Sex and Sexuality in the United States: A Brief History of Culture Wars

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National advocacy organizations have scripted the public conversation on sex education through rhetorical frames, which organize ambivalence, confusion, and anxieties into tidy sound bites designed for mass mobilization (Jane Irvine 2002:8).

Introduction

The HIV/AIDS pandemic has entered its thirtieth year; sex trafficking persists as an $8 billion industry (May 2006); unwanted pregnancies and transmission of sexually transmitted infections (STIs) continuously occur due to a lack of simple knowledge. Despite these exigencies, we find our politicians, parents, and teachers still merely quibbling about standards of modesty considered to be essential for maintaining a distorted concept of virtue. There are many questions concerning sexual education in the United States that beg unified answers. Should we increase the depth of sexual education and access to birth control? Or should we emphasize the role of abstinence as the most effective mode of protection while holding back important information about contraception and sex? Sexual behavior, however, has become too conspicuous a topic to let it remain an impenetrable enigma. The belief that sex and love should be left as unexplored mysteries rather than subjects of analysis has played a powerful role in United States’ discussions of sexual education.
The “indefatigable sexual curiosity” exhibited by youth must be met with comprehensive education (Irvine 2002:5). Comprehensive sexual education acquaints youth with techniques of preventing pregnancy and STIs, preventative testing, discussion of sexual orientation, and the psycho-emotional pros and cons of engaging in intimate relationships. In contrast to the heightened detail in this form of education, “abstinence-only” programs promote a more parochial version of safe sex that not only discourages the act itself, but disdains discussion about the subtleties of sexuality as well. Abstinence-only programs tend to provide only cursory information about contraception while often avoiding talk about abortion and homosexuality altogether.

In spite of their very apparent drawbacks, abstinence-only programs have dominated the educational scene in the United States for the past thirty years. These programs employ “scare tactics” that endeavor to frighten young people from having sex while ensuring they remain ignorant of vital particularities of sexuality. Discourses of sex that have been popularized in the past sixty years are inherently important when addressing sexual education. Therefore, as in many Public Health, Sociological, Anthropological, and Epidemiological papers that discuss sex, I draw on Foucauldian (1976) concepts of discourses and sexuality in order to elucidate how and why the country considers sexuality the way we do.

**Sexuality and Discourse**

A discourse of repression has characterized discussions of sexuality and its liberation. Repression is often thought of in terms of suppression, or the quashing of
public and widespread discussion of sex. In contrast to this understanding, Foucault (1976) considered there to be a proliferation rather than a silencing of dialogue and discourses concerning sex and sexual activity. Increased dialogue concerning sexuality is ostensibly propitious for advocates of comprehensive education; however, the “discursive explosion surrounding sex in the modern West” actually worked in opposition to liberal agendas (Epstein 2003:489). Discussion of sexual repression in the media and politics exploit notions of oppression and power, perpetuating assertions that American culture is a culture of silence on the topic of sex. Foucault, however, begs quite the opposite. Instead of being cogitatively repressed, sexuality has been talked about with more vigor than ever, motivating Foucault (1976) to understand not why we are repressed, but why we think we are repressed. His ambition is to reveal the “over-all ‘discursive fact’, the way in which sex is ‘put into discourse’ and therefore to unveil the ‘polymorphous techniques of power’” (Foucault 1976:11).

Through a “steady proliferation of discourses”, various organizations, most powerful of which are Christian groups and conservative or liberal institutions, have formed the way Americans think and speak about sex (Foucault 1976:18). Rather than censoring sex, modern social scientists find there has been an uncanny explosion of sexual discourses that have facilitated social and political agendas (see Foucault 1976; Irvine 2002; Shoveller & Johnson 2006). Indeed, there seems to be a “paradox by which social conservatives, who advocate the restriction of sexual speech, have themselves heavily relied on public talk about sex in order to build a movement and mobilize supporters” (Irvine 2002:3). This approach to the politics of sex began as early as the
late 19th century in Europe when the first forays into sexual education were supposed to rid children of sexual imaginations with explicit information (ibid). The intention was to make sex a mundane, matter-of-fact subject that provides no distraction or mystery. By the latter half of the 20th century, however, sexual education had become a politically charged issue that could not be separated from national moral convictions or religious piety.

The social revolutions of the 1960s and 1970s brought along many dramatic changes to American society, among which were second-wave feminism, the Civil Rights movement, sexual liberalization, the birth control pill, and legalization of first-trimester abortion. Rapid cultural restyling, concomitant with the Vietnam War, the Cold War, and the Human Rights movements sparked a culture war in the United States that immediately progressed to the Conservative versus Liberal debates that resonate in today’s socio-political discussions (Irvine, 2002). The essentializing of political stances worked to increase the power of political and interest groups, especially those religious in nature. In the past three decades conservatives of the New Right and the Christian right have “captured political power” by dint of waging “culture wars” against the “corrupting influence of liberalism” (Irvine 2002:9). Additionally, the Civil Rights Act, anti-communism movements, and legislation separating religion from public education actually “prompted widespread conversion to Christianity” which caused a “meteoric rise of evangelicalism, fundamentalism, and Pentecostalism [that] offset declines in mainstream Protestant churches” (ibid: 42).
The growth of Christian fundamentalism and evangelism stirred an uprising of national right-wing organizations that obstinately promoted abstinence-only education programs. While organizations such as the Sexuality Information and Education Council of the United States (SIECUS) emerged to fight for comprehensive sexual education in schools, conservative discourses that promote abstinence-only educational campaigns came to dominate the sex education scene. The domination of sexual discourses by the conservative Right was often conducted through the orchestration of silences. A pivotal aspect of power is the ability to emphasize and suppress the dissemination of particular discourses. In contrast to common perceptions of silence, the Foucauldian understanding perceives it not so much as lack of speech, but as the ability to exercise one voice over another.

The many forms of silence “are an integral part of the strategies that underlie and permeate discourses” (Foucault 1976:27). Instead of discouraging talk about sex entirely, a complete shift in rhetoric instructed people how to talk about sex and who to listen to (ibid). Authoritative institutions established “qualified speakers” and sources of information about sex, effectively silencing others who were not endorsed by those with power. Sex was no longer hidden; rather it was “driven out of hiding and constrained to lead a discursive existence” (Foucault 1976:33,26). Through this methodology sex became a mechanized impulse monitored by those with power – statisticians, sociologists, anthropologists, epidemiologists, psychologists, and health promotion agencies.
Discursive politics have come to dominate the way Americans consider sexuality. They are powerful “because they naturalize particular sets of meanings and... are central in constituting our sense of a social world” (Irvine 2002:10). Unfortunately, the politics have been largely conservative, often reflecting evangelist Christian values of abstinence until marriage and avoidance of “risky behavior” by means of keeping people ignorant of the so-called “risky” behaviors that must be avoided.

A conservative backlash against sexual liberalization of the 1960s and 70s incurred many restrictions upon sexual education. Progressive successes such as the legalization of first-trimester abortion and the introduction of birth-control pills “coincided with a renewed demand for sex education” that would expand to address “sexual orientation, pornography, and unmarried minors” (Greslé-Favier 2010:414). These liberal triumphs met a precipitant end with the commencement of the Reagan administration.

**Battling Abstinence-Only Education**

The inauguration of the Obama administration heralded a more progressive age of sexuality education, yet Greslé-Favier (2010) doubts that Americans at large are apt to rapidly change their conservative views toward sex, marriage, and “risky” behavior. Since the Reagan era of the early 1980s, sexuality education has been increasingly shrouded in discourses of risk, morality, and traditional notions of “saving” oneself for marriage (ibid). In a recent turn of events, the Obama Administration sanctioned a new agenda for sexual education that includes the elimination of federal funds for
abstinence-only programs while investing $50 million toward youth pregnancy prevention and comprehensive programs designed using “evidence-based” models (Kotz 2009). While these changes are ostensibly positive for pro-comprehensive supporters, they have sparked criticism from conservative and liberal factions alike. Many believe this progress is meager, arguing that this “initiative exemplifies the administration’s oft-repeated quest to find new strategies to diffuse some of the nation’s most divisive issues” (Stein 2010).

Further criticisms from the president of the Sexuality Information and Education Council of the United States (SIECUS), arguably the most starkly pro-sex-ed group in the US, charge Obama with an ostensible failure to introduce truly effective programs while maintaining a “myopic approach” that “does not represent...comprehensive sex education” (SIECUS 2009; emphasis in original). Notwithstanding Obama’s motives, the attempted reversal of Bush Jr’s $1.5 billion investment in “abstinence –until- marriage” programs may prove futile if the three decades following the sexual revolution of the 1960s and 70s have anything to do with it (ibid).

Liberal movements of the 60s and 70s met a conservative backlash that intensified with the advent of the Reagan Administration. By 1981, Reagan had passed the Adolescent Family Life Act in promotion of abstinence-only education (ibid). Blaming “explicit” sexual education for teen pregnancies and early sexual activity aided the regression to a more conservative view of sexuality. Conservative discourses characteristically frame sex in terms of risk and morality to strike fear in the hearts of
youth who wish to involve themselves in pre-marital sex. Rather than teaching a comprehensive lesson plan, these methods rely on what are commonly known as “scare tactics” in order to frighten unmarried youth into sexual abstinence. These tactics include discussions of immediate health risks (venereal diseases and pregnancy) and negative psychological effects. Eventually, the inception of the AIDS epidemic became a key issue in the debate over sexual education (ibid).

HIV/AIDS education is indisputably significant, and the virus has actually proved to be a double-edged sword in the battle over sex education. From a conservative point of view, AIDS was the “ultimate justification of abstinence as the best method of sex education” as it “reinforced the risk-prevention dimension” (Greslé-Favier 2010:415). In contrast, comprehensive sexual education insists that providing detailed information on the nature and transmission of HIV is essential for prevention. Nevertheless, as conservative views came to dominate sexual education, an increase in funds for abstinence-only programs and a concomitant decrease for comprehensive education ensued (ibid).

Relapse to abstinence-only discourses continued through the Clinton years, during which the notable 1996 Welfare Reform Law was awarded an annual $50 million to promote abstinence education in at least 25% of low-income communities (HHS 1996). Enactment of the Welfare Reform Law narrowly defined appropriate content for abstinence-only education programs. The following are just a few of the required specifications drawn into the law:
• “Teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children

• Teaches that a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity

• Teaches that sexual activity out-of-wedlock is likely to have harmful psychological and physical effects

• Teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child’s parents, and society” (Greslé-Favier 2010:415).

Rhetoric marking pre-marital intercourse as below “the expected standard of human sexual activity” essentially criminalizes acts of pleasure out-of-wedlock. Through ostracizing sexually active youth as “socially deviant”, simply for engaging in a biological impulse, this law contrives a culture of shame surrounding sex for the unmarried young person. The impulse to seek advice or education should be encouraged; however, to be berated for such an inquiry would cause massive confusion for any individual who already has little practical knowledge of sex and sexuality.

To add to the confusion, the U.S. Department of Health and Human Services (DHHS) has so vague a definition of sexual activity that, SIECUS notes, “anything that might provoke a physical response – could be construed as going against the tenets of premarital abstinence” (Greslé-Favier 2010:415). The DHHS definition asserts that “any type of genital contact or sexual stimulation between two persons including, but not limited to, sexual intercourse” may be considered sexual activity and therefore against valued standards of human activity (ibid). Public Health messages that discourage youth
sexuality, coupled with such a nebulous description of what sex and sexuality precisely refer to, are conclusively damaging to youth values and understanding of sex.

While these definitions, established in the 1990s, may be dated, the DHHS website still maintains a pro-abstinence-only ethos. Established in 1981, the Adolescent Family Life Demonstration and Research Program (AFL) still totes the mission statement of “encouraging abstinence until marriage and to lessen the effects of too early child bearing by providing comprehensive services to pregnant and parenting adolescents and their families” (HHS 2010). Note their target-group: pregnant and parenting adolescents, that is to say this program, which was funded $16,658,000 in fiscal year 2010, wants to provide comprehensive education that will increase adolescent “understanding of the positive health and emotional benefits of abstaining from premarital sexual activity” to a cohort that is already pregnant or parenting (ibid). A pregnant or parenting adolescent must already be well-aware of the consequences of his or her actions, leaving one to ponder the absence of education directed at those who have not yet gone so far down the proverbial rabbit hole.

This latter group is more often the recipient of an ideology that prefers to intimidate youth into modeling the so-called “accepted standard of human sexuality” through pontificating the risks of premarital sex. The following statement, expounded in 2006 by the HHS Administration for Children and Families, is a strikingly recent continuation of this parochial philosophy:

[N]on-marital sex can undermine the capacity for healthy marriage, love and commitment [...] non-marital sex in teen years may reduce the probability of a
stable, happy marriage as an adult [...] premarital sexual activity can create a pattern of relationship instability (Greslé-Favier 2010:416).

Through focus on “risk factors”, conservative discourses essentially criminalize pre-marital sex while denigrating the legitimacy of youth sexuality. Young people are not considered emotionally mature enough to engage in stable, sexually active relationships. The “heavy consequences” wrought from sexual activity are considered too much of a social burden until an individual is either married or arbitrarily launched into the world of adulthood, when suddenly all choices are your personal, matured decision (Greslé-Favier 2010:417). Until then, it is assumed that teenage sexuality is “inherently irresponsible, destructive, stimulated by the ‘negative influence’ of the media and peer pressure, and consequently in need of adult regulation” (ibid).

Interestingly, the characterization of a youth “culture” that exhibits specific “behaviors” that are inherently risky is not only a relatively new exercise in reductionism, but a highly debated concept that “suffers from a high degree of misplaced precision and specification” of age groups (Shoveller & Johnson 2006:48).

Discourses of risk diagnose specific “high risk” groups that must be targeted for intervention. However, the notion of “risk” has transcended groups, engulfing “behavior” and finally generalizing “being young” as an exhibit of risky behavior in itself. In addition to the newfound fixation on youth culture as a culture of risk, there exists the ever-present anxiety that positive moral values must be promoted by censoring profane material from children. In contrast, one in ten television programs portray sexual intercourse while the top songs of the past two years have included Katy Perry’s
“Teenage Dream” and Lady Gaga’s “Bad Romance”. It should be evident that to simply promote censorship through abstinence-only programs is equivalent to blocking our eyes and plugging our ears to what values the youth of America are actually inheriting (Irvine 2002).

What must be understood is that if American youth are treated as ignorant children, then so they will remain. Our “youth” – a term that often refers to ages 12 through 21 – become adults rather quickly, yet they are not equipped with adequate tools to maintain emotionally stable and sexually mature relationships. Assuming that the decisions and actions of “adults” are inherently mature “especially since they have the means to control and hide [the] consequences” of their actions is not only a gross fallacy, but a dangerous one as well (Greslé-Favier 2010:418). The following glimpses at the nation’s divorce rate, the prevalence of sexual violence, incidence and prevalence of sexually transmitted infections, births to unmarried women, and the prevalence of depression will unquestionably cause a reformulation of this logic.

**Divorce**: The 1980s was a poignant time for conservative discourses, especially in sexual education. This time period also boasted the highest divorce rate in the United States of the past two decades, a whopping 7.2% (U.S. Census Bureau 2010). Notably, this was almost twice as high as the runner-up, Denmark at 4.1%, which is still lower than our current rate of divorce. As of 2008, the divorce rate has slowed to 5.2%, but the U.S. still has the highest rate of marital separation of all Western countries (ibid).
Sexual Violence: The Rape, Abuse, and Incest National Network (RAINN 2009) reports that within the United States someone is sexually assaulted every two minutes. A 2008 report by the Centers for Disease Control and Prevention found that 10.6% of adult females and 2.1% of adult males in a representative study reported “experiencing forced sex at some time in their lives” (CDC 2008a). Further, 20%-25% of college age women reported having experienced an attempted or successful rape in college (ibid). Also important to consider is that 60.4% of female and 69.2% of male victims of sexual assault were first raped before 18 years of age (ibid). If most sexual assault is occurring before legal adulthood, why is it appropriate to disdain conversation about it? Furthermore, if a “stable” relationship is the traditional long-term, mutually faithful and monogamous one, how does one fit in the fact that 30.4% of women in this study experienced their first rape at the hands of an intimate partner (ibid)?

Sexually Transmitted Infections: The CDC (2009a) found that from 2000 to 2009, the rate of Chlamydia in the United States increased from 396.3 per 100,000 women to 592.2 per 100,000, respectively. However, some of the more conservative states exhibited much more dramatic increases. Alaska began at 614.6 per 100,000 women in 2000 and by 2009 exhibited a rate of infection at 1023.5 per 100,000 women (ibid). While California increased from 423.0 to 553.7 per 100,000 women between 2000 and 2009, Mississippi began high at 746.9 in 2000 and ended 2009 with a rate of infection at 1177.0 per 100,000 women. In 2000, South Carolina had a starting point similar to that of California at 421.4 per 100,000 women, but by 2009 women were being infected at a rate of 919.0 per 100,000. The trends are undeniably meaningful when considering the
policies encouraged in more conservative states, which tend to have higher rates of infection, as opposed to their more liberal counterparts.

**Depression:** Emotional and mental health factors are inherently important to a stable, long-lasting, and healthy sexual relationship. Moreover, a stable disposition is important for the prevention of irrational decisions and risky behavior. Depression is a vague term, comes in different forms, and may be precipitated by various factors. More importantly, sexual health plays a key role in depression and can be the causative factor and the result of unhealthy or risky sexual relations. Because emotional health should be a significant aspect of comprehensive sexual education, I believe that considering the rate of depression in the United States is an appropriate way to reflect on the issue at hand. Depression, in its various forms, affects one in ten of U.S. adults (CDC 2010b).

Individuals with chronic disorders are considered to be more vulnerable to depression as “depressive disorders are more common among persons with chronic conditions...and among those with unhealthy behaviors (e.g., smoking, physical inactivity, binge drinking)” (CDC 2010c). Since HIV/AIDS and many STIs are chronic conditions, these factors should pique the interest of health educators. In addition, “unhealthy behaviors“ are analogous to many “risky behaviors” described in most sexual discourses (e.g., smoking, binge drinking, abuse of drugs).

**Births to Unmarried Women:** According to the National Registration of Vital Statistics, “[c]hildbearing by unmarried women continued to rise in 2008. The number of
births and the birth rate each increased 1% or less, while the percentage of births to unmarried women increased to 40.6%” (Martin et al 2010:2).

**Conclusion**

These facts unavoidably question the legitimacy of “adulthood” as a discrete age of maturity. United States federal law draws the line between “youth” and “adulthood” at 18 years of age, but a 21 year-old virgin is still a “youth” and a 13 year-old rape victim must be treated like an adult. Ultimately, the social divide between youth and adulthood feeds and is fed by conservative discourses of sexuality. If discourses can pinpoint and legalize the boundary between maturity and lack thereof, then they can legitimize the age-old struggle to maintain the “innocence” of youth. This effort is not only futile but dangerously ignorant considering the staggering differences in the definition of “innocence” among the United States’ smorgasbord of social, economic, ethnic, religious, philosophical, and individual preferences.

Educational voids, it seems, are often the lesser of many evils. The Waxman Report (2004) found that “[m]ore than 80 percent of the abstinence-only curricula reviewed contain false, misleading, or distorted information about reproductive health”. Specious information provided in these programs misrepresent the efficacy of contraceptives and the risks of abortion while obscuring science and religion, promoting gender stereotypes, and disregarding scientific evidence not in their favor (Waxman 2004).
Even programs that do acknowledge contraception and open discussion of STIs tend to “draw an oversimplified vision of the choices” (Greslé-Favier 2010:418). The presence of more comprehensive programs is undeniably important, but sexual education is still too often enshrouded in discourses of risk and morality. The notion that youth sexuality is an epidemic that must be objectively and systematically acknowledged and eradicated “as a disease” is “starkly limiting the possibilities of an open dialogue with teenagers” (ibid). Sexuality is not an epidemic; neither is pregnancy or marriage among youth. These are social issues that must be treated accordingly and not as if they were “a threat to the social, economic, and moral fabric of the nation” (ibid:417). While an STI-related epidemic is inherently a social problem, creating analogies between sexual behavior and disease lends further support to conservative discourses of risk and maturity. Associating terms like “disease”, “epidemic” and “social ills” with sexuality is a hybrid method of the scare tactics that were so prevalent in the 1980s and 90s.

The views expressed in this article are the author's own and do not necessarily reflect the views of the Department of Anthropology and University of New Hampshire.
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