NO SATISFACTION:  
Research Incompetence in the Study of Human Sexual Behaviour

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ABSTRACT

The author traces the history of the study of sexuality as a science. This paper acknowledges that social constructions both define and limit the type of research conducted on issues of sex and sexuality, as well as acceptable methodologies and, since there is a 'scientific' framework imposed on sexuality, one cannot address questions about research design and paradigms without first identifying and elucidating social constructions of sexuality. Masturbation has been chosen as a focus for this discussion since its social construction has undergone a complete reversal over the past two hundred years. It therefore provides an excellent example of the manner in which social constructions develop and are modified in response to wider social forces.

INTRODUCTION

A brief review of human sexuality literature quickly reveals many poorly researched and/or executed studies. Journals and textbooks are rife with tautological investigations, discussions lacking fundamental information, and analyses containing small, unrepresentative samples, few controls and almost no 'blind' experiments. It is impossible not to
conclude that inadequate studies are being published and, consequently, dubious information about human sexuality is being distributed. This largely unrecognized and unaddressed problem raises three major questions:

1. How and why does deficient sex research become accepted and its findings perpetuated, despite obvious flaws?

2. Is this problem associated with a reluctance to critically examine data relating to human sexuality and, if so, why?

3. Can human sexuality be studied scientifically?

A comprehensive examination of these issues requires that one recognize human sexuality for what it is -- a social construction. Furthermore, it is necessary to acknowledge that such constructions both define and limit the type of research that is conducted, and the methodologies that are employed. In order to understand more fully current concepts of sexuality and research carried out within these constructs, it is important to appreciate the historical context of their development.

Western views of sexuality developed largely out of a Judeo-Christian context where sex was discussed and dealt with predominantly in terms of procreation. This heritage was enhanced and elaborated by upper class Victorians who removed all traces of sexuality from their language and subculture. Only the Victorian obsession with good health transcended attitudes toward sex and sexual matters. Consequently, the field of medicine became the domain of references to sexuality, providing such references were sufficiently 'medicalized', could be defined as disorders, and could be investigated with the clear purpose of attempting to find a cure (Geer 1989; Offir 1982; Sandler 1980; Gagnon 1977). This inauspicious beginning largely accounts for contemporary western views of human sexuality, and illustrates why sexuality is studied, almost without exception, as a 'science' rather than an 'art', only recently becoming a focus of philosophy.

Masturbation has been chosen as a focus for this discussion since its social construction has undergone a complete reversal over the past two hundred years, changing from one of self-abuse to one of self-love. Thus it provides an excellent example of the manner in which social constructions develop and are modified in response to wider social forces.
SOCIAL CONSTRUCTIONS

Social constructions are the lenses, created by society, through which we view the world; they focus and give shape to all we perceive, think, feel and do. Although these constructions are initially dynamic, involving both negotiation and reciprocal accommodation, once an attempt is made to include others, the routines and rules of everyday life must be stated explicitly and, in their definition, they become static. As Laws and Schwartz put it,

The system becomes frozen in the explanations of it, and newcomers perceive its features as absolute -- 'the way things are'. The method of construction is invisible to them, as are the elements that compose it, and therefore they do not see the possibilities for combining these elements in different ways ... Designed as means [social arrangements] eventually become ends (1977:7).

Since social constructions shape our version of reality, and since reality does not require verification beyond its simple presence, then social constructions require no verification -- they simply are. Thus there is a "consensual recognition of the realness and rightness of the constructed reality" (ibid:4) and there are processes by which people acquire this version of everyday life. Knowledge of the normal, self-evident routines of everyday life that is shared with others is termed "commonsense" (Berger and Luckman 1966), and is knowledge which allows one to interpret events and issues within the framework of social reality by drawing on social constructions. Commonsense is one of the most appealing forms of knowledge, since it stems from and supports the 'rightness' of everyday life, and needs no verification.

Commonsense knowledge about sexuality, therefore, refers to our understanding of genders, their appropriate behaviour and forms of interaction, and any other information that contributes to our interpretation of sexual matters. Constructions of sexuality are shaped and enforced in social contexts, yet they do not necessarily change in response to fluctuation in public opinion. Freud's definition of a "mature" vaginal orgasm and an "immature" clitoral orgasm, for instance, supported the dominant construction of sexuality of the time, which was male-centred and favoured penetration. For many years afterward, women's experiences and opinions of orgasm were set aside in favour of Freud's (who was physically incapable of experiencing either type of female orgasm). The power of social constructions are such that observations in
everyday life are made to conform to them; changes in constructions result only from major changes in the social factors that contribute to them.

According to Ross and Rapp (1983:54) three areas are crucial to the social organization of sexuality: (1) kinship and family systems, including kin terms, inheritance practices and marriage patterns; (2) social regulation of sexual partners and practices and the transmission of sexual knowledge; and, (3) religious and legal systems by which moral systems are arbitrated and legal systems are established to provide a forum for sexual matters. The influence of these factors on social constructions of masturbation over time is readily apparent even though masturbation is part of a larger construction of human sexuality and is therefore dependent upon it.

From at least 1723 until the early 1900s, masturbation was considered unequivocally to be wrong. Throughout the 18th and early 19th centuries, Christianity was largely responsible for the maintenance of this view in England and continental Europe. The Church's authority in this matter was derived from the biblical story of Onan (thus masturbation is also referred to as 'onanism'). In this anecdote, Onan refuses to impregnate his dead brother's wife; instead he chooses to "spill his seed". His actions were in direct opposition to God's command to reproduce. Onan was struck dead.

Theologians chose to interpret "spill his seed" as masturbation, and defined Onan's sin -- not as defying God -- but as "defiling himself". According to proponents of this perspective, masturbation offends God and defiles your soul (Trumbach 1986). More recent Christian arguments interpret Onan's actions as coitus interruptus, but observe that the two major factors defining his behaviour as 'sinful' are still applicable to masturbation:

The dynamic forces of the soul were not directed outwards in love toward others, but inward toward self. [Secondly], secrecy preserved an outward appearance of conforming to the law while the spirit was turned in the opposite direction. (Von Gagern 1955:55).

Thus masturbation "offends against the inner reality of the sexual act" (ibid:55).

The Church legitimized and enforced this negative construction by detailing the dire consequences of 'self-abuse'. It was thought to hinder growth, cause disorders of the penis and testes, and was responsible for a more virulent form of gonorrhoea than is usual; masturbating women could 'deflower' themselves and ruin their reputations (Trumbach 1986:17-20). According to Tissot,
women are more particularly exposed to hysterical fits, shocking vapours, incurable jaundices, violent cramps in the stomach and back, acute pains in the nose, descents and ulcerations of the matrix, extension and darting of the clitoris, and "furor uterinus" [nymphomania] which deprives them of decency and reason (1985:41-42).

Christian writers provided testimonies of individuals who had masturbated, and who could attest to the hideous reality of the consequences (Trumbach 1986). The power of the Church and the fear it instilled probably did not eliminate onanism; however, it certainly eliminated any change in social constructions of masturbation.

Toward the latter part of the 18th century (following the Enlightenment), science -- and medicine in particular -- began to play a larger role in legitimizing social reality and masturbation narratives began to focus on the Greek theory of bodily humors. Onanism was still capable of producing almost every ailment known to humankind, but the explanation for those ailments shifted from a spiritual illness causing bodily illness, to a physical condition involving the depletion of 'seminal liquor' and resulting in an imbalance of the bodily humors which, in turn, produced the symptoms of onanism (Tissot 1985:48). Instead of testimonies, the 'scientific' explanations cite impressive lists of authors -- Hippocrates, Celsus, Aetius -- who support the bodily humor theory and focus on the power of seminal liquor, noting that once it appears, so too does a deeper voice, a beard, and more highly developed muscles. Once it disappears, as in the case of castrated individuals, the beard falls out and the high voice returns (ibid:2).

During the late 19th and early 20th centuries, the growing emphasis in western cultures on the 'scientific method', psychiatry, and preventative medicine produced an increasing scepticism of earlier negative constructions of masturbation (Dearborn 1952). A strong attachment to the old perspective persisted, however. In 1896, for instance, Carpenter proposed that sexuality "must be divested of the sentiment of uncleanness which surrounds it" (1896:20), but had little to say about masturbation. Yet in 1900, although acknowledging that the evils of onanism had been exaggerated, Marro (1900:226) continued to insist that masturbation caused "degradation of the genital organs" which would eventually result in moral degradation and discussed techniques to prevent children from doing themselves harm. Dr. Wood-Allen, while stressing the importance of good health, admonished girls never to handle their own sex organs, since it was
unhealthy and it left "its mark upon the face, so that those who are wise know what the girl is doing" (1905:88).

The work of Freud, however, led to a new twist in the social construction of masturbation. Instead of unhealthy, masturbation was "immature". Thus, by 1936, Hirschfeld still felt a need to explain in his book, *Sexual Anomalies and Perversions*, that masturbation was no longer "self-abuse", and was not necessarily wrong, yet devoted a large section of the article to instructing parents on how to prevent their child from indulging in it. Dodson notes that the 1945 Boy Scout handbook labelled masturbation as a bad habit; that in 1967 it was still a crime to encourage a person to masturbate in Indiana and Wyoming and; that the Naval Academy ruled that a candidate, "shall be rejected by the examining surgeon for ... evidence of ... masturbation" (1967:85).

In 1948, Kinsey and colleagues published their matter-of-fact treatise, *Sexual Behaviour in the Human Male*. These researchers expected to find masturbation, and set out to determine how men learned to masturbate, the frequencies with which it occurred, and its relationship to social factors such as religious affiliation, class, age etc. Current reviewers of Kinsey's work treat him as the great masturbation emancipator, and as though he were the originator of completely revolutionary ideas on this subject (Offir 1982:39; Robinson 1976:64). In part these writers are correct. Kinsey's method, the personal confidential interview, was certainly a unique approach to human sexual issues; however, his findings, particularly with respect to masturbation, merely restated the current construct of sexuality -- that men were highly sexed, and that they employed a variety of ways to satisfy their desires. What set the Kinsey report apart from earlier studies, however, were the statistics that supported his results, and the accessibility of his findings to the general public, as well as to academics.

The acceptance with which Kinsey's masturbation analysis was greeted, and the extent to which it is relied upon by contemporary researchers is easily explained. His findings supported a new construction of masturbation that had just begun to emerge: masturbation was beginning to be viewed as a natural part of sexual maturation and as an activity in which almost all males participated (Offir 1982:193; Dearborn 1952:50; Duvall 1967:164; Hiltner 1953:88; Ernst and Loth 1948:60).

Kinsey et al.'s (1953) *Sexual Behaviour in the Human Female* met with a different response. For the most part, reviews were negative. Joseph Heller of New York denounced it as "the insult of the century" (cited in Offir 1982:45) despite the fact that he had never read it. E. Bergler and W. Kroger, a physician/ psychiatrists team, stated that *Sexual
"Behaviour in the Human Female" gives the green light to every abnormality and perversion, and provides both perverts and neurotics with a welcome excuse for avoiding treatment" (cited in Offir 1982:45). The mixed emotions generated by the publication of the second volume stemmed from conflict between the western construction of human sexuality as a whole, and with the construction of female sexuality and female roles in particular. Western theories of sexuality had been predominantly male-authored and, consequently, reflected male needs, values and experiences at the expense of, or in complete disregard of, female needs (Fortunato 1980:390). Heterosexuality, intercourse and sex with a partner were considered to be 'normal', and the Victorian ideas of the highly-sexed male continued to prevail. This view assumed that men needed more frequent sexual release than women and, therefore, was tolerant of male homosexual encounters and masturbation.

Kinsey's work, on the other hand, raised the possibility that females might have and need similar sexual experiences. This vision of female sexuality was in complete opposition to the dominant view and was, therefore, forcefully rejected. The public and private pressure exerted on the Rockefeller Foundation to withdraw funding from Kinsey's Institute for Sex Research, in an effort to prevent further undermining of the contemporary construction of female sexuality, illustrates just how resistant the public was to Kinsey's subversive interpretations (Offir 1982:45; Gebhard et al. 1979:2).

Yet World War II had caused considerable changes in women's lives, and the effects could not be entirely reversed. Women whose husbands had been killed in the war, who were forced to work in order to support their children, were among the first to recognize that conventional female stereotypes were not necessarily true reflections of womanhood. Many women who had contributed to the war effort, and had returned to the home afterward, also began to experience discontent. Kinsey's findings came as no surprise to them, and some began to feel the need and desire to acknowledge the truth in his work. The first expression of the Women's Liberation movement was the recognition that Kinsey's data were not outrageous. It served to fuel the fire of Women's Liberation and, simultaneously, received backing from those who supported Women's Liberation. However, it took another thirteen years and the publication of Masters and Johnson's (1966) Human Sexual Response before information of this nature became employed as ammunition in the fight for women's rights (Robinson 1976:116).
Masters and Johnson (1966) helped promote new visions of female sexuality by identifying at least three types of orgasms experienced by women, versus only one experienced by men, and by describing the multiple female orgasm. This led to studies of female anatomy and physiology for their own sake, and in a manner that recognized that women were not merely men without penises (Robinson 1976:141). The discovery that the vagina was not densely enervated, and that masturbation resulted in more intense orgasms than intercourse, led to the widespread use of masturbation in sex therapy (ibid:142). Masturbation could finally come out from under the covers.

The current construction sees masturbation as an "all-purpose tonic" (Tavris and Sadd 1977:94). Gordon (1979) notes that people are happier and more well adjusted when sexually satisfied, and masturbation is therefore a beneficial outlet for widow(er)s, single people, and homosexuals reluctant to come out of the closet. He considers it to help sufferers of insomnia and to provide a defence for society by allowing socio/psycho-paths to release sexual frustrations which might have otherwise been expressed by violence. Comfort (1979) stresses the learning value of masturbation: men can learn to desensitize themselves and avoid premature ejaculation during intercourse; women can learn about their sexual response, and can then assist their lovers in discovering what pleases them. He advises parents to "be glad your daughter masturbates, she has learned a new skill" (Comfort 1979:81). Dodson envisages masturbation as "meditation on self-love" (1979:167), teaching women to feel positive about themselves and allowing them to be sexually independent. Most current sex education books, both those aimed at children and those written for adults, incorporate this new perspective (Lewis and Lewis 1983; Offir 1982:191; Bell 1980:79; Barbach 1975:88). Self-abuse has been transformed into self-love.

The production and reenforcement of social constructions of human sexuality influenced, and continue to haunt 'scientific' research on the subject. Nevertheless, investigators either fail to acknowledge that sex research and therapy rests on initial, largely implicit assumptions, or else they place too much faith on the power of the scientific method's ability to produce 'objective' results (Vance 1983). Consequently, inferior work, under the rubric of 'pure research', becomes accepted in professional circles. In order to demonstrate the pervasiveness of social constructs in the production of 'scientific' information on human sexuality, the 'scientific method' will be discussed and the means by which social constructions are faithfully reproduced via this paradigm will be described.
According to Keeton and Gould (1986:3) the scientific method is comprised of five major steps. The first involves formulating the question to be asked. Initially this may seem an innocuous procedure, having little to do with social constructions. However, there are numerous factors that influence this decision, all of which are socially determined.

In any discipline there are trends in research; a new idea becomes introduced and everyone becomes caught up in the problems it poses. Monies available to investigators in that field get channelled into studies that address the popular issues. Since research requires funding, and funding is available only to those who choose to study topics of interest to the foundations which distribute the money, trends become regulated. Social acceptability also regulates the types of questions that may be asked. During the Victorian era, for instance, studies involving sexual health were allowed, but an investigation involving procedures employed to produce maximum pleasure during masturbation would have been out of the question. Part of the restriction on choice stems from the fact that certain questions are "unaskable" because, "researchers cannot formulate questions outside their own constructions of reality" (Laws and Schwartz 1977:16). Studies of masturbation, for example, only could take place when it was no longer viewed as a perversion that needed to be eliminated, but as a natural part of sexual maturation.

The second step in the scientific method requires careful observations. Again subjectivity, and subsequently social constructs, enter the equation. One must decide what to observe and what to ignore; define how measurements are to be taken and the data to be recorded. Kinsey (1953), Masters and Johnson (1966) and Hite (1976) all studied masturbation, but one gets very different impressions from each of these analyses. Kinsey et al. focused on frequency and relationship to social categories (age, class, religion, etc.), and made their observations through personal interviews. Masters and Johnson centred their observations around physiological responses to masturbation and used mechanically recorded measurements. Hite was interested in why women masturbate and how they do it. She relied upon questionnaires to gather her data. They may all be accurate reports, but each is presenting only a particular aspect of masturbation, in accordance with the prevailing constructions of human sexuality.

The third part of the process is to analyze the data and fit it into a coherent pattern called an hypothesis (Keeton and Gould 1986). Since analysis involves interpretation, and interpretations are guided by
experience and everyday life, social constructions creep into this step as well.

Testing the hypothesis is accomplished by formulating predictions based on the hypothesis and checking the accuracy of the prediction. The key point in this step is that the observations used to construct the hypothesis must not be reused to check the predictions that are generated. The hypothesis must be independently corroborated. Too often this important qualification is overlooked. The result is a self-fulfilling study that has no value. Unfortunately this is one of the most common mistakes in research on human sexuality. Researchers read Kinsey's work, predicted that certain patterns should be seen, and then used Kinsey's data to check the accuracy of the prediction. Part of the reason for this problem was that the Kinsey Reports provided the only large sample available to researchers and was, therefore, one of the only sources of information. Still, the Kinsey Reports themselves were merely untested hypotheses: nevertheless, Kinsey's data are employed as evidence for more elaborate theories and are treated as facts rather than possibilities.

The final step in scientific inquiry is often the most difficult. If the results of the test do not support the hypothesis, the researcher must be prepared to change his/her interpretation. Unfortunately, owing to the power of social constructions, more often than not it is the tests that are changed, not the hypotheses; likewise, findings are often bent in order to obtain a desired conclusion. Ideally the testing of a theory never stops; no theory is ever absolute (Keeton and Gould 1986:4). In fact, if an hypothesis withstands a certain amount of testing (the amount usually dictated by the degree to which the hypothesis conforms to social perspectives) it begins to take on the appearance of a 'fact'. "Scientific investigation, then, depends on a combination of subjective judgements and objective tests, a delicate mixture of intuition and logic" (Keeton and Gould 1986); however, this is usually overlooked in favour of the more satisfying view of science as objective reality. Included in this deluded vision is belief in the infallibility of the methodologies employed: case studies, surveys, lab observations and experiments, and animal research.

The most commonly employed method of data collection in human sexuality is the survey. These can take the form of personal interviews or questionnaires. One of the problems common to both of these methods is volunteer bias. Not everyone asked will respond, and there is no way of knowing if those who refused were in some manner fundamentally different from those who participated. Interviews also suffer from interviewer bias. People's willingness to respond and the answers they give may, in some way, be affected by the person asking the questions. Also, while interviews may be more detailed than questionnaires, they still
cannot address each issue in as much depth as a case study. Both approaches are also subject to bias based on the accuracy of the informant's memory and on his/her willingness to tell the truth. The interview is often the better way of dealing with possible cases of deception, since a trained individual might be able to distinguish a lie from the truth, and can reformat questions in such a way as to test the informant's reliability. Questionnaires are predesigned and can make no allowances for such occurrences. Social constructions play a part in this method as well. They guide the researcher when s/he designs the questions to be asked. Questions can be leading or limiting, requiring an answer that fits the investigators' views of the study, but that may not reflect the reality of the informant (Geer et al. 1984; Offir 1982; Sandler et al. 1980).

Case studies, or clinical research studies, tend to focus on 'deviants'. Thus some definition of 'healthy' and 'sick' must be made. This is difficult, especially when the object of discussion is sexual behaviour, since the decision to view particular practices as disorders is a cultural decision. Once again social constructions are heavily relied upon in the making of fundamental distinctions. Another problem with this procedure is that it requires justifying the use of 'sick' people to make inferences about the behaviour or actions of 'healthy' people. Furthermore, major difficulties arise when one assumes that what we can learn about a few cases can be extended to cover an entire group -- how representative of the 'sick' are the few cases that one is able to observe? Yet the case study is valuable for eliciting details which other, more superficial, approaches tend to miss. Because of ethical considerations, case studies are sometimes the only methodology available to an investigator (Geer et al. 1984; Offir 1982; Sandler et al. 1980).

One of the most desirable forms of data collection is laboratory observation, since variables can be controlled and tested and objectivity can by increased by using monitoring devices to make observations. However, human sexuality is not readily studied in the lab. Since this method involves obtaining a systematic record of events, there must be an observer. Unfortunately, the very presence of such an individual calls into question the behaviour being observed. Would a woman masturbating in front of Masters and Johnson react in exactly the same way that she would in the privacy of her own home? Lab research also suffers from volunteer bias; presumably only some people would agree to being watched while participating in sexual activities. Social constructs also play a role in the lab. They define the nature of the experiment and help
identify the variables that must be controlled for (Geer et al. 1984; Offir 1982; Sandler et al. 1980).

Experimental research is probably the most infrequently used method in sexology; however, it is usually considered the most reliable when designed and executed correctly. Problems encountered when employing this procedure include difficulties capturing and identifying all the complexities of everyday sexual conduct in an experimental design and setting, and ethical considerations (Geer 1984; Sandler 1980).

The final approach used in studying human sexuality is animal research. The major question posed with respect to this method is how applicable are the results of animal experiments to human sexuality? It is commonly assumed that the closer one gets to humans, phylogenetically, the more likely the findings will be relevant to humans. This assumption, however, is merely a social construction of our relationship to the rest of the animal kingdom.

Clearly, at every step, the scientific method and the forms of research employed in the study of human sexuality are subject to the constraints of social constructs. With this fact in mind, it is finally possible to address the three questions posed at the beginning of this paper:

1. How and why does deficient research become accepted and its findings perpetuated, despite the obvious flaws?

2. Is this problem associated with a reluctance to critically examine data relating to human sexuality and if so, why?

3. Can human sexuality be studied scientifically?

THE PROBLEM OF INCOMPETENT RESEARCH

There are no simple answers to these questions, because there are many factors that contribute to the acclamation of inferior research. This problem is, however, intimately linked to a reluctance on the part of members of the discipline to critically examine both the data and the studies as a whole. It has already been noted that sexuality is a value-ridden and emotion-provoking topic that is socially constructed. Studies that support the dominant perspective will gain recognition, such as the early reports that masturbation caused acne, bedwetting and the like; whereas those that do not, such as Kinsey's work on female masturbation, will be scorned. This phenomenon can be as obvious as outright rejection of ideas that are deemed radical, but more frequently and more insidiously social constructions work at the level of fundamental assumptions
underlying research design. If the results of an investigation are in keeping with social reality, and if commonsense supports the logic of the methodology, then the study will have a compelling attractiveness; few will question it because few will recognize the underlying assumptions. Only those who are distanced, either through time or by space, from the social forces responsible for the constructions can identify the inherent biases.

It is an additional danger of sexual conceptual analysis that one's choice of paradigm, in addition to betraying personal bias, also betrays private fantasies and personal obsessions (Solomon 1980). Sex researchers are reluctant to criticize some paradigms since, in effect, they would have to question their own fundamental beliefs and fantasies.

Complicating this basic concern, which is common to all disciplines, but that may be exaggerated in sexology due to the personal nature of the subject, are the problems relating to the newness of the field of human sexuality and difficulties resulting from ethical considerations. Currently there is no established protocol for sexology. Consequently people have tried to borrow approaches from other disciplines. Unfortunately, the methods are not always directly transferable; e.g. there are many ethical considerations that simply prevent certain types of sexual experiments. The immaturity of the discipline also means that there is a lack of basic information. More large scale data collection needs to take place -- something more representative than Masters and Johnson, more in depth than Kinsey's data and more rigorous than the Hite report. Researchers need to recognize that such studies present hypotheses, not facts, certainly not standards of normalcy. Too often the ideas generated by large sample investigations are not independently tested; instead, they are treated as facts and are used as the basis for more elaborate theories. Assumptions must be explicitly stated and recognized as such.

Sexologists are the first to acknowledge that certain types of analyses of human sexuality can never be undertaken, due to ethical considerations. For example, one could never identify the sex of a fetus and administer hormones of the opposite sex to the pregnant mother in order to determine the role of sex hormones in behaviour. Therefore, it is recognized that some allowances must be made. Instead of employing experiments as described above, people interested in hormones and behaviour tend to depend largely on case studies. Observations and hypotheses are made despite the fact that cases of this type are rare and the resulting sample is small and unrepresentative of the general population. In the past, sex researchers have permitted their colleagues to overextend the available data, to the detriment of the discipline. Sex journals are littered with
shoddy work of this type, and the field itself loses the respect of the 'hard' scientists for whom such allowances are inexcusable.

One last note on the reluctance of fellow researchers to critically examine both the data and the studies as a whole. In addition to the fact that individuals are often simply unable to recognize that assumptions have been made and, therefore, are unable to question them, there appears to be an underlying impression that all sex research is good, since it brings to light information that had once been shrouded in mystery; criticism is seen as an attempt to suppress information and to return to the dark age of human sexuality. Unfortunately, this attitude promotes misinformation and the creation of new myths surrounding human sexuality that are equally as bad, if not worse, than being left in the dark.

Science begins with observations, either as they occur naturally, or under lab conditions; the key point is that "science cannot deal with anything that cannot be observed" (Keeton and Gould 1986:4). This definition begs the question; can human sexuality be studied scientifically? Certainly some aspects of sexuality are observable and are, therefore, capable of being analyzed using the scientific method; the relationships between fat and fertility (Billewicz et al. 1976), fitness and fertility (Bemben et al. 1988), hormones and behaviour (Erhardt et al. 1984), and physiological responses during orgasm (Bohlen et al. 1982) are all examples of issues in human sexuality that can be studied scientifically. On the other hand, topics such as masturbation may be best understood, not by examining how many times a day the activity is undertaken, but rather by examining the reasons behind the actions.

CONCLUSION

Incompetent research plagues every discipline; however, the field of human sexuality appears to be particularly rife with it. Since social constructs of sexuality pervade all aspects of our lives and cannot be left behind at the laboratory door, they become incorporated into sexology research. Unfortunately when one's focus of study is the biological phenomenon that forms the basis of the constructs, the inability to recognize the power of these social constructions results in the identification of subjective reality as objective reality. Research loses its rigor when commonsense supports the findings; testing of hypotheses becomes half-hearted since 'everyone knows' that what is suggested is actually 'true'. Assumptions go unnoticed, and there is a general satisfaction in discovering that what you always knew about sexuality has finally been 'proven'. An anthropological approach to human sexuality
can help identify social constructions by recognizing that alternative, non-Western, perspectives do exist.

The scientific method is a useful paradigm for some aspects of sexology. However, it is important for researchers to recognize that subjectivity plays a large role in this model, and that the observations and the interpretations made from them are never value-free. There must be a return to rigorous testing of hypotheses using data gathered independently from the original source. Theories must be constantly reevaluated; they should never be left to fossilize into 'facts'. Since human sexuality subsumes a variety of topics, many of which have roots in other disciplines, full advantage should be taken of related fields and their respective methods of research. The results of such analyses may be much more complex and less intuitively satisfying. Complacency, however, has no place in proficient research.

THE POLITICS OF LOVE:
Sexual Selection Theory and the Role of the Female

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ABSTRACT

Since the publication in 1871 of Darwin's *The Descent of Man*, sex has been deeply entrenched within the studies of the biological sciences. Over the years, much controversy has surrounded Darwin's theory of sexual selection, comprised of two components -- male/male competition for mates, and female choice of males for mates (Darwin 1871:215). For the purpose of this present discussion, the importance of the females of the species in sexual selection theory will be addressed, and the modifications and manipulations of this role in the conceptualization of the sexual selection hypothesis will be critically examined.