JAIL

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### ABSTRACT

This paper focuses on the link between childhood family violence and adult family violence among criminal offenders. Results of a self-report study are used in the analysis. Data was obtained from 50 men and 50 women offenders who were incarcerated in a large urban jail in Southwest Louisiana. Results indicate a strong connection between experiencing family violence during childhood and continuing violence in adulthood (to a probability of about 90%). The findings also indicated that, among offenders who reported non-violent childhoods, women offenders were much more likely to go on to experience violent adult family lives.

### INTRODUCTION

With the American public's continuing concern with high levels of violent crime, more attention has been directed to the role of the family in nurturing and shaping violent criminal behavior. How extensive is serious family violence, how is it transmitted from parent to child, and what are the long-term effects of a violent family life upon children?

Recent research has estimated that between three and four million American households experience at least one serious violent incident between spouses each year. If the effect on children in these families is taken into account, then the number of persons directly touched doubles. And many of these households experience multiple violent incidents during the year.

Children not only view these violent encounters between their parents (which increases the risk of adult family violence, according to Dolon, Hendricks 1991; Straus et al 1980), but over two million children are suspected victims of abuse each year. The impact of family violence on children is uncertain, but more authorities believe that many of these children will use violence within their own families as adults, creating a dismal and persistently repetitive pattern of family violence.

In her research into the connection between childhood abuse and adult criminality, Cathy Spatz Widom used the phrase "cycle of violence" to suggest that a childhood history of physical abuse predisposes the survivor to violence in later years (Widom 1992). She found that being abused or neglected as a child increased the likelihood of arrest as a juvenile by 53 percent, as an adult by 38 percent, and for a violent crime by 38 percent.

Other researchers (Dolon, Hendricks 1991; Elbow 1982; Walker 1979) have also used the "cycle of violence" explanation. In this scenario, violence is learned as the primary means

of conflict resolution. It is a coping mechanism—involving external blaming, projecting feelings and displacing rage.

The family provides the child with the early experiences which may provide an adult role model of abuser or victim. Children exposed to violence embrace the batterers as role models. Children and young adults emulate the behavior of aggressive models. When children, especially boys, grow up seeing their parents beating up on each other, they grow up to beat their own lovers and spouses, and ultimately their own children.

Sixty-three percent of men who batter their spouses either were beaten as children or witnessed family violence. Clinical reports indicate the inclination of male children of abused women to act out aggressively, frequently directing their offensive behavior toward the mother. The husband may provide a violent role model for the male child, while exposure to an abusive marital relationship may help the female regard violence as normative behavior (Dolon, Hendricks 1991; Elbow 1982).

Couples who abuse also abuse their children (Dolon, Hendricks 1991; Forsstrom-Cohen, Rosenbaum 1985; Jouriles et al 1987). Forsstrom-Cohen and Rosenbaum (1985) found that parental violence caused aggression in children. Women who had experienced violence during their childhood were more aggressive than those who had not witnessed parental violence. The cycle indeed continues as children of maritally abusive parents become abusive wives and husbands (Straus et al 1980).

Abusive relationships are relatively common. We know that children are frequently exploited by those closest to them. Moreover, when this abuse occurs during the formative years the battle against it can rage into adulthood. The upshot is that for adults the origins of their anger may be obscure. Thanks to

defense mechanisms they have used to ward off the menace emanating from adult attackers, it may not be clear to them that they are fighting for safety (Fein 1993). It may trouble them that they are violent, but they may not understand the sources of their behavior.

### STUDY DESIGN AND METHODS

This study was conducted to examine patterns of childhood family violence and adult family violence among criminal offenders. We were trying to answer two primary questions:

1. What is the extent of family violence among men and women offenders?
2. To what degree does a childhood history of family violence carry over into a pattern of adult family violence?

The study was carried out in 1993 in the Lafayette Parish Correctional Center. LPCC was at the time a five-story, 676-bed capacity parish jail in Lafayette, Louisiana. It housed local inmates in pre-trial status, local inmates awaiting sentencing or serving misdemeanor sentences, sentenced inmates awaiting transfer to state prisons, state prisoners serving their sentences in the parish jail (under a per diem contract with the sheriff), and a variety of pre-trial federal inmates and illegal aliens. The average daily population during the months of this study was in excess of 600, about half of whom were local pre-trial detainees.

We had determined that our ideal study group would consist of 50 adult male inmates and 50 adult female inmates. All would be volunteers whose identities would remain secret unless they chose to participate in follow-up interviews. The 100 respondents would each complete a six page questionnaire reporting basic personal information about themselves; then respond in some detail to questions about family violence in their lives as children and adults. The questionnaire included the following:

1. Sex
2. Age
3. Legal status (pre-trial, sentenced, etc.)
4. Marital status
5. Number of biological children
6. Number of children in household
7. Religious affiliation
8. Size of city raised in

9. Household income
10. Alcohol problem (no/yes, and level of severity)
11. Drug problem (no/yes, and level of severity)
12. Total number of felony convictions
13. Childhood family violence (no/yes, and frequency, self-report of victimization, frequency of victimization, hospital treatment for injuries, most violent family member, and frequency of use of firearms, cutting instruments, blunt objects, and hands or feet as weapons).
14. Adult family violence (no/yes, and same format as in question 13).
15. Most serious crime this confinement
16. Space for written comments
17. Willingness to be interviewed in person

Finding the 50 men to complete the "Domestic Violence Survey" was no problem. The jail runs an in-house treatment program called "Safecare," which is a combined self-esteem/substance abuse course in three parts or levels, each part lasting a few weeks. Over the course of several weeks, a member of the jail staff accompanied one of the researchers to Safecare classes, explained the nature of the survey and asked for volunteers. With over 500 men in the jail at any time, and the enrollees in Safecare turning over every few weeks, it was not hard to get the men's surveys completed right away.

The 50 women were much more difficult. The total number of women in the jail population never exceeds 52 (two 26-woman "pods") and was more likely to be somewhere between 35 and 45. The pool of possible respondents was much smaller from the beginning. Some women chose not to participate at all, others volunteered immediately, others declined but were persuaded by fellow inmates or jail counselors to take part in the survey later.

Obtaining surveys from the 50 women lengthened the process out beyond our expectations. We had been going through the surveys to assess their suitability as they were completed. Some (no more than 10 each from the men and the women) had been discarded as being incomplete or nonsensical (such as one with every blank checked and outlandish numbers cited). We had the 50 usable surveys from the men two months before there was enough turnover among the women to bring in

new respondents and finish out the set.

After the surveys were completed, nine of the respondents who volunteered to be interviewed were interviewed at length by one of the researchers. These interviews were recorded with permission and later transcribed. They are not a part of this paper but may be included in other reports later.

## FINDINGS

The profile of the jail inmates surveyed reveals that both men and women were likely to be young, not presently married, with no more than two children. The men were more likely to define themselves as having drug or alcohol problems, and they were more likely to be in custody this time for a drug offense. The men reported about three times as many felony convictions as the women. The men were more likely to describe themselves as having had a violent family life as children, while the women were slightly more likely to report a violent adult family life. In both the men and the women inmates, violence in childhood was highly likely to persist in adult family life. The characteristics of the survey respondents broken down into categories follow.

### Age

The men ranged in age from 20 to 47; no teenagers and no old-timers, only two were in their 40s. The women ranged in age from 17 to 52; most were in their 20s and 30s, but nine were either teenagers or over 40. The most reasonable explanation for the age variation is that the men, selected from Safecare classes were more likely to be either sentenced offenders or long-term pre-trial inmates. The women were probably closer to a true random sample of jail inmates.

### Marital Status

We were struck that only seven of the men inmates and four of the women inmates reported being married at the time of the survey. Of these 100 offenders, 90 were in their 20s or 30s, so they were certainly of marriageable age, but why weren't they married? Even more than a history of family violence, not being married was a prominent characteristic of this group of offenders. Or maybe, as we will see in looking closer at the continuity of childhood and adult family violence later, the impact of family violence—along with alcohol and drug problems and a felony criminal record—makes

**Table 1: Family Violence Among Jail Inmates**

<b>Men</b>	<b>Yes</b>	<b>No</b>
Childhood	34	16
Adult	26	24
<b>Women</b>		
Childhood	23	27
Adult	28	22

it difficult for one to get married and stay that way.

### Children

The 50 men offenders reported having a total of 70 children, an average of 1.4 each. Eighteen had none, and 13 had only one child. The 50 women offenders reported a total of 87 children; 16 of them had none and nine had only one child.

### Alcohol Problems

Thirty-seven of the men but only 15 of the women reported varying degrees of alcohol problems. Of those who reported problems, 21 of the men but only four of the women characterized these problems as severe.

### Drug Problems

Both men and women reported drugs as more of a problem than alcohol. Forty of the men (80%) and 21 of the women said they had drug problems. If they had a problem, it was likely to be severe: 26 of the men and 11 of the women put themselves in the worst category. We might remember again that the men were recruited from Safecare, which is designed for persons with substance abuse problems. But practically all of the long-term inmates in this jail, pre-trial or sentenced, go through the program at some point in their stay; it is something different to do for awhile.

### Felony Convictions

To the best of their recollection, the men recalled 121 total felony convictions, the women only 41. Only four of the men had not been convicted of felonies, while 25 of the women had not. There was obviously a much more significant record of serious criminality among the men, although if we took only those in both groups with felony convictions the average number of convictions was less divergent: 3.07 per man versus 1.64 per woman. One

**Table 2: Childhood Family Violence Into Adult Family Violence**

	Childhood Family Violence	Adult Family Violence	No Childhood Family Violence	Adult Family Violence
Men	34	23	16	3
Women	23	17	27	11

woman reported five felony convictions, while *eight* men reported six felony convictions each.

### Current Offense

The majority of the men offenders were in for either a drug crime (16) or a violent crime (14). The women's offense were much more evenly balanced: ten for drugs, ten for property crimes, and eight for violent crimes.

### Childhood Family Violence

Among the men, 34 (68%) reported a history of family violence as a child (Table 1). Among the women, this figure was substantially lower: 23, or 46 percent (Table 1). In describing who was the most violent member of their childhood family, fathers made the list of 18 of the men inmates, or just above half of those who reported childhood violence histories, while 11 of the women inmates, or just under half, identified their fathers as most violent. We noted with interest that nine of the men and four of the women identified themselves as the most violent members of their families in childhood; of these 13, 12 went on to report histories of adult family violence, and in every case they also identified themselves as the most violent again. If this was a serious moment and they were telling the truth, theirs may be the saddest history of this entire group—to have done all this damage throughout their lives and to be apparently unable to stop it.

### Adult Family Violence

The women inmates were more likely to report violence in their adult families than the men were: the numbers were 28 to 26, the percentages 56 percent to 52 percent (see Table 1). The slight variation did not appear particularly noteworthy to us; we thought it most significant that a majority of both groups indicated the presence of violence in their adult family lives.

What we did next was to look for continuity—childhood violence into adult violence (see Table 2). Of the 34 men who reported family violence as children, 23 of them said it continued on into adulthood. But seven of the

remaining 11 had no children (and six of the seven were unmarried), meaning they basically had no adult family to be violent with. So only four of the original 34 actually had adult families in which they reported no problems with violence. If we were looking for success stories, in overcoming violent childhood histories to lead non-violent adult family lives, the success rate among these inmates was exactly 12 percent.

Of the 23 women who reported family violence as children, 17 said it continued on into adulthood. Four of the remaining six were unmarried, with no children, leaving only two reporting family violence as children to escape the "cycle of violence" in their family lives as adults. The success rate among the women was only 9 percent, even lower than for the men.

What about the other side of the coin, the men and women inmates who reported non-violent family histories as children?

Of the 16 men who indicated no family violence as children, only three (19%) reported family violence as adults; 13 remained violence-free, even though the majority have children.

Of the 27 women inmates who indicated no family violence as children, 11 (41%) reported family violence as adults, while 16 (59%) did not. Of the 11 women in the "non-violent childhood/violent adulthood" category, nine of these women have children, and eight indicated that the problem was their husband: they married into violence.

We looked (only superficially so far) into the relationship of family violence and violent crime. Of the 14 men in jail for violent crimes, 11 had a violent family life as a child; two of the other three, and 10 of 14 overall, claimed a severe alcohol or drug problem. Among women the relationship was less clear. Of the eight in jail for violent crimes, only four indicated a violent family life as a child; four of the eight indicated a drug problem, none severe.

Our study to this point has two main observations:



1. Both men and women in jail show high rates of family violence, with two-thirds of the men and almost half the women reporting violent childhoods, and over half of both groups reporting violent adult family lives.
2. Both violence and non-violence tend to be continuous. If you had a violent family life as a child, you are very likely (in the range of 90%) to have a violent adult family life as well. If you had a non-violent family life as a child, your adult family life is likely to be non-violent also, unless you happen to hook up with a spouse (more likely a male than a female) who proceeds to give your life a violent turn.

## DISCUSSION

Conflicts between people are inevitable, even among family members. The key to maintaining a healthy relationship, or mending a torn one, is how that conflict is handled.

Family rifts usually are not caused by a single incident, but stem from a series of events the latest of which sets off a powder keg. Sometimes a very small incident can bring about strong conflict and very strong emotions.

Childhood abuse and social conditioning contribute to a women's acceptance of emotional and physical abuse by men. The young girl who is socialized to be passive, to repress her own needs in subservience to the needs of others as part of her female role, is in essence being socialized to submit to the emotional and physical abuse of potential batterers. And when girls see that society does not punish their fathers actions against their mothers, these actions are seen as acceptable.

Domestic violence is the second most common cause of injury among women and the leading cause of injury to women 15-44, more common than injury from automobile accidents, muggings and rapes combined. The perpetrator in some 626,000 incidents a year nationally is usually a male who takes out his own hard feelings on the victim. Alcohol is often involved and guns are the weapon of choice.

Gelles and Straus (1988) maintain that violence occurs in American families because most people regard violence as a permissible solution way to resolve family disagreements. In their analysis of media reports of violence

they found that people tend to stereotype violent families as different (poor, black or mentally unstable). This, the authors say, labels families in which violence occurs as different; therefore the problem is not as likely to be seen as important or urgent. It is reminiscent of the problem of drug use; which was not "discovered" as an urgent problem until it reached the middle class. Americans deny that family violence is a middle class problem, and even violent families, rich or poor, tend to think of other families as having worse problems than their own.

Our research supports those who maintain that family violence is the number one social problem facing America. When you look at the tentacles of family violence, its connections with drugs, family disintegration and criminality and its effects on future generations, it far outweighs any other social issue of long-term consequence. Several members of the jail inmate study remarked, during their interviews, that family violence had ruined their lives before they even got started. Millions of American children today are getting off to the same start.

## REFERENCES

- Dolon R, J Hendricks 1991 Breaking the cycle of family violence: services for children in shelters for battered women *Free Inq Creat Soc* 19 31-35
- Dorne CK 1989 *Crimes against Children* NY: Harrow and Heston
- Elbow M 1982 Children of violent marriages *Social Casework* 63 465-468
- Fein ML 1993 *Integrated Anger Management: A Common Sense Guide to Coping with Anger* Westport, CT: Praeger
- Forsstrom-Cohen B, A Rosenbaum 1985 The effects of parental marital violence on young adults: an exploratory investigation *J Marr Fam* 47 467-472
- Gelles RJ, MA Straus 1988 *Intimate Violence* NY: Simon and Schuster
- Giles-Sims J 1985 A longitudinal study of battered children of battered wives *Family Relat* 34 205-210
- Jouriles E, J Barling, D O'Leary 1987 Predicting child behavior problems in maritally violent families *J Abnormal Psych* 15 165-173
- Kalmuss D 1984 The intergenerational transmission of marital violence *J Marr Fam* 46 11-19
- Riza WR, RN Singh, VT Davis 1992 Differences among males and females in their perception of spousal abuse *Free Inq Creat Soc* 20 19-24
- Straus M, R Gelles 1986 Societal change and change in family violence from 1975 to 1985 as revealed in two national surveys *J Marr Fam* 48 465-479
- Straus M, S Steinmetz, R Gelles 1980 *Behind Closed Doors: Violence in the American Family* NY: Anchor Books
- Walker LE 1979 *The Battered Woman* NY: Harper & Row
- Widom CS 1992 The cycle of violence. National Institute of Justice, U.S. Department of Justice

## **EXPLORING THE LINK BETWEEN FETAL ALCOHOL SYNDROME AND SOCIOPATHIC BEHAVIOR**

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### **INTRODUCTION AND BACKGROUND**

Ever since Cesare Lombroso became fascinated with the origins of criminal behavior in the 19th century, sociologists, psychologists, and the public in general have been searching for answers to the eternal question "where do criminals come from?" Lombroso, regarded as the "father of criminology," fervently believed that criminal behavior was largely determined by physiological predisposition. This was confirmed by his post-mortem studies on criminals, during which he found depressions similar to those of rodents at the base of the criminal's skulls. Lombroso believed that skull depressions signified that criminals were born, not environmentally developed (Wilson 1989 177). There are many extant theories espousing biological factors as the cause for criminal behavior, the latest of which will be dealt with here. Fetal Alcohol Syndrome (FAS) was first identified in the early 1970's, and "...may be the leading cause of mental retardation in the United States" (Brown University Child Behavior and Developmental Letter 1991 3). FAS has grabbed the attention of the public, the media, and even a few accused criminals who seek to use it as a defense for their behavior. But does FAS cause criminal behavior in and of itself? Is it a factor in the development of criminal behavior, or just a red herring, having no real connection to criminal behavior, but nevertheless present in a criminal's biological makeup?

The FBI conducted an exhaustive search into the backgrounds of thirty six multiple murderers in order to determine whether there was a compelling set of factors that lead a person to commit violent criminal acts. They found that 60% of the offenders studied had a family history of alcohol problems (Ressler et al 1988 19). This finding brings to mind the possibility that those offenders who were offspring of alcoholics may themselves be afflicted with FAS or Fetal Alcohol Effect (FAE), a milder form of prenatal ethanol exposure. As such, these offenders may not have the capacity for understanding the nature of their crimes. Such was the case of Robert Alton Harris, a California man who was sentenced to death after he shot two teenaged boys to death while

robbing them of their car (which he intended to use in a bank robbery). Harris used FAS as a defense in his attempt to obtain a stay of execution, but was unsuccessful even though a judge in his case stated that Harris would not have received a death sentence had the court known he had FAS (Nightline 1992). Supposedly, Harris had a terrible childhood: he was sadistically abused by his parents, abandoned by them at age fourteen, and had brain damage caused by FAS. Nevertheless, Harris was executed in 1992. It is possible that the court acted in this case partly out of fear that if Harris were granted a stay, the case would open up the floodgates for others to use FAS to avoid punishment. Unfortunately, much more research needs to be done on FAS before it is accepted into the courtroom on a regular basis.

The characteristics generally attributed to FAS include the following: no concept of stealing, impulsive behavior, no memory, inability to use abstract thought, illogical reasoning, no understanding of consequences or rules, poor judgment, and mental retardation (Dorris 1989). FAS is an irreversible, lifelong condition brought about by the mother's alcohol intake during pregnancy. Those children suffering from FAS have similar distinctive physical attributes: short, extremely thin with distinctive facial features, and behavioral problems.

The diagnosis of FAS is made when there is a confirmation of a history of maternal alcohol abuse and when examination reveals that a child meets three criteria: (1) prenatal or postnatal growth retardation (height and weight below the 10th percentile when corrected for gestational age); (2) central nervous system (CNS) dysfunction (any of neurological abnormality developmental delay or intellectual impairment); and (3) characteristic craniofacial abnormalities, including at least two of the following three: microcephaly (head circumference below the third percentile), microphthalmia or short palpebral fissures, and poorly developed philtrum, thin upper lip and flattening of maxillary area. The term FAE is used when a child shows two, but not all three of the above indicators. (Conry 1990 650)

Alcohol also negatively affects the following skills: perceptual/motor skills, motor coordination, strength, reaction time, language skills, and attention (Conry 1990 650). The characteristic "FAS face" is recognized by: short eye openings, a thin upper lip, and an elongated, flattened midface and groove in the middle of the upper lip (NIAAA 1991 1). Diagnosed individuals with FAS have tested low in IQ's with a mean of 66, while those with FAE generally score a little higher with a mean of 73 (Streissguth et al 1991 1964).

### BEHAVIORAL MANIFESTATIONS OF FAS/FAE

Ann Pytkowicz Streissguth and other researchers have noted that, commonly, FAS patients have the following characteristics:

...remarkably unstable home environments: they had lived, on average, in five different principle homes in their lifetimes (not counting receiving homes or temporary shelters). Only 9% were still with both biologic parents; only 3% were still with their biologic mothers. Of those for whom accurate data could be obtained, 69% of the biologic mothers were known to be dead. Although many died of alcohol-related illnesses, others died of other alcohol-related causes such as suicide, homicide, falls, and automobile accidents. Nearly one-third of these patients with FAS-FAE were never raised by their biologic mothers; they were given up for adoption at birth or abandoned in the hospital. (1991 1965)

It is evident from these findings that there is a strong sociological implication in the FAS problem that is larger than just the biology of alcohol addiction. The families of these people are inordinately dysfunctional, a factor which must be addressed as well. In other words, if the extant research is to be believed, FAS children primarily come from extremely dysfunctional families where they would have adjustment problems regardless of their individual genetic makeups. Commenting on the compounding effect of environmental factors, law professor Alexander Morgan Capron offered the following:

What needs to be understood is that fetal alcohol syndrome creates something like a lump of unusually pliable clay out of which many things can be formed. The damage to the brain and especially to the pathways that seem to allow reasoning about relationships and

consequences may well be irreversible, but the environment in which these children are raised and taught is certainly not immutable. Regrettably, without adequate societal intervention, many of them will face environments that are chaotic or nonsupportive, though few, one hopes, will have childhoods marked by the sort of overwhelming, abominable parental brutality and neglect that Robert Harris suffered. (1992 29)

Capron (1992 29) also points out that FAS people seem more rational and less delusional than the classically mentally ill, and their mental retardation is different from the classically mentally retarded also. He considers those with FAS to be rather sweet, pleasing, and dependent people who are at risk for criminal behavior not so much because of their willfulness, but because of their desire to please coupled with bad judgment and inability to learn from experience. Additionally, those with FAS do not have the capacity to comprehend laws and conform to them.

FAS/FAE children and adolescents are reported to have behavioral disorders. In a 1991 study which used the Veneland Adaptive Behavior Scale (VABS) adolescents from the FAS-FAE group had an average level of adjustable functioning around 7 years, although the chronological age was 17 years old (Streissguth et al 1991 1964). These individuals performed best on the daily living skills scale and worst on the socialization skills scale (Streissguth et al 1991 1965). The individuals with FAS/FAE whose scores on the Wechsler adult intelligence scale rated them not retarded exhibited the following characteristics: failure to consider consequences of their actions, lack of appropriate initiative, unresponsiveness to subtle social cues, and lack of reciprocal friendships (Streissguth et al 1991 1964). The most frequent types of maladaptive behavior exhibited were poor concentration and attention, dependency, stubbornness or sullenness, social withdrawal, teasing or bullying, crying or laughing too easily in public, and periods of high anxiety, as well as lying, stealing, cheating, or showing a lack of consideration, and exhibiting excessive unhappiness (Streissguth et al 1991 1965).

The behavioral aspects of FAS/FAE children could be explained in part by the dosage hypothesis. The dosage hypothesis states that (1) behavior deficits associated with social or light drinking mothers are similar to, but of small magnitude when compared with the

behavioral deficits found in the "damaged" children of chronically alcoholic mothers, (2) the behavioral deficits associated with maternal alcohol use have the same cause as the physical defects, and (3) risk of severity of symptoms is directly proportional to the average daily consumption of alcohol during pregnancy (Lenzer et al 1982 905).

### THE LINK TO SOCIOPATHIC BEHAVIORS

The term "sociopath" used to describe persons with criminal, but not psychotic personalities was coined by G.E. Partridge in the 1930's (Bartol, Bartol 1986). In the Diagnostic and Statistical Manual of the American Psychiatric Association (DSM) sociopath became officially Sociopathic Personality Disturbance. And in 1968 the DSM-II redefined it as Antisocial Personality Disorder (APD) which was retained in the DSM-III (1980) and DSM-III-R (1987). An individual must be at least 18 years old to be diagnosed APD; when under 18 they are labeled with Conduct Disorder (CD). To fit DSM-III-R diagnosis for APD an individual must have a history of 3 or more of 12 criteria behaviors: 1) truancy, 2) running away from home, 3) physical fights, 4) weapons in fights, 5) forced sexual activity, 6) physical cruelty to animals, 7) physical cruelty to others, 8) destroying others' property, 9) fire starting, 10) lying often, 11) stealing without confrontation, and 12) stealing with confrontation. The individual must exhibit 4 of the 10 following behaviors since the age of 15: 1) inconsistent work or academic behavior, 2) repeated unlawful behavior, 3) irritable, aggressive and assaultive, 4) failure to honor financial obligations, 5) transient or impulsive travel, 6) no regard for trust, 7) reckless disregard for safety of self and others, 8) irresponsible parenting, 9) no monogamous relationships for more than a year, and 10) lack of remorse. The antisocial behavior cannot occur exclusively during the course of manic or schizophrenic episodes (American Psychiatric Association 1987).

The largest category of psychiatric disorders for adolescents is conduct disorder, defined by DSM as a

repetitive and persistent pattern of conduct (lasting a month or longer) in which either the basic rights of others or major age appropriate societal norms or rules are violated. (Holcomb, Kashani 1991 579)

Research has indicated that antisocial behavior patterns can be well established by 10 years of age and high levels of antisocial behaviors are likely to continue into adolescence and adulthood (Holcomb, Kashani 1991 579). Children with conduct disorder show a tendency toward learning problems and lower verbal and language skills (Holcomb, Kashani 1991 580).

An interesting aspect regarding alcohol and criminal behavior is that some studies link alcoholism and antisocial personality disorder (APD). Lewis and Bucholz (1991 177) state that persons with APD are reported as having a higher incidence of alcoholism than those without APD. Additionally, the same authors state that there has been a close association noted between criminality and alcoholism; in fact, many convicted criminals are alcohol abusers, and many alcoholics engage in criminal activity. Also, it has been shown that a family history of alcoholism increased an individual's risk of alcoholism. Lewis and Bucholz suggest the following conclusion:

Thus, individuals with early onset and persistent antisocial behavior (sociopathy, psychopathy, or antisocial personality) frequently have alcohol abuse as a part of their behavior disorder and also frequently become involved with the criminal justice system. However, the association of alcoholism and antisocial behavior observed in subjects obtained from the criminal justice system may reflect the fact that drinking near the time of committing a criminal offense may increase the likelihood of apprehension. (1991 178)

Lewis and Bucholz (1991 178) also report a recent study that showed "alcoholics were 21 times more likely to have ASP (APD) than non-alcoholics and 7.2 times more likely to have a drug use disorder." They state additionally that "...alcoholism was significantly associated with phobic disorder, antisocial features, and generalized anxiety disorder in both men and women" (Lewis, Bucholz 1991 186). Their studies also found that "...childhood antisocial behavior was predictive of adult alcoholism" (Lewis, Bucholz 1991 188).

Another interesting finding reported by Lewis and Bucholz is that both APD and conduct disorder are more closely associated with alcoholism than a family problem drinking history, and are more closely associated with women than with men (Lewis, Bucholz 1991

192). Therefore, a link between criminal behavior that is antisocial in nature (which all or most criminal behavior is) and alcoholism has been established while specific intentional criminal behavior in those with FAS has not been established.

On the other hand, Lenzer et al hypothesized that

...other children without the range of symptoms necessary for this diagnosis, (FAS) are very probably also suffering from prenatal exposure to alcohol. Prospective studies have shown that certain behavioral and growth abnormalities result from maternal intake of alcohol during pregnancy, even in the absence of definitive facial and other malformations. (1982 903)

The authors also hypothesize that nutritional factors have a relation to the development of FAS, and a milder form of FAS may come about solely because of nutritional deficits caused by alcohol and/or impaired behavior due to withdrawal from alcohol (Lenzer et al 1982 904).

Further, a link has been shown between conduct disorder (CD) children and parents diagnosed with APD, alcoholism, or hysteria. As defined by the DSM-III-R, a diagnosis of conduct disorder requires at least three of the following behaviors within the previous six months:

1. has stolen without confrontation of a victim on more than one occasion
  2. has run away from home overnight at least twice while living in parental or parental surrogate home
  3. often lies
  4. has deliberately engaged in fire-setting
  5. is often truant from school (or absent from work)
  6. has broken into someone else's house, building, or car
  7. has deliberately destroyed other's property
  8. has been physically cruel to animals
  9. has forced someone into sexual activity with him or her
  10. has used a weapon in more than one fight
  11. often initiates physical fights
  12. has stolen with confrontation of a victim
  13. has been physically cruel to people
- (DSM-III-R, 1987 58)

Conduct disorder (CD) is the diagnosis given to the youths under the age of eighteen

who may have many of the personality characteristics of APD; and to adults who are behaviorally disturbed, but not to APD extent. It can be assumed that children with CD will likely move into APD as they get older if they are not involved in treatment. Lahey et al's (1987 163) findings on the origins of CD in children and the link to alcohol form an important causation hypothesis for criminal behavior. If children diagnosed with CD have fathers who are alcoholic APD'S, it will be comparable to having a behavioral flag for counselors, etc., who will have to treat that child. If they can assume the link between father's APD and child's CD, the counselors will be able to apply proper counseling techniques and possibly head off future criminal behavior. It is also interesting that this link between criminal behavior from father to son seems to be genetic.

Individuals with conduct disorders have a difficult temperament, poor moral judgment, sensation seeking behaviors, and are impulsive. Their interpersonal relationships are hostile and they exhibit verbally aggressive responses in conflict situations, as well as little empathic ability. They have deficits in language development and language use, poor school performance and increased grade repetitions, as well as an increase in reading retardation (Werry et al 1987 136). The parents and families of individuals with conduct disorder use inconsistent, punitive, or harsh discipline and give inadequate supervision. Additionally, these families show explosive expression of anger, as well as criminal behaviors (Werry et al 1987 361).

Research has indicated two types of family risk factors that are linked to childhood conduct disorder, parental psychopathology and parenting behavior (Frick et al 1992 49). High rates of antisocial personality disorder, substance abuse and maternal depression have been consistent in the parents of adolescents with conduct disorder (Frick 1992 49). Mothers of children with CD are more likely to exhibit APD, as well as criminal behavior and a high rate of diagnosed hysteria (Lahey et al 1989 512). Children with CD had mothers who were significantly more likely than mothers of control children (non-CD) to be poor at supervising their child's behavior and inconsistent when applying discipline (Frick 1992 54). Additional research indicated that children of fathers who were sociopathic or alcoholic were found to be more likely to exhibit severe CD than children of fathers without these

**Table 1: A Comparison of APD and FAS-FAE**

APD	FAS-FAE
usually bright	usually mentally retarded
fails to conform to social norms	does not comprehend social norms
is aggressive	is not willfully aggressive
is impulsive	is impulsive
lies with understanding	lies without understanding
has good understanding of the rules, but does not want to play by them	no concept of rules
no obvious physical attributes	specific facial features
behavior problems	behavior problems

disorders (Lahey et al 1988 163). The fathers of children with CD were more likely to be diagnosed APD and were more likely to exhibit either alcoholism or APD (Lahey et al 1988 163). Children with CD are more likely to have both mothers and fathers who qualify for the diagnosis of APD, as well as fathers who abuse substances (Lahey 1988 167). CD children who exhibited the greatest amount of physical aggression and other law breaking behavior had fathers who were more likely to exhibit the same kind of antisocial behavior (Lahey et al 1988 168). It is likely that a specific pattern of aggressive and law breaking behavior is passed from father to child (Lahey et al 1988 169).

## CONCLUSION

So far, there has been no proven link between APD and FAS-FAE regarding the causation of intentional criminal behavior. There is, however, a link between fathers with APD and alcoholism and children with CD. The problem with trying to link FAS and crime lies in the frequency of mental retardation associated with FAS (and FAE). In this respect, saying there is a link between intentional criminal behavior and FAS is comparable to believing a paranoid schizophrenic or someone who is mentally retarded is able to form intent. Historically, one of the marks of a civilized nation is that it requires the formation of two things for an act to be considered a crime—*mens rea* and *actus rea*. A mentally ill or mentally retarded person is considered by civilized society to be unable to form intent and as such is treated differently by the criminal justice system than the person judged intelligent and sane, who is able to form intent. One of the problems with criminal behavior and FAS theory is that mental retardation is so

prevalent in FAS; contrary to popular opinion it is not the mentally retarded who generally fill the prisons of the U.S., but the APD's who are at least marginally intelligent, and sometimes quite brilliant. Therefore, a separation must be made between popular opinion and fact.

The most important findings as to the link between alcohol and criminal behavior are Lahey et al's (1989) findings which link CD in children to APD and alcoholism in their parents. In this respect, it would be good to define a new term to go along with FAS and FAE which pertains to a fetal alcohol effect without mental retardation as such. Much research still needs to be done in the area of parents' drug abuse and the effect it has on their children. Such research should not only focus on the mother's alcohol and other drug behavior during pregnancy, but should also focus on the father's alcohol and drug behavior prior to conception. If we as a society know where our criminals are coming from, we owe it to ourselves to attempt an intervention. Although people suffering from FAS and FAE should not be allowed to commit crimes, we as a society must determine to treat them as we would other mentally retarded people (granted FAS retardation is somewhat different from "classic" retardation). Nevertheless, we must find an equitable way for our criminal justice system to treat the thousands of FAS and FAE people who will be coming into the system. And while a Not Guilty By Reason of Insanity verdict may be an inappropriate method of dealing with FAS offenders, we must find some sort of solution before we are inundated with more FAS-FAE offenders, as well as the ever expanding crop of crack babies.

The association between FAS-FAE individuals with antisocial personality disorder is multifaceted in that there are many dependent

variables that come into play with these children, illustrated here by Table 1's comparison of FAS-FAE and sociopathy. Much more research is needed before a definitive statement can be made concerning the degree to which FAS-FAE contributes to antisocial personality disorder in adults. In the opinion of the authors, the greatest similarity appears to be not with the FAS children, but with the FAE children who have a higher I.Q. The true FAS child is in the I.Q. range of retarded, whereas a normal to high I.Q. is thought to be one of the characteristics for sociopathy (Sears 1991 43).

FAE children with normal I.Q.'s have been documented as having behaviors (lying, stealing, cheating, failure to consider consequences, no reciprocal friendships, etc.) that will easily fit the same criteria for APD (and conduct disorder at a very young age). But the greatest contributing variable that affects FAS-FAE children is the type of home environment in which they are raised. The inconsistent care, neglect, and abuse that can result for the children from alcohol and other drug using homes is well documented. The effects of this kind of environment on non drug/alcohol prenatally exposed children is a serious danger for proper development. When one adds the effects suffered by FAS-FAE children to the inconsistent, unstable, explosive, abusive, and neglectful home life with the chemically dependent parent, the consequences are grim indeed for the child and the likelihood of conduct disorder and antisocial personality disorder increase significantly.

## REFERENCES

American Psychiatric Association 1952 *Diagnostic and Statistical Manual of Mental Disorders* Washington, D.C.: American Psychiatric Association

\_\_\_\_\_ 1968 *Diagnostic and Statistical Manual of Mental Disorders* 2nd ed., Washington, D.C.: American Psychiatric Association

\_\_\_\_\_ 1980 *Diagnostic and Statistical Manual of Mental Disorders* 3rd ed., Washington, D.C.: American Psychiatric Association

\_\_\_\_\_ 1987 *Diagnostic and Statistical Manual of Mental Disorders* 3rd ed.-Revised Washington, D.C.: American Psychiatric Association

Bartol CR, AM Bartol 1986 *Criminal Behavior: A Psychosocial Approach* Englewood Cliffs, New Jersey: Prentice-Hall

Brown University Child Behavior Development Letter 1991 FAS has lifelong negative effects, study says April 3

Capron AM 1992 Fetal alcohol and felony *Hastings Center Report* May-June 28-29

Conry J 1990 Neuropsychological deficits in fetal alcohol syndrome and fetal alcohol effects *Alcoholism: Clinical Experimental Res* vol 14 5 650-655

Dorris M 1989 *The Broken Chord* NY: Harper and Row

Frick PY, B Lahey, R Loeber, M Stouthamer-Loeber, MAG Christ, K Hanson 1992 Familial risk factors to oppositional defiant disorders and conduct disorder: parental psychopathology and maternal parenting *J Consult Clinical Psych* ???

Gittler J, M McPherson 1990 Prenatal substance abuse *Children Today* July-August 3-8

Holcomb WR, JH Kashani 1991 Personality characteristics of a community sample of adolescents with conduct disorders *Adolescence* vol 26 103 579-586

Lahey B, JC Piacentine, K McBurnett, P Stone, S Hardage, G Hynd 1989 Psychopathology in the parents of children with conduct disorder and hyperactivity *J Amer Acad Child Adoles Psychiatry* vol 27 2 163-169

Lenzer L, C Hourihan, C Ryan 1982 Relation between behavioral and physical abnormalities associated with prenatal exposure to alcohol: present speculations *Perceptual Motor Skill* 55 903-912

Lewis C, K Bucholz 1991 Alcoholism, anti-social behavior, and family history *J Addiction* 86 177-194

Nightline 1992 ABC News, April 15

National Institute on Alcohol Abuse and Alcoholism 1991 Fetal alcohol syndrome *Alcohol Alert* 13 July 1-3.

Ressler R, AP Burgess, DJ Douglas 1988 *Sexual Homicide Patterns and Motives* NY: Lexington Books

Sears J 1991 The motivation and development of serial murder *Scholarly Resource Imprint* Wilmington, Delaware

Streissguth A, JM Aase, SK Clarren, SP Randels, RA LaDue, DF Smith 1991 Fetal alcohol syndrome *J Amer Med Ass* vol 265 15 1961-1967

Werry JS, JC Reeves, GS Eikind 1987 Attention deficit, conduct oppositional and anxiety disorder in children: I. A review of research on differentiability characteristics *J Amer Acad Child Adoles Psychiatry* 133-141

Wilson C 1989 *Written in Blood the Criminal Mind and Method* NY: Warner Books

## SEX-ROLE DIFFERENTIATION: EXPLORING RACE DIFFERENCES

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### ABSTRACT

Studies have shown contradictory patterns regarding sex role differentiation when comparing the black and white community. Researchers have reported that black males and females, when compared to white males and females, either do not perceive sex roles in bipolar terms and create an atmosphere of little sex role differentiation, or are more sex role stereotyped and create an environment where the roles of men are clearly distinguished from the roles of women. The results of this analysis support the argument that there is little sex role differentiation between black males and females when compared to white males and females. Furthermore, the sex role differentiation which exists within the white community is dependent upon educational attainment.

### INTRODUCTION

Studies which have explored similarity in the sex role attitudes of males and females in different racial groups have failed to find consistent patterns of differentiation. On the one hand, some studies have shown there is less sex role stereotyping between black males and females when compared to white males and females (Unger 1979). These findings are often explained by the contemporary context of gender relations within the black community. In reference to black males, Staples argues

Their own lowly position has effectively prevented them from suppressing their women in the same manner that white males have dominated white females. They have been forced to adopt more egalitarian views towards the role of women as a result. (1978 179)

In addition, the extensive labor force participation and economic independence of black women, coupled with their egalitarian role in family decision making, have resulted in an integration of nontraditional roles within their sex role ideology (Malson 1983).

Indeed, both males and females are expected to be nurturant and expressive emotionally as well as independent, confident, and assertive. (Renzetti, Curran 1992 71).

As such, there is a between-sex similarity in reference of both occupational and familial roles within the black community (Unger 1979).

On the other hand, authors have argued that black males and females are as sex role stereotyped, and perhaps even more sex role stereotyped, than white males and females. Bayer (1975) in an analysis of a nationally representative survey of college entrants found that black students, when compared to white

students, were more likely to endorse sexist positions. Ransford and Miller (1983) in their analysis of a national NORC sample reported that black females were not more sex-role feminist in outlook than white females, and that black males were significantly more sex-role traditional than white males. And Hershey's (1978) analysis of racial differences in sex-role identities indicated that sex-typing and traditional sex stereotypes were at least as common among black respondents as among white respondents.

Perhaps these contradictory findings can be explained by educational attainment. Studies have clearly demonstrated that education has a liberalizing effect on opinions and attitudes and is viewed as one means through which sexism can be modified. Schreiber (1978) in an analysis of opinions towards voting for a woman for president found that egalitarian views were directly related to educational level. Thornton and Freedman (1979) in their analysis of change in the sex role attitudes of women demonstrated a substantial difference across educational groups, finding a positive association between education and egalitarian attitudes. Bayer stated:

...much of the feminist leadership is employed in colleges and universities and higher education is structured to introduce factual information and philosophies which could reshape the sexist ideologies of students. (1975 396)

Assuming then that education is operating in the same fashion for both blacks and whites, the contradictory patterns of sex role differentiation might be explained by educational differences. Thus, if education is considered, we should expect to find a similar pattern of differentiation between blacks and whites.

The purpose of this study will be to explore sex role differentiation within the black



Table 1: Zero-Order Correlations For All Variables

Variable	1	2	3	4	5	6	7	8	9	10	11
1 Sex	----										
2 Race	----										
3 Educ	-.070**	-.140**	----								
4 Fehome	-.031	-.065**	.361**	----							
5 Fepres	-.049*	.015	.202**	.412**	----						
6 Fepol	-.018	.004	.190**	.504**	.354**	----					
7 Fefam	.030	.025	.289**	.469**	.290**	.383**	----				
8 Fehelp	-.016	.011	.289**	.442**	.290**	.333**	.482**	----			
9 Fework	-.026	-.011	.223**	.276**	.145**	.122**	.232**	.240**	----		
10 Fechld	.134**	.032	.194**	.286**	.216**	.209**	.421**	.285**	.161**	----	
11 Feprsh	.140**	.046*	.128**	.252**	.166**	.180**	.466**	.297**	.145**	.476**	----
Mean	----	----	12.39	1.74	1.84	1.62	1.51	1.63	1.82	1.61	1.47
S.D.	----	----	3.17	.435	.364	.485	.500	.482	.382	.486	.499

\* $p < .05$ ; \*\* $p < .01$ ; Males=1, Females=2; White=1, Black=2; Traditional Response=1, Nontraditional Response=2

and white community to determine if race specific patterns exist as we move across educational levels.

## METHODS

### Sample and Measures

Data for the research were taken from the National Opinion Research Center's General Social Surveys. The NORC surveys are stratified, multistate, area probability samples of clusters of households in the continental United States. Combining data from the 1985-1986 samples, the study sample consisted of 2,857 white males and females and 336 black males and females over the age of eighteen.

Several survey items were directly related to sex role attitudes. Some questions dealt with women and politics: (fehome) "Women should take care of running their homes and leave running the country up to men"; (fepres) "If your party nominated a woman for president, would you vote for her if she were qualified?"; and (fepol) "Most men are better suited emotionally for politics than are most women."

Other questions dealt with the woman's position within the labor force: (fefam) "It is much better for everyone involved if the man is the achiever outside of the home and the woman takes care of the home and the family"; (fehhelp) "It is more important for a wife to help her husband's career than to have one herself"; and (fework) "Do you approve or disapprove of a married woman earning money in business or industry if she has a husband capable of supporting her?"

A third set of questions dealt with the

relationship between a working mother and her child: (fechld) "A working mother can establish just as warm and secure a relationship with her children as a mother who does not work"; and (fepresch) "A preschool child is likely to suffer if his or her mother works."

Responses to all three questions dealing with women and politics and one question concerning the woman's position within the labor force, "Do you approve or disapprove of a married woman earning money in business or industry if she has a husband capable of supporting her," consisted of agreement or disagreement with each of the statements. Responses to two questions dealing with the woman's position within the labor force, "It is much better for everyone involved if the man is the achiever outside of the home and the woman takes care of the home and the family" and "It is more important for a wife to help her husband's career than to have one herself," as well as both questions dealing with the relationship between a working mother and her child consisted of strongly agree, agree, disagree, or strongly disagree. All responses reflecting a traditional attitude were coded 1, while those reflecting a nontraditional attitude were coded 2.

The educational level of the respondents represented the number of years of school the respondents had completed, ranging from 0 to 20+ (8 years of college). The analysis was designed to compare the differentiation of attitudes about sex roles between blacks and whites by educational level. Race was controlled and the interaction term of (sex x education) was used to measure differentiation by

Table 2: Zero-Order Correlations for Blacks and Whites (in Bold)

Variable	1	2	3	4	5	6	7	8	9	10
1 Sex	----									
2 Educ	-.008	----								
3 Fehome	<b>-.077**</b>	.431**	----							
4 Fepres	<b>-.040</b>	<b>.343**</b>		----						
5 Fepol	<b>-.052*</b>	<b>.222**</b>	<b>.325**</b>		----					
6 Fefam	.077	<b>.210**</b>	<b>.566**</b>	<b>.327**</b>		----				
7 Fehelp	<b>-.031</b>	<b>.196**</b>	<b>.497**</b>	<b>.357**</b>			----			
8 Fework	.032	<b>.287**</b>	<b>.481**</b>	<b>.149*</b>	<b>.351**</b>			----		
9 Fechld	<b>.029</b>	<b>.297**</b>	<b>.468**</b>	<b>.306**</b>	<b>.387**</b>				----	
10 Feprsh	.079	<b>.309**</b>	<b>.399**</b>	<b>.178*</b>	<b>.308**</b>	<b>.356**</b>				----
Mean	<b>-.029</b>	<b>.300**</b>	<b>.453**</b>	<b>.302**</b>	<b>.335**</b>	<b>.495**</b>				
S.D.	<b>-.037</b>	<b>.265**</b>	<b>.288**</b>	<b>.183**</b>	<b>.199**</b>	<b>.213**</b>	<b>.249**</b>			
	<b>-.025</b>	<b>.220**</b>	<b>.276**</b>	<b>.144**</b>	<b>.116**</b>	<b>.236**</b>	<b>.244**</b>			
	<b>.147*</b>	<b>.119</b>	<b>.326**</b>	<b>.188**</b>	<b>.265**</b>	<b>.384**</b>	<b>.164*</b>	<b>.074</b>		
	<b>.130**</b>	<b>.212**</b>	<b>.281**</b>	<b>.219**</b>	<b>.197**</b>	<b>.425**</b>	<b>.297**</b>	<b>.171**</b>		
	<b>.121</b>	<b>.170*</b>	<b>.369**</b>	<b>.221**</b>	<b>.267**</b>	<b>.532**</b>	<b>.188**</b>	<b>.104</b>	<b>.498**</b>	
	<b>.143**</b>	<b>.139**</b>	<b>.247**</b>	<b>.159**</b>	<b>.172**</b>	<b>.463**</b>	<b>.311**</b>	<b>.153**</b>	<b>.476**</b>	
Mean	----	11.06	1.65	1.88	1.61	1.50	1.66	1.81	1.65	1.58
S.D.	----	<b>12.59</b>	<b>1.75</b>	<b>1.83</b>	<b>1.61</b>	<b>1.51</b>	<b>1.63</b>	<b>1.82</b>	<b>1.61</b>	<b>1.46</b>
	----	3.60	.475	.320	.487	.501	.472	.388	.475	.494
	----	<b>3.03</b>	<b>.428</b>	<b>.368</b>	<b>.486</b>	<b>.500</b>	<b>.483</b>	<b>.380</b>	<b>.488</b>	<b>.499</b>

\*  $p < .05$ ; \*\*  $p < .01$ ; Male=1, Female=2; Traditional Response = 1, Nontraditional Response = 2

level of education.

## RESULTS

In Table 1 Zero-order correlations between the variables are presented. Only the independent variable of education displays a consistently significant association with the dependent variables. In each case the association indicates that as education increases, so too does egalitarian attitudes. It is also interesting to note that there are only moderate associations between the eight dependent variables.

Table 2 shows the Zero-order correlations between variables controlling for race. Again, the variable of education displays a consistently significant association with the dependent variables for both blacks and whites. Once again this association indicates egalitarian attitudes are associated with higher levels of education.

The core of the findings are presented in Table 3 which reports the results of the multiple regression analyses. Among black males and females (left side) we find six significant educational differences that do not differ by

sex. In each case, persons with higher levels of education are less traditional—or more egalitarian—in their attitudes toward: (fehome) women taking care of their homes and men running the country; (fepol) men being better suited for politics; (fefam) men achieving outside of the home while women take care of the home; (fehhelp) a wife helping her husband's career before her own; (fework) a married woman earning money in business if she has a husband capable of supporting her; and (fechld) a working mother establishing a warm and secure relationship with her child.

The unstandardized regression coefficients also reveal one significant interaction. When we consider (fepresch) a preschool child suffering if his or her mother works, we note that as education increases, sex role differentiation increases. First, there is not a significant sex or educational difference. However, the interaction between sex and education indicates that highly educated women, compared to highly educated men, become so nontraditional in attitude that sex role differentiation actually increases.

Among white males and females (Table

**Table 3: Sex-Related Attitudes by Sex, Education, and Sex\*Education for Blacks and Whites Separately**

Variables	Blacks						Whites					
	N	a	Sex	Educ	Sex*Educ	R2	N	a	Sex	Educ	Sex*Educ	R2
Fehome	316	1.12	-.172	.046**	.017	.173	2523	1.27	-.289**	.039**	.021**	.129
Fepres	320	1.80	-.199	.008	.015	.038	2508	1.62	-.218**	.018**	.014**	.051
Fepol	313	1.32	.000	.023*	.004	.039	2490	1.34	-.214**	.022**	.015*	.038
Fefam	323	1.12	-.153	.034**	.014	.088	2540	.963	-.184*	.042**	.018**	.097
Fehelp	320	1.14	.129	.044**	-.006	.106	2507	1.13	-.269**	.040**	.021**	.102
Fework	325	1.50	-.086	.029**	.004	.086	2522	1.52	-.104	.024**	.007	.050
Fechld	323	1.27	.275	.025**	-.010	.054	2572	1.16	.001	.029**	.011	.062
Fepresch	327	1.41	-.226	.008	.031*	.054	2531	1.16	-.043	.017**	.015*	.041

\*  $p < .05$ ; \*\*  $p < .01$ ; Male = 0, Female = 1; Traditional Response = 1, Nontraditional Response = 2

3 right side) we find two significant educational effects that do not vary by sex. These interactions reveal that those with higher levels of education are less traditional in attitude when addressing (fework) a married woman earning money in business if she has a husband capable of supporting her and (fechld) a working mother establishing a warm and secure relationship with her child.

We also find six significant interaction effects. The first pattern is found on attitudes toward: (fehome) women taking care of their homes and men running the country; (fepres) voting for a woman for president; (fepol) men being better suited for politics; (fefam) men achieving outside of the home while women take care of the home; and (fehelf) a wife helping her husband's career before her own. In each case, there is a significant sex difference indicating that females are more traditional in their attitudes. There is also a significant educational difference indicating those with higher levels of education are less traditional in attitude. Yet, the interaction term indicates that with education, women make such a substantial movement towards a nontraditional attitude that sex role differentiation decreases between men and women with higher levels of education.

The second pattern is found on the attitude toward (fepresch) a preschool child suffering if his or her mother works. When we consider this variable, it is important to note that there is not a significant sex difference, but a significant educational difference which indicates that more highly educated are less traditional in attitude. However, the combined effect of sex and education indicates that the movement by females towards a nontraditional attitude actually increases sex role differentiation between the sexes at higher educational

levels.

## DISCUSSION

The results of this analysis indicate that there is a difference in the pattern of sex role differentiation between black males and females when compared to white males and females. First, the analysis supports the argument that there is less sex role differentiation between black males and females. Secondly, this lack of sex role differentiation among black males and females remains constant even when education is considered. In contrast, the analysis of white males and females shows that the amount of sex role differentiation between the sexes varies according to educational attainment. In fact, as the level of education increases, sex role differentiation between white males and females decreases.

How then can we explain such very different patterns of sex role differentiation? As discussed earlier, part of the explanation may be due to the historical and social position of the black male (Staples 1978) or the integration of both traditional and nontraditional roles within the sex role ideology of the black female (Malson 1983). Yet it may also be that black males and females simply do not adhere to the dominant culture's traditional sex role attitudes as such attitudes are opposed to a common goal. Attitudes that create a competitive, rather than a cooperative atmosphere, will not aid black males and females in their unified effort to end racism. As Kane stated,

conflict between men and women over gender inequality within the black community may be muted by shared resistance to racial inequality, especially because racial oppression tends to have greater salience. (1992:312)

Even if black males and females are in agreement with the dominant culture's traditional sex role attitudes, black males and females often lack the means to act out these roles. Franklin and Pillow stated

our society today undoubtedly remains structured in such a manner that the vast majority of black men encounter insurmountable barriers to the attainment of a masculine status as defined by most Americans. (1986 110)

For example, when compared to white men, black men have a significantly higher rate of unemployment and there still appears a very large gap between the two groups when considering educational attainment. Complicating this situation is the fact that the median family income of blacks continues to fall below that of whites. This situation then often prevents black men from fulfilling an instrumental role, while at the same time making it necessary for black women to assume an instrumental role (Blackwell 1991).

For white males and females, however, conflict between men and women over gender inequality is not muted by racial inequality and therefore salient within the community. Furthermore, as found here, the gender inequality which exists is most salient among those who lack higher levels of education - those who are not exposed to liberal opinions and attitudes.

On a final note, we might consider the measures of sex role attitudes used in this analysis. While issues surrounding a woman's position and participation in the labor force may serve well to measure differentiation within

the white community, these same measures may not be effective measures of differentiation within the black community. For white women, working outside of the home has a greater element of choice; for black women, the greater element of choice is replaced by necessity.

Still this analysis confirms very different patterns of sex role differentiation between the black and white community and lays the foundation for further exploration.

#### REFERENCES

- Bayer A 1975 Sexist students in American colleges: a descriptive note *J Marriage Family* 37 391-397
- Blackwell J 1991 *The Black Community: Diversity and Unity* NY: Harper Collins
- Franklin C, W Pillow 1986 The black male's acceptance of the prince charming ideal. 69-76 in R Staples ed *The Black Family: Essays and Studies* CA: Wadsworth
- Hershey M 1978 Racial differences in sex role identities and sex-stereotyping: evidence against a common assumption *Soc Sci Qrtly* 58 583-596
- Kane E 1992 Race, gender, and attitudes toward gender stratification *Soc Psych Qrtly* 55 331-320
- Malson M 1983 Black women's sex roles: the social context for a new ideology *J Soc Issues* 39 101-113
- Ransford H, J Miller 1983 Race, sex, and feminist outlook *Amer Sociol Rev* 48 46-59
- Renzetti C, D Curran 1992 *Women, Men and Society* MA: Allyn and Bacon
- Schreiber E 1978 Education and change in American opinions on a woman for president *Public Opinion Qrtly* 42 171-182
- Staples R 1978 Masculinity and race: the dual dilemma of black men *J Soc Issues* 1 169-183
- Thomton A, D Freedman 1979 Changes in the sex role attitudes of women, 1962-1977: evidence from a panel study *Amer Sociol Rev* 44 831-842
- Unger R 1979 *Female and Male: Psychological Perspectives* NY: Harper and Row

## BLACK/WHITE COMPARISONS IN NEGATIVE STEREOTYPES TOWARD OLDER PEOPLE

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### ABSTRACT

The present study compares Blacks' and Whites' stereotypes of older people. The respondents are college students of a state university in the Southeast (N = 492). The study uses a recently developed Stereotypes Toward Older People Scale, consisting of intolerance, health behavior, negative personality characteristics, and inactivity dimensions and has demonstrated reliability and validity. Few studies have specifically compared Black and White differences in negative stereotypes toward older individuals, but instead have used race as a control variable. Results of this study show that without employing control variables, Blacks as compared to Whites believe that older people have more intolerance, have negative personality characteristics, and are inactive. However, when respondents' gender, age, family income and academic major were controlled, the study found that respondents' age accounted for the racial differences in negative personality characteristics, and family income accounted for the racial difference in the intolerance toward older individuals. The implications of these findings are discussed and their potential effects on the informal and formal support sectors.

### INTRODUCTION

Most all societies classify their members based on demographic characteristics and these classifications have implications for both society as a whole and the members of a particular category. For example, North Americans have developed negative stereotypes toward older individuals that may be unequalled by any other society (Palmore 1990 3-5). Stereotypes, which can have both positive and negative components, are mistaken or exaggerated beliefs about a group (Hooymann, Kiyak 1998 525; Palmore 1990 18; Stephan et al 1993). In other words, stereotypes can be right or wrong to differing degrees, but tend to be over-generalizations. Negative stereotypes toward older people are held by people of all races, ages, educational levels, social classes and occupations in the U.S. (Levin, Levin 1980; Palmore 1990). Some examples of negative stereotypes are that "all old people are senile" and "all old people are grouchy" (Hooymann, Kiyak 1988 526).

Negative stereotypes toward older individuals affect social policies and service provision (Palmore 1990; Schaie 1988), impede medical and mental health treatment of older persons (Butler 1975; Levin, Levin 1980), and likely diminish the self-esteem and feelings of adequacy, usefulness and security of older persons (Hooymann, Kiyak 1988 524; Kogan 1979). Additionally, research shows that most health professionals have negative stereotypes toward older adults and prefer to treat children or young adults (Palmore 1990). Palmore (1990 11-17) claims that older individuals are similar to minority groups in that they have a sense of group identity with accompanying status-role expectations.

Even with the prevalence of negative stereotypes toward older people in American society and the deleterious effects these stereotypes have on the elderly, few studies have specifically addressed Black/White differences in negative stereotypes toward older people. However, Lucas and Roy (1992) did explore only black female attitude toward older people. At any rate, most of the past studies on negative stereotypes toward older people use social background variables, such as race, as a control variable, rather than as a primary independent variable. Authors have noted that variability across race is an important source of information that should be attained when exploring potential differences in attitudes or stereotypes toward older people (Kraus 1980; Levine 1982).

In previous research on Black/White differences in intergenerational relations (Mindel et al 1986; Mitchell, Register 1984; Mutran 1985; Smerglia et al 1988), gender, socioeconomic status and geographical residence have not been controlled. Thus, from a sample of college students, the central concern of the present study is whether racial differences in negative stereotypes toward older individuals exist with social background variables (i.e., gender, family income, and students' academic major) controlled. These control variables should provide more detailed information about the potential racial differences, which past research has neglected.

### CONCEPTUALIZATION OF STEREOTYPES

Palmore (1990 15) defined *ageism* as a "prejudice or discrimination against or in favor of an age group." "Prejudice against an age group" is a negative stereotype about that

group (e.g., all old people are grouchy"). Negative stereotypes are derogatory beliefs about a group that is based upon mistaken or exaggerated perceptions (Palmore 1990 18).

Stereotypes are a form of attitudes (Hooyman, Kiyak 1988 525; Palmore 1990 18-19). More specifically, negative stereotypes can lead to negative attitudes (Palmore 1990 18). Moreover, stereotypes can affect inter-group relations. At the individual level, they bias information processing regarding in-group and out-group members, which in turn facilitate self-fulfilling prophecies (Stephan 1985, 1989; Stephan, Stephan 1989). At the group level, stereotypes often serve to differentiate the in-group from the out-group. Moreover, stereotypes may be incorporated into the in-group's ideology and used to justify and explain behavior toward the out-group (Stephan et al 1993; Stroebe, Insko 1989).

### **RACIAL DIFFERENCES IN STEREOTYPES TOWARD THE ELDERLY**

Research suggested that the behavior of Blacks toward the elderly is different from that of Whites (Baressi, Mennon 1990; Lucas, Roy 1993; Wylie 1971). For instance, Blacks generally hold elders in higher regard and respect than Whites (Lucas, Roy 1992). This higher admiration of older individuals among Blacks has resulted in intergenerational continuity (Willie 1988 275). Mutran (1985) found that Black families experience a greater degree of reciprocal assistance across generations than do White families. In addition, Blacks as compared to Whites were more likely to include the elderly in familial activities and to regard the elderly with respect, if not veneration (Lucas, Roy 1992; Wylie 1971). Wylie (1971) found that Blacks see old age as a sign of dignity—with older people having important input regarding the affairs of the community.

Extended families and intergenerational relations are more prevalent among Blacks (Hill, Shackelford 1986; Hofferth 1984; Tienda, Angel 1982). Recent surveys of elderly Blacks indicated that they had extensive contact with their children and grandchildren and also take proactive roles in their socialization and development (Brown et al 1992; Burton 1992; Burton, Bengston 1985; Cantor 1979; Kiecolt, Acok 1990; Minkler et al 1992). Likewise, younger Blacks typically spend more time with their grandparents during their youthful life (Burton 1992; Minkler et al 1992; Peacock, Talley 1984). Furthermore, Black youngsters

develop affectional ties with their grandparents, which in turn can lead to favorable impressions toward older individuals (Nobles 1981). In other words, research suggested that Blacks were more socially integrated with older adults.

In addition, research indicated that Blacks provided more informal social support, instrumental support (i.e., food, money, and running errands) and cognitive aid (visiting and companionship) to their elder family members (Cantor 1979; Lucas, Roy 1992; Smerglia et al 1988; Tate 1983; Taylor, Chatters 1986). Moreover, Cantor (1979) found in her examination of Black and White families that a larger percentage of Black children, compared to Whites, assisted their elders in the chores of daily living and shopping. It is not clear, however, whether greater young-old contact in the Black community is by choice, circumstances, or both.

Taylor and Chatters (1986) found that Black as compared to White adult children are much more likely to provide instrumental or material aid (food, money, transportation, running errands) and cognitive aid (visiting, companionship) to their older relatives. Similarly, Lawton et al (1992) found that Black caregivers express a greater sense of caregiving mastery and more strongly espouse traditional caregiving ideology. In terms of caregiving appraisal, Black caregivers express less subjective burden, greater caregiving satisfaction, and less perceived intrusion on their lives because of caregiving (Hinrichsen, Ramirez 1992; Lawton et al 1992). Thus, these studies suggested that Whites and Blacks view and treat older individuals differently, which could be related to differences in negative stereotypes toward older individuals.

There are several factors—**gender, age, socioeconomic background, academic major**—that may be important to attempt to understand Black/White differences in stereotypes. Regardless of race, females are more likely than males to assume the role of informal caregiver for family members who are older (Lucas, Roy 1992; Taylor, Chatters 1986). Older Blacks tended to prefer and to rely on assistance from a daughter before turning to other offspring or relatives (Baressi, Mennon 1990; Lucas, Roy 1992). In fact, a recent study of college students (Lucas, Roy 1992) found that women as compared to men hold more positive attitudes toward the elderly. In particular, Lucas and Roy (1992 80) claimed that

"younger women tend to uphold the traditional value of family responsibility for the old."

The age of the respondents is examined because some research (for example, Brody et al 1984; Lucas, Roy 1992) found that younger individuals as compared to middle-aged individuals are unable to foresee themselves as providing care to the elderly and do not understand the role strain that may be incurred. Brody et al (1984) further pointed out that middle-aged women, who are often both mothers and daughters, understand the physical and psychological demands of caregiving for their elderly parents.

Some relatively recent studies (Mindel et al 1986; Mitchell, Register 1984; Mutran 1985; Smerglia et al 1988) pointed out the need to control for socioeconomic background in studies of racial differences in intergenerational relations (i.e., relationships between older and younger individuals). More specifically, once socioeconomic background was controlled, Mindel et al (1986) found little racial difference regarding age in informal assistance.

The analyses take into consideration academic major because of the selection of students into majors based on personality and career goals is an important factor in a college aged sample. As Ben-Shem and Avi-Itzhak (1991) claimed, students majoring in the humanities and/or social sciences as compared to physical or biological sciences were more likely to have attitudes and values which are more humanitarian. Thus, it is anticipated that academic major will have some association with stereotypes.

Based upon the literature discussed above, I investigate the following questions (Q):

- Q 1) Are there racial differences regarding negative stereotypes toward older people, without employing control variables?
- Q 2) Are there racial differences regarding negative stereotypes toward older people, controlling for age, gender, family income, and academic major?

## METHODS

### Sample

The participants in the study are introductory sociology students drawn from a regional university in the Southeast (N = 492). Students were surveyed outside their regular class meeting time. Respondents were assured that their participation was voluntary

and that their responses were anonymous. It is important to note that the data are not a representative sample of university students, but are valuable in exploring Black/White differences regarding the elderly.

For both race and gender, the sample consists of the following: 346 Whites (70%) and 146 Blacks (30%); 320 women (65%) and 161 men (35%). In addition, the age ranges from 17 to 60 years,  $M = 24.1$ ,  $SD = 8.4$ . The mean family income is \$25,328, while the median is \$15,000. Two-thirds of the respondents are classified as either freshman or sophomores. Academic major distributions consist of 57 percent who study in one of the human service fields (i.e., social sciences, humanities and fine arts, nursing and education); the remaining 43 percent major in either the physical or biological sciences.

## Measures

**Stereotypes Toward Older People.** I use Chumbler's (1994) Stereotypes Toward Older People Scale (STOPS) to assess the students' stereotypes toward older people. Chumbler's (1994) STOPS contains 14 items, measured by a Likert-type seven-point scale (where 1 = never; 7 = always). STOPS is a multidimensional scale. Based upon both exploratory and confirmatory factor analyses, Chumbler (1994) identified four factors that are labeled: 1) Intolerance; 2) Health Behavior; 3) Negative Personality Characteristics; and 4) Inactivity. After employing both exploratory factor analysis (EFA) and confirmatory factor analysis (CFA), the present study found the same factor structure as that of Chumbler (1994). For all four sub-scales (described below), a higher score indicates a negative stereotype of older people.

The first sub-scale, *Intolerance*, contains four-items (minimum factor loading = .48), reflecting perceptions of elders' likelihood of "getting upset", "being grouchy"; "talking to themselves" and "being impatient". This sub-scale has a mean of 14.0 ( $SD = 3.6$ ) and a Cronbach's alpha = .77.

The second factor, *Health Behavior*, contains three-items (minimum factor loading = .60), reflecting perceptions of older individuals' likelihood of "having health problems", "recovering from illness", and "having poor walking ability". This sub-scale has a mean of 12.4 ( $SD = 2.7$ ) and a Cronbach's alpha = .70.

The third factor, *Negative Personality Characteristics*, contains four-items (minimum

**Table 1: Black/White Comparisons of Social Background Characteristics (Means)**

Variables	Blacks N = 146	Whites N = 346
Age	26.31	23.81**
Male	27.30	65.10***
Income	18,411	29,214**
Major - Hum/Soc Sci****	24.90	73.30*

\*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$

Note: "Means" of dichotomous variables represent the percentage of subjects with that characteristic. Differences in nominal variables tested by chi-square; other differences examined by t-test.

\*\*\*\* 2% (or 5) of the respondents left this item unanswered.

factor loading = .44), reflecting older individuals' likelihood of "being set in their ways", "being meddlesome", "being old-fashioned", and "reverting back to the 'good old days'". This sub-scale has a mean of 19.2 (SD = 3.3) and a Cronbach's alpha of .67.

The fourth factor, *Inactivity*, contains three-items (minimum factor loading = .45), reflecting older individuals' likelihood of "being productive", "being optimistic" and "being physically active". This three-item sub-scale has a mean of 11.8 (SD = 2.4) and a Cronbach's alpha of .66.

The remaining variables are measured as follows. **Race** (1 = white), **Gender** (1 = male), **family income** (a 20-point summary scale, where 1 = under \$1000 and 20 = \$60,000 and over), and **academic major** (1 = human service majors).

### Analytic Procedures

The analysis is conducted in two stages. First, the present study examines the average differences in black and white respondents' reports of the four dimensions—intolerance, health behavior, negative personality characteristics and inactivity—that comprise Chumblor's STOPS (1994). Observed differences in the averages of these four sub-scales for Blacks and Whites were tested for statistical significance using the t-test procedure for the difference between means. Second, a multiple regression analysis was employed to ascertain whether age, gender, family income and academic major are significantly associated with negative stereotypes toward older people for Blacks and Whites. Finally, these variables are examined to determine if they account for the race differences. Separate

regression analyses are calculated by race, with respective Beta coefficients compared to assess these variables' relative importance in predicting negative stereotypes for both groups.

### RESULTS

Table 1 presents the social background characteristics for the Blacks and Whites. Table 1 shows that the mean age for Blacks is much higher than that of Whites (26.31 versus 23.81,  $p < .01$ ). Moreover, Table 1 indicates that Whites rather than Blacks are more likely to be male, and to major in either the Humanities or Social Sciences. In addition, Table 1 shows that Whites as compared to Blacks are much more likely to have a higher average family income (\$29,214 versus to \$18,411,  $p < .01$ ).

*Q 1: Are there racial differences in negative stereotypes toward older people, without employing control variables?* Table 2 indicates that there are statistically significant mean differences by race for three of the four sub-scales—intolerance, negative personality characteristics, and inactivity—used to measure negative stereotypes toward older people. More specifically, Blacks as compared to Whites have stronger negative stereotypes regarding intolerance of older people ( $M = 15.00$  versus  $M = 13.55$ ;  $t = 3.33$ ,  $p < .001$ ). Similarly, Blacks instead of Whites have stronger negative stereotypes regarding negative personality characteristics of older individuals ( $M = 20.76$  versus  $M = 18.68$ ),  $t = 6.4$ ,  $p < .001$ . Moreover, Blacks as compared to Whites have stronger negative stereotypes toward older peoples' levels of activity ( $M = 12.31$  versus 11.63;  $t = 2.8$ ,  $p < .01$ ). There are no differences between Blacks and Whites regarding their stereotypes toward older individuals' health behavior.

*Q 2: Are there racial differences in negative stereotypes toward older people, controlling for age, gender, family income, and academic major?* Table 3 presents the multiple regression analyses for the entire sample, as well as for the sample of Whites and Blacks. In particular, Table 3 shows that when respondents' age, gender, family income, and academic major are controlled, there are no statistically significant racial differences in negative stereotypes toward older people for both the inactivity and health behavior dimensions. Table 3 indicates that the racial differences in the negative personality characteristics dimension can be accounted for by the respondents' age. That is, age has a statistically



**Table 2: Mean Scores of Racial Differences in Negative Stereotypes Toward Older People**

Negative Stereotypes Toward Elders	Whites N=346		Blacks N=146		T-test Value
	Means	SD	Means	SD	
Intolerance	13.55	3.10	14.96	4.35	3.33***
Health Behavior	12.33	2.52	12.73	3.14	.57
Negative Personality Characteristics	18.68	2.90	20.76	3.66	6.40***
Inactivity	11.63	2.14	12.31	2.89	2.80**

\*\*  $p < .01$ ; \*\*\*  $p < .001$ 

Note: The scales are coded so that higher numbers indicate stronger negative stereotypes.

**Table 3: Standardized Regression Coefficients for Blacks (N=146) and Whites (N=346) For The Four STOPS Sub-scales On Age, Gender, Family Income, and Academic Major**

Variables	Intolerance			Health Behavior			Negative Personality Characteristics			Inactivity		
	E	W	B	E	W	B	E	W	B	E	W	B
Blacks	.10	--	--	-.06	--	--	.01	--	--	.07	--	--
Age	-.02	.02	-.12	-.09	-.09	-.11	-.18***	-.19***	-.30***	-.04	-.07	-.04
Male	.01	.05	-.05	.00	.06	-.13	.00	.06	-.16	-.09	.07	-.16
Income	-.03	.04	-.20*	-.04	-.02	-.06	-.03	.00	.00	-.01	.02	-.11
Major-Hum/Soc Sci	.06	.05	.06	.06	.05	.05	.04	.05	-.02	.05	.04	.02
Adj R squared	.01	.00	.03	.00	.01	.00	.03**	.04**	.04*	.00	.00	.00

\*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$ 

Note: E = The entire sample of respondents (N=492); W = The sub-sample of White respondents (N=346); B = The sub-sample of Black respondents (N=146).

significant Beta for both the Blacks and Whites, which in turn, accounts for most of the four percent of the variance explained. Thus, Table 3 suggests that both the Black and White respondents who are younger are much more likely to perceive older individuals with negative personality characteristics. Additionally, Table 3 shows that the racial differences in the intolerance dimension could be accounted for by the income level of the Black respondents. For instance, for Blacks, income level has a Beta =  $-.20$ ,  $p < .05$ , whereas for Whites, it has a Beta =  $-.04$ ,  $p > .05$ . Note that the remaining Beta's are not significant and the r-squares are virtually zero.

Finally, Table 3 indicates that when Blacks and Whites are combined into a single model (N = 492), the race effect does *not* remain statistically significant for inactivity, health behavior, and negative personality characteristics dimensions. Similar to the Black and White sub-samples, age has a statistically significant negative direct effect on negative personality characteristics and accounts for most of the three percent of the variance explained.

## CONCLUSION AND DISCUSSION

The present study examined whether

racial differences in negative stereotypes toward older individuals are present among a sample of university students. The study found that without employing control variables, Blacks as compared to Whites were more likely to believe that older individuals were intolerant, possess negative personality characteristics and are inactive. However, when the respondents' age, gender, family income and academic major were controlled, two of the four dimensions of Chumbler's STOPS (1994)—health behavior and inactivity—had no statistically significant differences by race. On the other hand, after these control variables were employed, the other two dimensions, intolerance and negative personality characteristics, still had statistically significant differences. For the intolerance dimension, the results suggest that the statistical difference can be explained, in part, by the Black respondents' family income. That is, those Blacks who have lower incomes are more likely than Whites to believe that older adults are intolerant. Regarding the negative personality characteristics dimension, the respondents' age appeared to explain the racial differences. More specifically, for both Blacks and Whites, the younger respondents are more likely to believe that older individuals have negative personality

characteristics.

The present study followed suggestions from previous research (Lucas, Roy 1992; Mutran 1985; Schwalb, Sedlacek 1990; Smerglia et al 1988) which suggested that potential racial differences in negative stereotypes toward older individuals should explore the potential effects of gender, socioeconomic background and academic major. These data reported here suggest that income levels and age of the individuals are more important than gender and academic major in determining Black and White differences in negative stereotypes toward older people. The statistical differences between Whites and Blacks in the intolerance and personality scales could have implications for the assistance received by older individuals. Blacks typically provide more informal assistance for their elderly family members, while Whites tend to utilize more formal assistance, which requires substantial finances (Smerglia et al 1988).

The present study found that Whites have higher family incomes. However, family income was not associated by racial differences in negative stereotypes toward older individuals. Future research could explore whether family incomes are influential for Blacks in their caregiving responsibilities. Moreover, research could explore if individuals who have higher incomes feel they are relieved of caregiving responsibilities because they provide financial assistance or whether they are preoccupied and unavailable to offer direct caregiving assistance.

Future research should also explore why Blacks and Whites display negative personality characteristics toward older people. Moreover, recall that age had a statistically significant direct on negative personality characteristics for the entire sample as well as for the Black and White sub-samples. Research, hereafter, should explore the association between age and views of elder's negative personality characteristics.

In addition, further research might explore questions about specific likes and dislikes about older people. This would provide an understanding of how stereotypes develop. I should also note that the students were not asked to respond to any questions concerning the caregiving situation; therefore, there is insufficient evidence to conclude whether they would accept or reject such a situation if faced with the necessity to do so. Moreover, the amount of contact the students maintain with

older adults was not addressed in this study. This is a shortcoming to the study since (Townsend 1971) has shown that individuals who have more personal contact with older individuals do not possess as many myths and stereotypes. I decided not to include "amount of contact" because some scholars (Burton, Bengston 1995; Kiecolt, Acock 1990) claimed that this is an ambiguous construct that needs further measurement work. For instance, "amount of contact" could be measured in "days per week" or "hours per week," both of which could lead to different results.

I should also note that there may be perceptual differences between colleges students and non-college students. Focusing on only college students, such as the present study, reduces the Black/White variation on a number of factors. Even though the study's findings can not be generalizable to the entire United States, the sample has a respectable percentage of Black respondents (i.e., approximately 70% of the sample are White as compared to 30% who are Black). Research studies typically must rely on samples that include respondents of one race or are disproportionate. Future research should relate stereotypes and experiences of the respondents to the stereotypes of students in other geographical regions and to young adults who do not attend college.

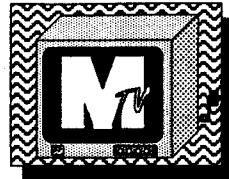
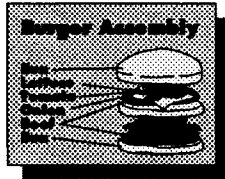
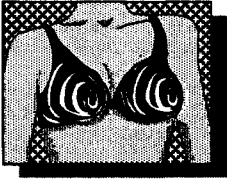
A second limitation of this study is that we conceptualized "the elderly" as all individuals 65 years of age and older. The reality is that "the elderly" may be too diverse to measure as a homogeneous group (Cook 1992). Utilizing the STOPS (1994) scale to measure stereotypes between different age categories of the elderly (e.g., age 65 to 74, 75 to 84 and 85 to 99) might be informative. In addition to addressing the limitations of the present study, future research should investigate the etiology of racial differences in ageist stereotypes. In this regard, longitudinal studies would be valuable in addressing the process leading to negative stereotypes toward older people.

#### REFERENCES

- Baressi CM, G Menon 1990 Diversity in black family caregiving. in Z Harel et al eds *Black Aged* Newbury Park, CA: Sage
- Ben-Shem I, TE Avi-Itzhak 1991 On work values and career choice in freshman students: the case of helping vs. other professions *J Vocational Behav* 39 369-379
- Brody EM, PT Johnson, MC Fulcomer 1984 What should adult children do for elderly parents? Opinions and preferences of three generations of women *J Gerontology* 39 736-746

- Brown DR, NG Milburn, LE Gary 1992 Symptoms of depression among older African-Americans: an analysis of gender differences *Gerontologist* 32 789-796
- Burton LM 1992 Black grandparents rearing children of drug-addicted parents: stressors, outcomes, and social service needs *Gerontologist* 32 744-751
- Burton LM, VL Bengston 1985 Black grandmothers issues of timing and measuring in roles. in VL Bengston, JF Robertson eds *Grandparenthood: Research Policy and Perspectives* Beverly Hills, CA: Sage
- Butler RN 1975 *Why Survive? Being Old in America* NY: Harper and Row
- Cantor MH 1979 The informal support system of New York's inner city elderly: is ethnicity a factor? 153-174 in DE Gelfand, AJ Kutzik eds *Ethnicity and Aging: Theory, Research and Policy* NY: Springer
- Chumblor NR 1994 The development and reliability of a stereotypes toward older people scale. *College Student J* 28 220-229
- Cook FL 1992 Ageism: rhetoric and reality *Gerontologist* 32 292-293
- Hill RB, L Shackelford 1986 The black extended family revisited. 194-200 in R Staples ed *The Black Family: Essays and Studies* 3rd ed Belmont, CA: Wadsworth
- Hinrichsen GA, M Ramirez 1992 Black and white dementia caregivers: a comparison of their adaptation, adjustment and service utilization *Gerontologist* 32 375-381
- Hofferth S 1984 Kin networks, race, and family structure *J Marriage Family* 46 791-806
- Hooyman NR, HA Kiyak 1988 *Social Gerontology: A Multidisciplinary Perspective* Boston: Allyn and Bacon
- Kiecolt KJ, AC Acock 1990 Childhood family structure and adult psychological well-being of black Americans *Sociological Spectrum* 10 169-186
- Kogan N 1979 Beliefs, attitudes and stereotypes about old people: a new look at some old issues *Research on Aging* 1 11-36
- Kraus IK 1980 Between- and within-group comparisons in aging research. 542-551 in LN Poon ed *Aging in the 1980's* Washington, DC: American Psychological Association
- Lawton MP, D Rajagopal, E Brody, MH Kleban 1992 The dynamics of caregiving for a demented elder among black and white families *J Gerontology Soc Sci* S156-S164
- Levin J, WC Levin 1980 *Ageism: Prejudice and Discrimination against the Elderly* Belmont, CA: Wadsworth
- Levine EK 1982 Old people are not alike: social class, ethnicity/race, and sex are bases for important differences. 127-144 in JE Sieber ed *The Ethics of Social Research* NY: Springer-Verlag
- Lucas ET, A Roy 1992 An exploratory study of black female attitudes toward the elderly *Free Inq Creat Sociol* 20 77-82
- Mitchell J, JC Register 1984 Informal and formal health and social support systems of black and white elderly by race, socioeconomic status, and residence *Gerontologist* 24 48-54
- Minkler M, KM Roe, M Price 1992 The physical and emotional health of grandmothers raising grandchildren in the crack cocaine epidemic *Gerontologist* 32 752-761
- Mindel CH, RWright Jr, RA Starret 1986 Informal and formal health and social support systems of black and white elderly: a comparative cost approach *Gerontologist* 26 279-285
- Mutran E 1985 Intergenerational family support among blacks and whites: response to culture or to socioeconomic differences *J Gerontology* 40 382-389
- Nobles WW 1981 African-American family life: an instrument of culture. in HP McAdoo ed *Black Families* Beverly Hills, CA: Sage
- Palmore EB 1990 *Ageism: Negative and Positive* NY: Springer
- Peacock EW, WM Tailey 1984 Intergenerational contact: a way to counteract ageism *Educational Gerontology* 10 13-24
- Schwab SJ, WE Sedlacek 1991 Have college students' attitudes toward older people changed? *J College Student Development* 31 127-132
- Schaie KW 1988 Ageism in psychological research *Amer Psychologist* 43 179-183
- Smerglia VL, GT Deimling, CM Barresi 1988 Black/white family comparisons in helping and decision-making networks of impaired elderly *Family Relations* 37 305-309
- Stephan WG 1985 Intergroup Relations. 599-658 in G Lindzey, E Aronson eds *Handbook of Social Psychology* 3rd ed NY: Random House
- \_\_\_\_\_ 1989 Cognitions and the stereotyping process. 37-58 in D Bar-Tel, CF Graumann, AW Kruglanski, W Stroebe eds *Stereotypes and Prejudice: Changing Conceptions* NY: Springer-Verlag
- Stephan WG, CW Stephan 1989 Cognition and affect in stereotyping: parallel interactive networks. 111-126 in DM Mackie, DL Hamilton eds *Affect, Cognition, and Stereotyping: Interactive Processes in Group Perception* Orlando: Academic Press
- Stephan WG, CW Stephan, T Stefanenko, V Ageyev, M Abalakina, L Coates-Shrider 1993 Measuring stereotypes: a comparison of methods using Russian and American samples *Social Psychology Qrtly* 56 54-64
- Stroebe W, C Insko 1989 Stereotype, prejudice, and discrimination: changing conceptions in theory and research. 3-36 in D Bar-Tal, CF Graumann, AW Kruglanski, W Stroebe eds *Stereotypes and Prejudice: Changing Conceptions* NY: Springer-Verlag
- Tate N 1983 The black aging experience. in RLMcNeely, JL Colen eds *Aging in Minority Groups* Beverly Hills, CA: Sage
- Taylor RJ, L Chatters 1986 Patterns of informal support to elderly black adults: family, friends, and church members *Social Work* 31 432-438
- Tienda M, R Angel 1982 Headship and household composition among blacks, Hispanics, and other whites *Social Forces* 61 508-531
- Willie CV 1988 *Black and White Families: A Study in Complementarity* Dix Hills, NY: General-Hall
- Wylie FM 1971 Attitudes toward aging and the aged among black Americans: some historical perspectives *Aging and Human Development* 2: 66-69 equest, from the author.

# postmodern icons explained



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