

KINSEY TODAY

A publication of the Kinsey Institute for Research in Sex, Gender, and Reproduction

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Director's Column

by Dr. John Bancroft



In this last newsletter of the twentieth century, we can take stock of the Kinsey Institute's mission as we enter the next millennium. Human sexuality remains enigmatic and yet profoundly important.

The need for serious scholarship to further our understanding of this fundamental aspect of the human condition remains as strong as ever. What is new is the fact that the academic field relevant to human sexuality is fragmenting as a consequence of the intellectual conflicts between more traditional positivist scientists and postmodern social constructionists. While this is a cause for concern, it is also an exciting time intellectually, as those of us from traditional perspectives are required to reexamine many of our basic assumptions. I am optimistic that over the next decade or so this dialectic process will lead to a healthy synthesis.

The Kinsey Institute has a vital role to play in promoting interdisciplinary scholarship and bridging this epistemological divide in the field. Our forthcoming book, *The Role of Theory in Sex Research*, directly addresses the issues involved. Our information services and collections are aimed at a wide range of disciplines and at promoting discourse among them. And we have a new role—graduate training—that wholeheartedly supports this mission. I believe that within the next few years we will see established at the Kinsey Institute a group of graduate students with wide-ranging research objectives, taking advantage of the extraordinary resources of this institute.

The research program continues to flourish. Our important project on sexual risk-taking in straight and gay men, funded by the National Institute for Mental Health, is well under way. Its triad of methodologies illustrates our

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Kinsey Institute Takes On Teaching Role

For the first time in its 52-year history, the Kinsey Institute, which is known primarily as a research institute, is aiming to become a center for graduate training. Work is in progress on a plan to offer classes in human sexuality directly to Indiana University students. The classes would allow students working toward a Ph.D. minor in human sexuality to benefit from the institute's vast scholarly holdings and the expertise of its renowned researchers.

"The institute's proposed direct involvement in student instruction is part of a plan to strengthen and expand the existing Ph.D. minor," says Cynthia Graham, IU assistant professor of psychology, who is working on the expanded curriculum. The effort is being pursued in collaboration with William Yarber, professor of applied health science and chair of the present Ph.D. minor committee, and other current faculty for the minor.

As with the present minor, students working toward the new Ph.D. minor would be required to complete at least one core course that offers a broad survey of the field. In addition, students would complete another 12 credits of related electives offered by other departments throughout the university to round out the minor.

The institute plans to create two seminar-style classes that would be offered as part of the minor's elective options. One would be a sexual science seminar in which faculty, outside experts, and graduate students present ongoing research and discuss topics in human sexuality.

The other seminar would train students in clinical management of sexual problems. This seminar would be open to students in clinical psychology, counseling, and other fields. Students would participate in supervised work with clients who are seeking help with sexual difficulties through the Kinsey Institute's Sexual Health Clinic.

"Many students who are studying human sexuality are unaware of the wealth of the institute's resources," Graham says.

"We want to raise awareness of the Ph.D. minor to a broader spectrum of students. Our goal is to involve more faculty members and to make the minor more interdisciplinary and appealing to a wider range of students."

Currently, the minor attracts mainly students with backgrounds in applied health science, sociology, and education. Meetings are currently under way with faculty from various disciplines who might be interested in teaching a course in the minor or serving as contacts for students enrolled in research courses.

"We hope that the revision of the minor and the involvement of the institute in direct instruction of students will be just the first step in expanding the scope of human sexuality education at IU," Graham says. The institute is applying for grants that would provide funding for graduate students and support their involvement in the Kinsey Institute's interdisciplinary research environment.

Other applications seek funding for summer institutes to bring in visiting faculty with expertise in areas not already covered on the IU campus and to enable graduate students from other universities to participate in the summer programs. "This will pave the way for setting up certification programs, joint Ph.D. programs in areas such as sociology and human sexuality, and, if there is sufficient demand, a Ph.D. program in sexual science," Graham says.

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The mission of the Kinsey Institute is to promote interdisciplinary research and scholarship in the fields of human sexuality, gender, and reproduction. The institute was founded in 1947 by renowned sex researcher Alfred C. Kinsey. A Harvard-trained biologist, Kinsey began collecting sexual histories after discovering that few scientific data existed on human sexual behavior. From 1941 to 1954, Kinsey's pioneering work was supported by the National Research Council, which was funded by the Rockefeller Foundation. Today, the institute has two components, an Indiana University research institute and a not-for-profit corporation, which owns and manages the institute's research data and archives, collections, and databases.

For tours, call Margaret Harter, (812) 855-7686.

Conference Explores Sexuality in Midlife and Beyond

During the 1950s and 60s, the Kinsey reports, the works of Masters and Johnson, and the Women's Movement changed attitudes about sex. Now Viagra (sildenafil), hormone replacement therapy, and better health are changing attitudes about sex in midlife.

The Conference on Sexuality in Midlife, co-sponsored by the Kinsey Institute and the Sexuality Information and Education Council of the United States (SIECUS), was held this past spring in Bloomington. The conference brought together experts across disciplines to answer the questions "What are the sexuality issues that people face in midlife and beyond, and what are their educational needs about sexuality?"

Stephanie Sanders, associate director of the Kinsey Institute, says that baby boomers, the same generation that spawned the sexual revolution, are the force behind the current interest in sex in midlife. "Baby boomers want to continue to have good sexual functioning throughout their lives," Sanders says. "People are now healthier longer and medications are improving. This generation, as compared to those before, has different expectations regarding sexuality as they age."

As a treatment for erectile dysfunction, a condition that becomes more common as men age, Viagra is the first of what is predicted to be a growing class of drugs that will enhance sexual function, notes Sanders. While Viagra is primarily being used by men, some physicians do prescribe it to women. For women, hormone replacement therapy (HRT) can also enhance vaginal lubrication. It may help treat declining interest in sex in some women and can make sex more enjoyable for some postmenopausal women. These treatments may improve a person's interest in or ability to have sexual intercourse, but they sometimes cause new problems in relationships.

"Many men turn to Viagra to solve problems in their sex lives, but it doesn't always work," Sanders says. "Sometimes problems are more relational than physical, and this opens up the question about using drug intervention to improve sexual functioning—when you intervene for one

person, does it upset the balance of the relationship?"

Generational attitudes also influence sexual relationships in midlife. To illustrate, Sanders says that many people in their 80s—especially women—do not approve of sex outside of marriage, whereas many baby boomers think sex between unmarried persons is okay. The attitude about sex outside of marriage is important because as people age they may lose partners through divorce or death, and they may not want to remarry.

"Partner availability is a big issue," Sanders says. "In midlife, some people find themselves dating. Not everyone in midlife is in a pair, nor is everyone heterosexual. Because midlife may be the first time in decades that some people are seeking new partners, they need information about AIDS, STDs, and other sexual health issues."

"Right now people can get information about how an illness or medication can affect their sex lives, but it isn't always readily available or discussed by their health care provider unless they ask. Many people take medications for other health conditions that can decrease their interest in sex or adversely affect their performance. They often don't know that medication is at the root of their sexual problems, and they attribute it to aging or wonder about their relationship."

Despite this, improvements in health and in medications are making it possible for people to enjoy sex throughout their lives. "The good news is that people in their mid-years report good satisfaction with their sex lives," Sanders says. "And with more sex education, research, and medications, it's possible that aging baby boomers, more than any previous generation, will be able to maintain sexual functioning more similar to that of their younger years."

The papers and edited transcripts from the joint Kinsey Institute/SIECUS conference are expected to be published in fall 2000 as a monograph in the Kinsey Institute Series by Indiana University Press.

New Studies Focus on Sexual Well-Being of Women

The medical community has recently noticed one of Viagra's (sildenafil) interesting side effects—it left a lot of people asking “what about women?” While the development of oral contraceptives in the 1960s had a major impact on women's sexual and reproductive health, it left the medical profession ambivalent about the implications for women's sexuality, and there has been little medical interest in the sexual well-being of women since.

Today, the tides are turning. Nowhere is that more apparent than at the Kinsey Institute. Several current or recently concluded studies seek to understand the societal and physiological factors that contribute to women's experience of sexuality.

The largest of these studies explores determinants of sexual well-being in women and how they relate to age, socioeconomic status, and ethnicity. Data collection from a national representative sample of 1,000 heterosexual women is scheduled to be completed by early 2000. The interview involves detailed questions about the woman's sexual activity during the previous 30 days and addresses subjects such as frequency of activity, experience during activity, partner issues, general level of interest, relevance of menstrual cycle and contraception, sexual attractiveness, and general sexual satisfaction.

“The Kinsey Institute has been wanting to study these issues in a community-based sample for some time,” says John Bancroft, director of the Kinsey Institute since 1995. “However, it was not possible for us to move forward on a larger, comprehensive study until recently when we received the financial support of Eli Lilly and Company.”

Two other Kinsey studies address the impact of prescription medicines on female sexuality. A current study examines how Evista (raloxifene), an estrogen-like drug that is used in the prevention of osteoporosis, affects the well-being and sexuality of postmenopausal women. Another recently completed study focused on younger women. Investigators collected baseline mental, physical, and sexual well-being data on 96 women starting on birth control

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pills. Follow-up interviews were conducted after three, six, and twelve months to determine changes in these factors. Results showed that oral contraceptives' negative effects on sexuality and mood are important factors leading to discontinuation of the pill.

“The neglect of the sexual side effects of oral contraceptives on women's sexuality is an example of the general neglect of medical aspects of women's sexuality until recently,” Bancroft says. “Our study on the pill should have been done several decades ago.”

Two additional Kinsey Institute studies are in the early stages of development. A collaborative study with Cynthia Graham, assistant professor of psychology, directly compares psycho-physiological response patterns to sexual stimuli in men and women. This study is unusual because most studies to date have focused on either men or women. Another study is exploring the concept of central inhibition of sexual response in women. This study, a spin-off from the institute's ongoing research program on sexual inhibition in men, is in the early stages of developing methods for assessing propensity for sexual inhibition in women. “A direct comparison of men and women in this respect promises to be most interesting,” Bancroft says.

“In general, we still know more about sexuality in men than in women,” Bancroft says, “but there is no doubt that if we are to improve our understanding of women's sexuality, we will need to take both socio-cultural and biological factors into account.”

Interdisciplinary Seminar Q&A: The Parents' Action League and the Fight Against Sex Crimes in Postwar Ontario

The questions below are based on the seminar “Take a Woman and a Telephone and Stir: The Parents' Action League and the Fight Against Sex Crimes in Postwar Ontario” presented October 13 by Elise Chenier as part of the Kinsey Institute's Interdisciplinary Seminar Series. Chenier is a Ph.D. candidate in the department of history at Queen's University in Kingston, Ontario, Canada, and a Kinsey Institute visiting doctoral student.

Q: Explain how the Parents' Action League developed.

The Parents' Action League (PAL) was started in Toronto in 1955 by three middle-class suburban housewives as a reaction to the disappearance of 8-year-old Judy Carter. A year earlier, two immigrant women had been sexually assaulted and murdered by a person the press identified as “the Strangler.” While many saw these last two crimes as immigrant crimes that were unrelated to Judy Carter's abduction, many women viewed the three crimes as an escalation of sexual deviancy in their community. The women who formed PAL were determined to put an end to sex crimes, and they believed psychiatric treatment for the perpetrators was the answer.

Q: What impact has the Parents' Action League had on the popularization of psychiatric ideas about human sexual behavior and forensic sexology?

PAL represented an overall shift in the way people thought about sexual deviants. They did not see sex criminals as criminals but rather as diseased individuals who needed help. The group was successful—when noted psychiatrists of the day were not—in getting the government to build the Forensic Outpatient Clinic, which became the only research and treatment center for sexual deviants in Canada. By speaking openly about human sexuality, even if only within the context of sex crimes, PAL lent middle-class respectability to an issue most people didn't want to hear about.

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interdisciplinary commitment, with its conventional questionnaire survey, psycho-physiological experimental evaluation, and qualitative in-depth interviewing. We are just about to start an international collaboration with the British Association of Sexual and Relationship Therapy (BASRT) and with Relate, the British national relationship counseling service. They will be collecting data on male sexual dysfunctions and using our sexual inhibition/sexual excitation scale (SIS/SES). This will provide us with a rich database to explore the relevance of our theoretical model to male sexual dysfunction.

The collections are undergoing a crucial integration process to give users access through one Web-based catalog. Our archival collections, carefully preserved in their new space, are ready to receive donations of papers and records relevant to sexual science.

As we approach the twenty-first century, the Kinsey Institute is positioned to play a pivotal role in expanding our understanding of human sexuality.

Lethem Named Development Director

The Kinsey Institute and the Indiana University Foundation recently appointed Nancy Lethem as the institute's first director of development to oversee and coordinate all fundraising.

According to Kinsey Director John Bancroft, the institute has benefited in the past from the sporadic generosity of unsolicited donors, its Friends network, and grants from various sources but has long been in need of a comprehensive professional approach to fundraising.

"Nancy will bring a focus to our development needs that will enable us to support some exciting new projects," Bancroft says. Those projects include a new teaching initiative, collections maintenance, and new and ongoing research in the areas of sex, gender, and reproduction.

Lethem, who is completing a master's degree in philanthropic studies from Indiana University-Purdue University Indianapolis, will draw on her extensive background in fundraising to identify and work with prospective donors, update publications, expand the membership of the Friends of the Kinsey Institute, and plan an annual giving program.

Because the Kinsey Institute has no alumni, Lethem says identifying potential donors will require some creativity. "I suspect the profile of our prospective donors will be diverse, which makes the process of identifying them both more challenging and more interesting," she says.

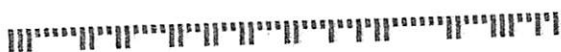
If you have any questions or suggestions for Lethem, or if you would like to make a donation, please contact her at (812) 856-0311 or nlethem@indiana.edu.



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