

Sometimes the Social Becomes Personal: Gender, Class, and Sexualities

American Sociological Review
2016, Vol. 81(1) 4–28
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Association 2015
DOI: 10.1177/0003122415621900
<http://asr.sagepub.com>



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Abstract

All sociologists recognize that social constraints affect individuals' outcomes. These effects are sometimes relatively direct. Other times constraints affect outcomes *indirectly*, first influencing individuals' personal characteristics, which then affect their outcomes. In the latter case, the social becomes personal, and personal characteristics that are carried across situations (e.g., skills, habits, identities, worldviews, preferences, or values) affect individuals' outcomes. I argue here for the importance of both direct and indirect effects of constraints on outcomes. I disagree with the tendency among sociologists to avoid views highlighting the role of personal characteristics because of the perception—incorrect in my view—that these explanations “blame the victim” and ignore constraints. To illustrate the importance of both types of mechanisms, I explore two empirical cases involving how gender and class structure sexualities. First, I show that young men engage in same-sex relations less than women and have more heterosexist attitudes, and I ask why. Second, I provide evidence that people from disadvantaged class backgrounds are especially likely to have unintended pregnancies and nonmarital births, and I explore why. In each case, I provide evidence that both kinds of mechanisms are operating—mechanisms entailing direct effects of constraints on outcomes, and mechanisms in which constraints shape personal characteristics, which, in turn, affect outcomes.

Keywords

gender, sexualities, class

Being in a social position affects one's outcomes. While it would be hard to find a statement less controversial among sociologists, there is substantial disagreement on the mechanisms through which this occurs. In recent decades, the idea that constraints directly delimit outcomes has been more popular

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among sociologists than the idea that constraints affect personal characteristics, which, in turn, affect outcomes. I argue here for the importance of being alert to both types of mechanisms through which social positions affect outcomes.

One type of mechanism is indirect and entails a two-step process. In the first step, being in a social position comes with constraints that affect personal characteristics—things people carry across situations, such as skills, habits, identities, worldviews, preferences, or values. These constraints change individuals' personal characteristics in a durable, although not necessarily permanent, way. In the second step of the process, personal characteristics affect outcomes. The first part of my title—"sometimes the social becomes personal"—summarizes the insight of models that see constraints as affecting outcomes by changing personal characteristics, which, in turn, affect outcomes.

In this address, I defend views involving personal characteristics against their detractors. Detractors sometimes reject or de-emphasize such views because they want us, as sociologists, to distinguish ourselves from psychologists, economists, or average citizens, all of whom arguably *overemphasize* the importance of personal characteristics and ignore their social roots. Other detractors wish to avoid explanations that they think "blame the victim." This is especially a concern when personal characteristics popularly viewed as negative are claimed as proximate reasons for outcomes that most regard as unfortunate. I defend views that see constraints to work *through* personal characteristics for two reasons. First, as a matter of getting the science right, I believe that important outcomes often emerge through this two-step mechanism. Second, as a normative matter, I disagree with the claim that recognizing the role of personal characteristics in causing negative outcomes entails *blaming victims* for their personal characteristics and their outcomes.

Direct effects of the constraints emanating from social positions are well accepted by sociologists. Positions entail constraints, and,

without altering personal characteristics, these constraints change outcomes. A simple example is that the social class of the family into which you are born (a social position) constrains what sort of a neighborhood your parents can afford to live in and what kind of a school you can attend (outcomes). Your social class background need not affect your skills, habits, or preferences to have this effect. Another example is that if you are a member of an oppressed racial group (a social position), you face discrimination (a constraint), and this affects outcomes such as income.

My theoretical argument is that we should be alert to and investigate *both* types of mechanisms, which are summarized in Figure 1. I will discuss both, but spend more of my time on mechanisms involving personal characteristics, not because they are more important, but because I believe they are inappropriately suspect among sociologists.

To show that both types of mechanisms are needed to understand how social positions affect outcomes, I discuss two empirical cases that illustrate how social positions structure sexualities. My first case explores how constraints people face because of their gender affect their likelihood of having sex with same-sex partners. My other case explores how constraints emanating from class background affect having a nonmarital birth. In each case, I argue for the relevance of both types of theoretical mechanisms. In discussing the two cases, the specific explanations I offer combine untested hypotheses and conclusions based firmly in evidence. My point in offering them here is to illustrate both kinds of mechanisms through which social positions and their constraints affect outcomes.

DEFINING TERMS

The social positions I focus on are gender and class background. But my theoretical point applies to any social position. "Social positions," as I use the term, encompass a broad array of phenomena. Examples include organizational membership, occupation, network position, neighborhood, nation, race, whether

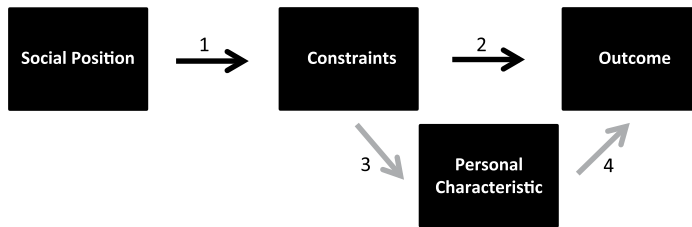


Figure 1. Two Ways Social Positions Affect Outcomes

you are an immigrant, your sexual orientation, and whether you are cisgender or transgender. Some of these positions are roles or situations that can be defined independently of any characteristics of the individuals who occupy them. The class of your family of origin, an organization you belong to or work for, your occupation, your position in social networks, and your neighborhood or nation all fit this definition. However, I also consider race, whether you are an immigrant, gender, sexual orientation, and whether you are transgender to be social positions, although they are also seen as characteristics of individuals. I conceive of these individual characteristics as social positions if they are categories often used to classify, evaluate, and differentially treat people. For example, being a man or being a woman affects the constraints you face, and thus I see gender as a “social position.” This is as true for gender, race, sexual orientation, immigrant status, or whether you are transgender as it is for occupation, class, network position, or geographic locale.

Being in a social position entails facing constraints. Constraints are important to the models I propose because, in the causal chain, constraints come between social positions and the outcomes of interest in both types of models. I use the word “constraint” very broadly. The narrowest notion of a constraint emanating from a social position is that it makes doing some things absolutely impossible. But social forces are on a continuum from gross physical coercion to nearly invisible processes, and I intend to include that entire range in what I call constraints. So constraints also include what a position makes it harder to do, or, the flip side, what a position gives you

more resources or opportunities to do. Positions also differ in the incentives they create—in what carrots and sticks follow from what behavior; I consider these incentive structures to be constraints as well. Finally, constraints include the expectations others have of you because you are in this position.

By personal characteristics I refer to things individuals carry across situations, such as skills, habits, identities, worldviews, preferences, or values.¹ Characteristics must have some durability across situations and positions to count as personal. However, durable does not imply immutable; I am claiming that personal characteristics are molded by the constraints associated with social positions, and this implies that personal characteristics can change as one moves out of one social position into another. How durable effects of constraints on personal characteristics are probably depends on how long one is in the social position (with longer exposures yielding more durable characteristics) and whether the exposure to the constraint is at an age when humans have more or less plasticity. Although my emphasis is on social processes, many personal characteristics have some of their variance explained socially and some explained genetically, so I am not claiming that *all* variance in personal characteristics is explained by the constraints associated with social positions.

By “outcomes” I mean behaviors as well as rewards or punishments. Outcomes that are behaviors include such things as the extent to which one studies, continues or discontinues enrollment in school, engages in health-related behaviors, saves money, votes (at all or a particular way), or engages in crime.² Outcomes

affected by constraints that are not behavioral (but may result in part from behavioral outcomes) include educational attainment, earnings, wealth, health, and psychological well-being. In my two empirical cases, behavioral outcomes include whether one has sex with a same-sex partner, engages in ridiculing others seen as gay, and uses birth control (contraception or abortion); having a nonmarital birth is a non-behavioral outcome.

Because I distinguish between theoretical mechanisms entailing constraints that affect outcomes directly, and mechanisms that affect outcomes indirectly via personal characteristics, I should clarify what I mean by “directly.” A detailed look shows nearly all effects of any given factor on an outcome to be “indirect” through one or more mediating (i.e., intervening) variables. However, I use the term “direct” in the path-analytic sense, to mean “not through some mediator I have specified.” In this address, “direct” means *not through personal characteristics*. Thus, referencing the mechanisms in Figure 1, effects of constraints on outcomes that are *not* mediated through personal characteristics will be called “direct” effects of constraints, even if they actually operate through other mediators not specified in Figure 1.

RESOURCES FROM PAST THEORETICAL WRITING

I present my theoretical message in general terms because I believe it is applicable to a broad range of more specific perspectives. Here I discuss past theorizing that contains some of the claims I make regarding constraints affecting personal characteristics (Arrow 3 in Figure 1), and personal characteristics affecting outcomes (Arrow 4 in Figure 1). In the later sections examining my two empirical cases, I will discuss evidence regarding how class and gender constrain sexualities, directly and through affecting personal characteristics.

The claim that constraints emanating from social positions affect personal characteristics (Arrow 3 in Figure 1) is the thesis

of one of three main strands of social psychology, the *social structure and personality* perspective. House (1977:168) describes work in this genre as considering “the relation of macrosocial structures . . . and processes . . . to individual psychological attributes and behavior.” He argues that, although neither Marx, Durkheim, nor Weber are thought of as social psychologists, they all present arguments of this form. In a later discussion of this perspective, House and Mortimer (1990:74) speak of effects on individuals of their “structural location”—their term for what I call “social position.” They write that “socioeconomic position, gender, and age, as well as race, religion, and other major designators of structural location, serve to place individuals in a particular societal context.”

One exemplar of the social structure and personality view is the research of Kohn and Schooler (Kohn and Schooler 1973; Kohn et al. 1983). Their research suggests that people who work in jobs that allow self-direction and entail cognitive complexity develop two personal characteristics: the skill of intellectual flexibility and a preference for self-direction over conformity to external authority. More generally, the idea is that when people practice something regularly because of their job, they become more skilled at what they practice and also come to ascribe inherent value to it.³

Other authors writing in the social structure and personality tradition also argue that class location affects personal characteristics, and focus on characteristics bearing some similarity to self-direction. For example, Gecas (1989) discusses “self-efficacy,” the belief that one can control one’s behavior and environment; he argues that self-efficacy is enhanced by having high socioeconomic status. A program of research by Mirowsky and Ross (2003, 2005) shows that education affects “learned effectiveness,” which includes believing one can affect outcomes, the capacity to collect and process information, and the proclivity to change one’s behavior to what is helpful to one’s goals. This research, too, exemplifies Arrow 3 in Figure 1.

Other research in the social structure and personality perspective exemplifies Arrow 4 in Figure 1, showing that personal characteristics affect outcomes. Mirowsky and Ross's (2003, 2005) work provides evidence for Arrow 4 in Figure 1, by showing that the personal characteristic of learned effectiveness has a salutary effect on the outcome of health. They write that "[e]ducation improves health because it increases effective agency, enhancing a sense of personal control that encourages and enables a healthy lifestyle. . . . Education . . . develops habits and skills of self-direction" (Mirowsky and Ross 2005: 206). In a similar vein, Pampel, Krueger, and Denny (2010) discuss how high socioeconomic status encourages a longer time horizon and the self-regulation needed to implement the behaviors necessary to achieve long-term goals such as good health.⁴ Behaviors that enhance health, such as wearing seat belts, avoiding excess calories or tobacco, and getting exercise, explain a reasonable share of the effects of education or occupation on health, suggesting that a share of their effects are indirect through personal characteristics (e.g. self-regulation) that entail a proclivity to follow through on health-enhancing behaviors (House 2015; Lantz et al. 2001; Pampel et al. 2010). The fact that a substantial share of the effect of education on health is not mediated by income further strengthens this interpretation.⁵

Theoretical work by Bourdieu on culture and the reproduction of inequality, while very different from the work just reviewed, shares with it the implication that one's social position shapes one's personal characteristics (Arrow 3 in Figure 1), and personal characteristics affect one's outcomes (Arrow 4 in Figure 1) (Bourdieu 1977, 2001; DiMaggio 1979). Bourdieu uses the term "habitus" to describe the relevant personal characteristics. Wacquant (2005:316) explains Bourdieu's concept of habitus as "the way society becomes deposited in persons in the form of lasting dispositions, or trained capacities and structured propensities to think, feel and act in determinant ways, which then guide them."

These dispositions, capacities, or propensities are examples of what I call "personal characteristics."

Bourdieu writes extensively about effects of social class background, arguing that early socialization, combined with later experiences, lead to personal characteristics that lessen the odds of upward or downward class mobility. In his view, our relationships with our parents make us like them in our characteristics. This affects outcomes because characteristics typical in the working class are ill suited to getting past institutional gatekeepers. Bourdieu sees the gatekeepers' cultural standards as arbitrary, a result of inter-elite competition, rather than based on what is functional for organizations' goals or productivity. Bourdieu also discusses the subtle mechanism whereby people come to assume as inevitable, or even to want, the outcomes that are probabilistically most likely for them—even when these outcomes seem objectively disadvantageous.

I turn now to how past theorizing about gender illuminates my core theoretical concern regarding how constraints affect outcomes, both directly and by affecting personal characteristics.⁶ The former is implied by Arrow 2 and the latter by Arrows 3 and 4 in Figure 1. As mentioned earlier, I treat gender as a social position because whether we are perceived to be men or women affects how individuals and institutions treat us.

In the 1960s and 1970s, sociologists and psychologists writing about gender stressed differences in orientations and preferences, and saw their origin in differential socialization by sex, through which cultural beliefs and values were internalized. Even though some now see this work as passé, the idea that internalized cultural beliefs affect outcomes never disappeared; in recent writings a number of sociologists argue that gendered ideals or dispositions affect choices of fields of study and occupations, thus helping to perpetuate job segregation and the pay gap (Cech 2013; Charles and Bradley 2009; England 2011; Okamoto and England 1999). This is consistent with Arrow 4 in Figure 1.

Yet much of gender sociology focuses on direct constraints. Even discussions of culture typically focus less on how internalized culture limits women's aspirations, and more on how cultural beliefs lead to biased underestimates of women's competence or overestimates of men's (Ridgeway and Correll 2004). The "doing gender" view (West and Zimmerman 1987), based in ethnomethodology, also emphasizes cultural beliefs as an external constraint rather than internalized preferences; in this view, what keeps us conforming to others' gendered expectations of us is our desire to make cognitive sense to them.⁷ Other sociologists of gender emphasize direct effects of institutional constraints, such as governmental policies and employers' discrimination, on gender inequality (England 1992; Kanter 1977; Levanon, England, and Allison 2009; Reskin and Roos 1990). Some scholars have made broad theoretical statements arguing for the primacy of structural or macrosocial factors in causing gender inequality (Epstein 1988; Kanter 1976; Martin 2004).

As Risman (2004) reviews the literature, although some debates portrayed "structural" and "individual" approaches to gender as incompatible, many scholars now agree that we need an integrative approach that sees causal arrows between multiple levels—individual, interactional, and institutional (Browne and England 1997; England and Browne 1992; Ferree, Lorber, and Hess 1999; Ridgeway and Correll 2004; Risman 2004). This entails recognizing biological influences; how early socialization and later constraints shape identities, beliefs, and values; and direct effects of constraints resulting from how men and women are treated in interaction, and from organizational or governmental policies. This view is consistent with my claim that individuals' outcomes are affected by gender through direct effects of gendered constraints, as well as through such constraints affecting personal characteristics that, in turn, affect outcomes. Many scholars now agree on the need for a multilevel model, but claims about the role of gender differences in

personal characteristics remain controversial among others. In discussion of my first empirical case, I will refer to the myriad effects—direct and indirect—as the "gender system" and examine some pathways through which it affects involvement in sex with same-sex partners.

DATA AND METHODS

Data

I present empirical analyses relevant to each of my two cases. The case regarding gender differences in sex with same-sex partners uses data from the National Survey of Family Growth (NSFG) and the General Social Survey (GSS). Both analyses focus on young adults age 18 to 35 years.

To examine sexual orientation and sex with same-sex partners, I used the most recent waves (2011 to 2013) of the NSFG. I utilized questions asking respondents how many female and male sexual partners they had in the past year, dividing people based on whether they had one or more same-sex partners and no other-sex partners, had at least one male and female partner, and others (respondents who had no partners, or only other-sex partners).⁸ To assess the sexual orientation respondents identify with, I used a question that asked whether they think of themselves as heterosexual or straight, bisexual, or homosexual or gay (for men) or homosexual or lesbian (for women). To minimize underreporting, questions about sexual orientation and about sex with same-sex partners were asked in an Audio Computer-Assisted Self-Interview (ACASI) portion of the interview, in which interviewers handed respondents a computer and stepped away, affording more privacy. Respondents heard the questions through headphones or read them from the laptop screen, and then entered answers directly into the computer. (For evidence that this reduces underreporting of sexual behavior, see Villarroel et al. 2006.) All analyses used weights to adjust for the survey design.

To examine attitudes toward sex with same-sex partners, I used data from the 2004

to 2014 General Social Surveys (GSS), which are biennial. The survey asked: “What about sexual relations between two adults of the same sex – do you think it is always wrong, almost always wrong, wrong only sometimes, or not wrong at all.” Analyses are weighted to correct for a GSS sampling design that calls for discarding half of the original nonrespondents and intensive effort to contact the other half.

Analyses for my second empirical case, regarding differences by class background in nonmarital births and contraception, use data from the NSFG (2006 or 2008 through 2013),⁹ the Relationship Dynamics and Social Life study (RDSL), and the College and Personal Life Study (CPLS), a qualitative interview study.

I use data from the 2006 to 2013 NSFG to show the percent of women who, by age 25, had their first birth before any marriage (whether or not they married later). My interest is in how such nonmarital births differ by class background, which I operationalize in terms of the respondent’s mother’s education. I chose age 25 because most women who have a nonmarital birth do so by age 25. Weights were used to adjust for the survey design.

I examine contraception use by young women who are 18 to 21 years of age using the Relationship Dynamics and Social Life (RDSL) survey, which collected data from a probability sample of women age 18 to 19 at baseline from one county in Michigan. The RDSL is unique in asking about pregnancy desires, sex, and contraception *each week* for 2.5 years, starting in 2008 and ending in 2011. Organizing the data with person-weeks as units, I examined how contraception for this age group differs by class background (operationalized by education of the respondent’s mother). I show percent of the person/weeks where women did not use contraception, separately by class. I limited the analysis to weeks in which women were unmarried, were not pregnant (as far as they knew), had sex with a man, said they had no desire for a pregnancy, and (in a separate question) said they strongly desired to avoid getting pregnant. The limitation regarding desire to

have or avoid a pregnancy was intended to shed light on class differences in contraception use when women clearly did not want to get pregnant. Standard errors are clustered to account for the nonindependence of multiple weeks for each respondent.

Because the RDSL is limited to very young women, age 18 to 21, I used another dataset, the NSFG (2008 to 2013), to examine contraception for women age 21 to 35. For each of three social-class background groups (indexed by respondent’s mother’s education), I examine the percent who did not use contraception the most recent time in the previous three months they had intercourse with a man. The analysis is limited to unmarried women age 21 to 35 who had sex with a man in the previous three months, were not pregnant, did not report themselves or their partner to be sterile, and who said they would be “upset” (either “a little” or “very”) if they got pregnant now. The latter limitation was intended to shed light on class differences in not using contraception when one does not want to get pregnant. Weights were used to adjust for the survey design.

My discussion of the role of class background in contraception use also draws from a qualitative interview study, the CPLS, that I conducted in 2009 to 2011. I interviewed women in their 20s from diverse class backgrounds in the San Francisco Bay Area (see England et al. 2015).

Modeling Regression-Adjusted Percents

My graphs present percents that have been regression-adjusted. I used the “margins” command in Stata, thus using an average marginal effects approach. The purpose of showing regression-adjusted, rather than simple, unadjusted gender or class differences in percents is to render the estimates of gender or class-background differences as indicative as possible of causal effects of the social positions of gender or class background. My independent variables—sex and class background—present less difficulty for causal

interpretation than many variables because both are, in most cases, determined at a respondent's birth and thus exogenous to life experiences.

In my first case, exploring sexuality with same-sex partners, the focus is on gender differences. I thus present percents for men and for women; these are predicted probabilities from logistic regressions. Because sex is assigned at birth, and few people change category, for most, sex is exogenous. The exceptions to this are transmen and transwomen, individuals who transition from the sex category they were assigned at birth to another; for them, the estimates here may tell us little about the long-term effect of their treatment by the gender system. But even for people who are cisgender (i.e., people who have not transitioned to a sex category other than the one they were assigned at birth), sex differences in some outcome could pick up effects of (at least) two different things: (1) effects of sex that are biological or (2) effects of the gender system (interactions between the two are also possible). So a caveat to my analysis is that, while I will interpret effects of whether one is a man or a woman in terms of the gender system, if there are biological differences on the outcomes of interest, these will also be represented in the differences I show.

Another way estimates of gender differences could go awry is if some subset of one sex was absent from the sample, for example, if poor men were more underrepresented in the survey than poor women. To avoid this, analyses of gender differences present predicted percents for each sex from regressions containing a dummy for whether one is a man or a woman, as well as control variables for race, mother's education (measured as described below), whether one is an immigrant (i.e., was born outside the United States), and age.¹⁰ Race is operationalized by three dummy variables to represent non-Hispanic whites (the reference), non-Hispanic blacks, Hispanics, and others. As it turns out, the regression-adjusted gender-specific percentages are almost identical to the simple, unadjusted percentages.

I show gender differences without making them specific to race or class groups. But, because gender could interact with race or class, in the online supplement (<http://asr.sagepub.com/supplemental>) I show gender differences separately within the three largest race/ethnic groups (non-Hispanic whites, non-Hispanic blacks, and Hispanics),¹¹ and within the three class-background groups defined by mother's education. Sometimes the gender differences differ in magnitude between subgroups or fail to be significant within some subgroups, but differences in the same direction are always present within the subgroups.

In my second case, exploring nonmarital births and contraception, the focus is on variations by class background, indexed by respondent's mother's education.¹² Percents are presented for groups defined by mother's education; they are predicted probabilities from logistic regressions, which also include controls for race and immigrant status.¹³ Mother's education is represented by two dummy variables, representing three categories: less than high school, high school graduate but no bachelor's degree (this includes people with some college), and bachelor's degree or more. Here, I use data on women's reports of their nonmarital births; Figure S8 in the online supplement shows that disadvantaged men are also more likely to become fathers while never-married. Data on contraception use are shown only for women, because the RDSL did not survey men, and, although the NSFG did, men may not know if their female partners are using hormonal contraception.

There are large differences by race in nonmarital births (England, Shafer, and Wu 2012), and race is associated with class. A control for race is thus particularly necessary when assessing causal effects of class background, because, although class background is exogenous to most things, the class of your family of origin is not exogenous to your parents' race, from whom you inherit your race.¹⁴ Because race and class background could interact, in the online supplement I examine

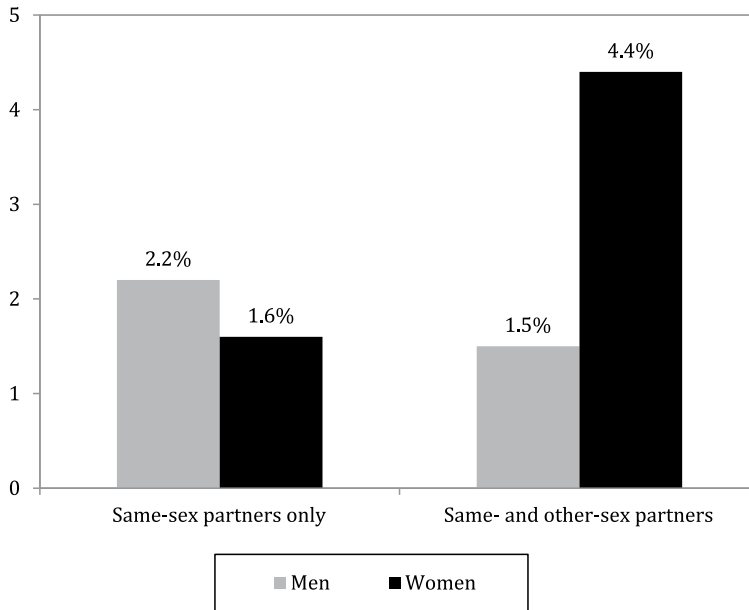


Figure 2. Percent of Men and Women Who Had Sex with a Same-Sex Partner in the Past Year

Data source: Data from NSFG 2011 to 2013.

Note: Age 18 to 35. $N = 6,528$. Gender differences in the percent who had same-sex partners only are not significant ($p < .05$). Gender differences in percent who had same- and other-sex partners are significant ($p < .05$).

whether class-background differences in non-marital births and contraception hold within race groups; in most cases, they do.

GENDER AND SEX WITH SAME-SEX PARTNERS

Sex with same-sex partners is still stigmatized in many quarters. To see whether there are gender differences in behavior with regard to same-sex partners, I examined the proportion of young adults (age 18 to 35) who had only same-sex partners in the past year (regardless of how many), and those who had one or more men *and* one or more women as partners in the past year. Figure 2 shows that approximately 2 percent of men and women reported having sex in the past year with only same-sex partners, and the small difference is not statistically significant. The large and statistically significant gender difference is in the proportion who reported having sex in the past year with both men and women—4.4 percent of women and

1.5 percent of men. Overall, more women than men had a same-sex partner, but the difference comes entirely from more women than men having both same- and other-sex partners. The online supplement shows that, although statistical significance of the gender difference is lost in some subgroups, black, white, and Hispanic women are all more likely than men to have both men and women as sexual partners, and this gender difference is seen in each class background group as well (see Figures S1 and S2).

What kind of sexual behavior are women referring to when they say they had a female sexual partner? Recent attention to women kissing women on dance floors and at parties (Hamilton 2007; Rupp et al. 2014)¹⁵ raises the question of whether women reporting a female sexual partner are referring to experiences such as these or to more private and intimate sexual contact. In analyses using the NSFG (not shown here), I ascertained that 95 percent of women age 18 to 35 who said they had sex with a woman in the past year

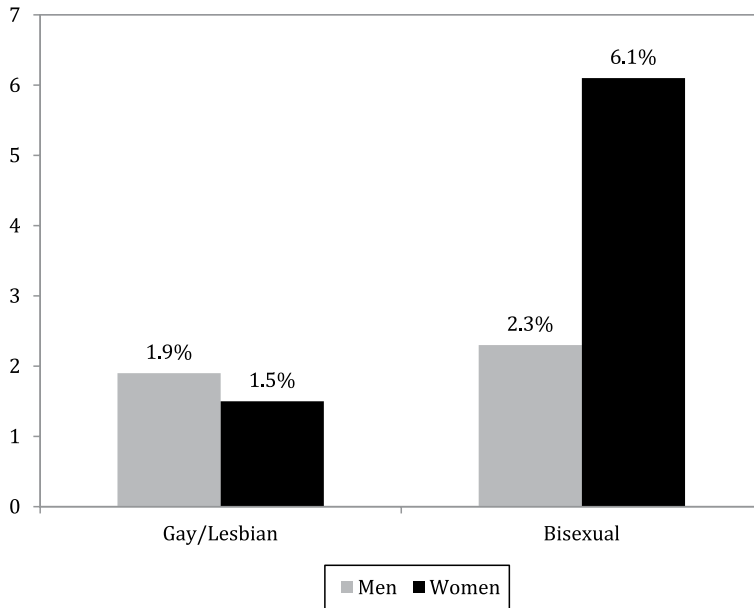


Figure 3. Percent of Men and Women Who Identify as Gay/Lesbian or Bisexual

Data source: Data from NSFG 2011 to 2013.

Note: Age 18 to 35. $N = 6,510$. Gender differences in the percent who identify as gay/lesbian are not significant ($p < .05$). Gender differences in the percent who identify as bisexual are significant ($p < .05$).

(regardless of whether they also said they had sex with a man) also reported that they had (ever) had oral sex with a woman, as did 93 percent of women who reported having sex with both men and women in the past year.¹⁶ This suggests that the vast majority of women who say they have had a female sexual partner have had private sexual experiences with women beyond kissing.

There is also a gender difference in whether individuals claim a non-heterosexual identity. When asked about their sexual orientation, approximately 2 percent of men and women said they were gay or lesbian (the slight difference is nonsignificant) (see Figure 3). The large and statistically significant difference comes in people who said they were bisexual, an identity claimed by over 6 percent of women and only about 2 percent of men.¹⁷ The rest said they were heterosexual, the other option given.¹⁸ A similar gender difference in bisexual identity also exists within class-background and race groups (see Figures S3 and S4 in the online supplement). Other studies, too, have found that more women than men

identify as bisexual or engage in sex with both sexes (Diamond 2014).

Men and women also have different values regarding whether sex with same-sex partners is wrong. For decades, the General Social Survey has asked respondents whether they think sexual relations between two adults of the same sex are always wrong, almost always wrong, sometimes wrong, or not wrong at all. As Figure 4 shows, in recent years, women were 13 percentage points more likely than men to give the most accepting of the four responses, with 57 percent of women, but only 44 percent of men, seeing this behavior as “not wrong at all.” There is a significant gender difference in the same direction within class-background and race groups (see Figures S5 and S6 in the online supplement). This gender difference is not merely a result of women being more liberal—it holds controlling for political party identification or how liberal or conservative one is (results not shown). A gender difference in this direction has existed for decades in these data and is present even in the most recent years (results not shown).

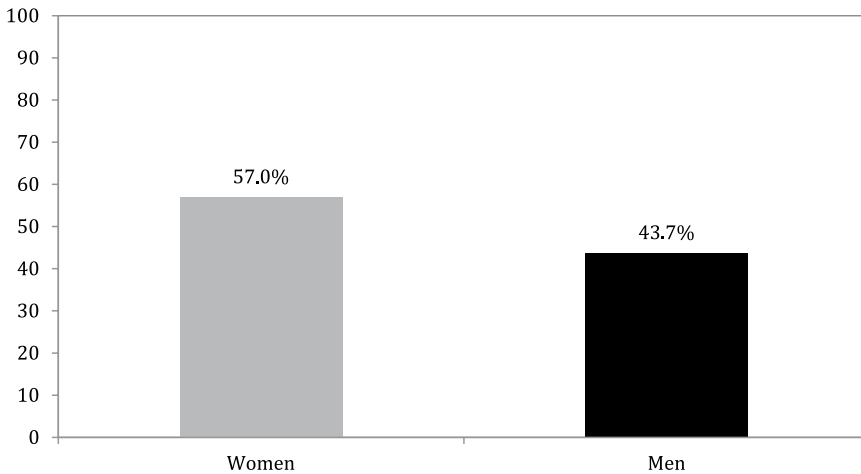


Figure 4. Percent of Men and Women Who Believe Homosexuality Is Not at All Wrong

Data source: Data from General Social Survey, 2004 to 2014.

Note: Age 18 to 35. $N = 2,174$. Gender differences in the percent who believe homosexuality is not at all wrong are significant ($p < .05$).

Explaining the Gender Differences

Why do men participate less than women in sex with same-sex partners? I offer an explanation involving the gender system, and exemplifying the two types of theoretical mechanisms I introduced. The hypothesis I offer is social, but it in no way precludes genetic effects on whether one is attracted to or has sex with men, women, or both (for evidence regarding genetic effects on sexual orientation, see Bailey, Dunne, and Martin 2000; Bailey and Pillard 1991; Bailey et al. 1993; for a critical review of literature suggesting genetic effects, see Bearman and Brückner 2002).

Two distinct aspects of the gender system are needed for my argument. The first is the obvious point that people face social pressure to conform to what is expected of them as men or women. Gender conformity entails many things, such as that men should be strong and women nice. For both women and men it also entails being straight. You violate gender norms by not appearing to be straight, and violating gender norms is generally seen as negative.

A second aspect of the gender system concerns which gender is more valued. Everything associated with women—traits women

are believed to have, or activities women often do—tends to be valued less. As one example of this, if you compare two distinct jobs, one filled mostly by men and another mostly by women, the pay for men and women is higher, on average, if they are in the male-dominated job. This is true even when the two distinct jobs require the same amount of education and skill (England 1992; England, Reid, and Kilbourne 1996; Kilbourne et al. 1994; Levanon et al. 2009; for debate, see England, Hermsen, and Cotter 2000; Tam 1997, 2000).

Putting these two aspects of the gender system together, both sexes face pressures to conform to gender norms, and thus to be straight, but I believe that men's gender nonconformity is *more* controversial precisely because the male gender is more valued. As a result, being a gay man is more stigmatized than being a lesbian (Watts 2015). Being bisexual is also less acceptable for men than for women. Analogous to the "one drop rule" of black racial identity, a man who is not 100 percent straight is seen in some quarters as gay (Anderson [2011:142–49] suggested this metaphor).

What we see here in the sexual arena parallels an asymmetry seen more broadly in the gender revolution, which mostly entailed

women bucking gender conformity to enter spheres formerly reserved for men, not vice versa (England 2010). Many women entered male professions; few men have entered female jobs or become full-time homemakers. Girls now play sports, but fewer boys play with dolls. Women wear pants, but men wearing skirts has not caught on. Moreover, because women are more likely than men to violate gender norms, we get used to seeing women do these things, and the extent to which they register as “gender violations” lessens. It is consistent with this broader pattern that women are more likely than men to violate gender norms by having sex with a same-sex partner.¹⁹

The two types of theoretical mechanisms I introduced help make sense of why women feel freer than men to have sexual partners of the same sex. Consider models in which constraints do not change our personal characteristics but regulate our behavior more directly. As mentioned earlier, the “doing gender” perspective is an example (West and Zimmerman 1987). In this view, others’ expectations summon our conformity, because we want to make sense to them. Applying this to sexuality, men “do gender” by “doing straight” to make sense to others as men. Other perspectives positing direct effects of constraints emphasize incentives—carrots and sticks.²⁰ Sticks are especially likely for men or boys perceived to be gay. Research documents ridicule, violence, and job discrimination for people who are not seen to be straight (on ridicule and violence against gay men, see Pascoe [2007] and Herek [2009]; on job discrimination, see Tilcsik [2011] who found discrimination for men and Bailey, Wallace, and Wright [2013] who did not). Queer women can experience these harms too,²¹ but they are especially visited on men (Herek 2009).

In response to these expectations and incentives, men who are sexually interested in other men may avoid or hide gay behavior. I believe this is one reason that fewer men than women report having had sex with same-sex partners. Some of this difference probably reflects men actually being deterred from sex

with men, and some may result from men underreporting more than women. Either is consistent with the argument that gay sex is more stigmatized for men. Men’s motivation to look straight may also lead them to call others “fags” (Pascoe 2005, 2007). These expectations and incentives need not change personal characteristics to regulate behavior, and thus they represent conformity via direct effects of gender constraints.

But these very same constraints may also work in a longer-term way to change men’s personal characteristics. The incentives and expectations may create internalized heterosexist values or solidify straight identities, even among men attracted to men. This is consistent with the evidence I showed that men are more likely than women to believe that sex with same-sex partners is wrong, and men are less likely than women to identify as bisexual. These personal characteristics—values and identities—further encourage men to avoid sex with same-sex partners. They also encourage another outcome—men policing other men’s sexuality and thereby becoming part of the constraints pushing other men in a straight direction.

One reason to think that gendered constraints like these may really change personal characteristics is that they last a long time. If you are cisgender—that is, if you have not transitioned out of the sex category you were assigned at birth—then the sex you report is a good indicator of how the gender system has treated you your entire life.

CLASS AND NONMARITAL BIRTHS

I turn now to my second empirical case—how nonmarital births are affected by class background and why. As Figure 5 shows, women whose mothers had less education are more likely to have had a nonmarital birth by age 25.²² The regression-adjusted percentages show that by age 25, 37 percent of women whose mothers had less than a high school degree have had such a birth, compared to 28 percent of women whose mothers had a high school but not college degree, and 18 percent

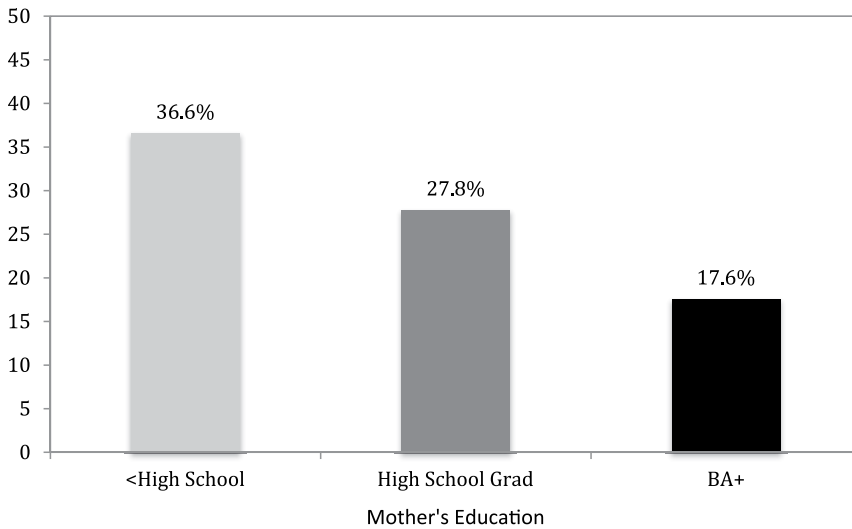


Figure 5. Percent of Women Who Have Had a Nonmarital Birth by Age 25

Data source: NSFG, 2006 to 2010; 2011 to 2013.

Note: Age 21 to 35. $N = 11,412$. Differences between women whose mother's education was less than high school and each other category are significant ($p < .05$).

of women whose mothers are college graduates. As mentioned earlier, these percents are regression-adjusted for race and immigrant status. The online supplement presents these differences separately by race, showing a similar class gradient within black and white respondents.²³ Of the many factors determining this class gradient, I will focus on the role of contraception and abortion.

The Role of Contraception in Explaining Class Differences in Nonmarital Births

Women from more disadvantaged class backgrounds have intercourse for the first time at a younger age than their privileged counterparts (England et al. 2011), but this has little effect on whether one has a premarital first birth (Wu and Martin 2015). This is probably because age at first sex is typically in the late teens, but most nonmarital first births are to women in their early 20s, at ages when almost everyone is sexually active. Given fairly ubiquitous premarital sex, contraception is of obvious relevance to nonmarital childbearing, and research shows that disadvantaged single women (and men) use contraception less consistently than their more

advantaged counterparts (England et al. 2011; Frost, Singh, and Finer 2007).

Some of this is probably explained by the fact that women from more advantaged backgrounds have more social and economic motivation to delay pregnancy. After high school, they typically go to a residential college or university and enroll full time (Shavit and Blossfeld 1993). These near-total institutions encourage studying and partying, not being a parent (Armstrong and Hamilton 2013; England et al. 2011). Moreover, in their 20s, some women from privileged backgrounds have started careers with real prospects; they may have a lot to lose economically if they do not put off having a child, as economists point out by invoking the notion that having children entails opportunity costs (Hotz, Klerman, and Willis 1997).²⁴ By contrast, disadvantaged single women have less motivation to delay pregnancy (Edin and Kefalas 2005). These class differences in motivation to avoid pregnancy may explain some disparity in *intended* nonmarital pregnancies. But approximately three-quarters of pregnancies to single women are *unintended* (Finer and Henshaw 2006; Finer and Zolna 2011). Most of the time, disadvantaged single women do not want to get pregnant, yet, even then, they use contraception

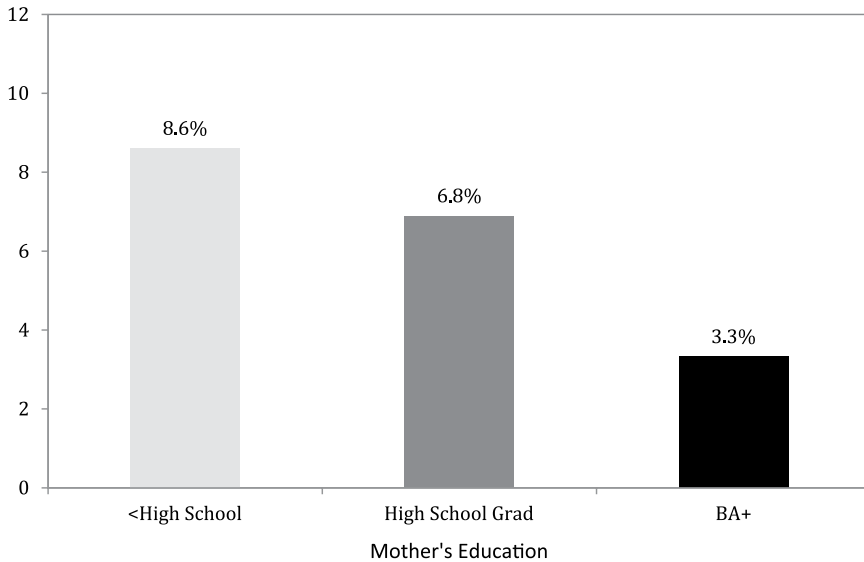


Figure 6. Percent of Unmarried Women Age 18 to 21 Who Did Not Use Contraception during Sex in the Past Week, among Women Desiring to Avoid Pregnancy
Data source: Data from Relationship Dynamics and Social Life Study, 2008 to 2012.
Note: Age 18 to 21. $N = 14,196$ weeks, 672 women. Differences between women whose mother's education was less than high school and each other category are significant ($p < .05$).

more inconsistently than single women from privileged backgrounds.

Figure 6 shows the relationship between a woman's class background and whether she used contraception in the past week, using RDSL data on unmarried women age 18 to 21 who were sexually active in the past week. Percentages are regression-adjusted controlling for race and age. So that the results would not be biased by less advantaged women wanting a pregnancy more, I limited the analysis to women who, in the very same week, reported a strong desire to avoid getting pregnant. Only 3 percent of women whose mothers were college graduates did not use contraception when they had sex in the past week, compared to 7 percent of women whose mothers had graduated high school, and 9 percent of women whose mothers had not graduated from high school.²⁵

Because most nonmarital first births happen to women in their 20s, it is appropriate to look at the question of whether class affects contraception with a dataset containing single women in their 20s and 30s, which is provided

by the NSFG. I limited this analysis to women who said they would be upset if they got pregnant now. Here too there is a class gradient—13 percent of the women with the least educated mothers did not use contraception the last time they had sex, compared to 7 percent of women in the middle group, and only 4 percent of women whose mother was a college graduate (see Figure 7).²⁶

Why do disadvantaged women use contraception less consistently, even when they do not want to get pregnant? Perhaps surprisingly, most research suggests that lack of money is not much of a barrier to getting the pill or the shot, because most poor women have access to contraceptives through Medicaid or Planned Parenthood (Edin et al. 2007; Silverman, Torres, and Forrest 1987).

I believe that one important source of the class difference in contraception is a class difference in *efficacy*. I am using the term “efficacy” here as an umbrella concept covering two main aspects of being able to align your behavior with your goals. One aspect involves *believing* that you can have an effect on

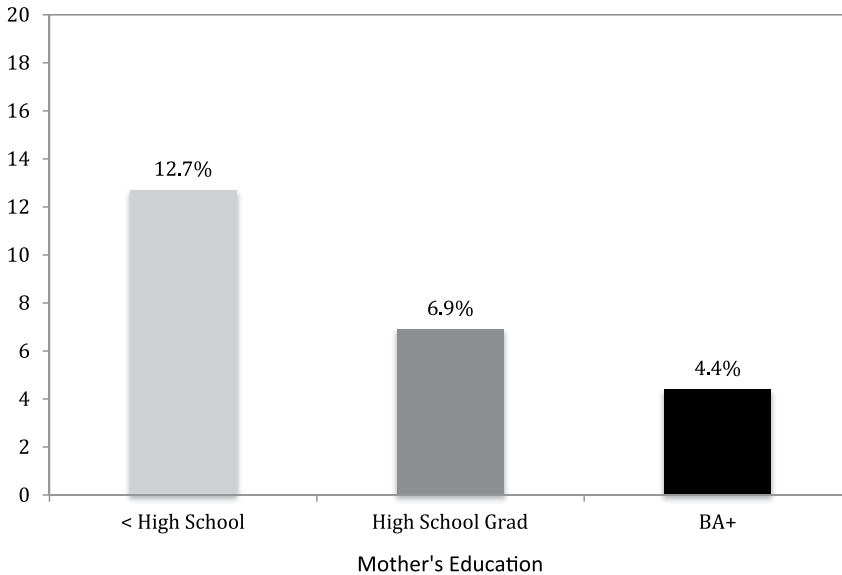


Figure 7. Percent of Unmarried Women Who Did Not Use Contraception at Last Intercourse within the Past Three Months, among Women Who Would Be Upset if Pregnant

Data source: NSFG, 2006 to 2013.

Note: Age 21 to 35. $N = 1,331$. Differences between women whose mother's education was less than high school and each other category are significant ($p < .05$).

outcomes. One can think of this as entailing two subparts: believing you can get yourself to do the behavior that is necessary (e.g., remembering to take your birth control pills), and believing that if you do it, it will have the desired effect (e.g., believing that pregnancy depends more on whether you use contraception than on fate). Notions of this sort have a long history among psychologists, including Rotter's (1966) concept of locus of control and Bandura's (1997) notion of self-efficacy, and have been used by sociologists such as Gecas (1989) and Mirowsky and Ross (2005). The key idea here is that you have to believe you can have an effect or you will not even think it is worth it to try to do whatever is necessary.

Psychologists have generally ignored the social roots of believing you can make a difference. Sociologists, in contrast, have shown that people from lower socioeconomic locations believe less in their own efficacy (Gecas 1989; Mirowsky and Ross 2005). This makes sense, as the stressful and sometimes devastating things that happen to people growing up in disadvantage may engender the belief

that one cannot control much. Such a belief may be largely realistic, but may also impede trying even when effort would have worked to achieve a goal.

Another aspect of efficacy, as I use the term, is self-regulation—being able to make yourself do something that is onerous now but is necessary to a goal. Contraception takes self-regulation on the part of either the man or the woman. Men do not put on condoms because it feels good, and women do not wait in doctors' offices and have pelvic exams for fun. Self-regulation also has a history in psychology; relevant concepts are what Mischel and collaborators call deferred gratification (Metcalf and Mischel 1999; Mischel and Ayduk 2004; Mischel, Shoda, and Rodriguez 1989), what others call emotional self-regulation or executive function (Baumeister et al. 2006; Raver, Blair, and Willoughby 2013), and what Duckworth and Gross (2014) call grit.²⁷

There is evidence that self-regulation is adversely affected by poverty (Kim et al. 2013; Raver et al 2013). Moreover, poor youth are more likely to live in neighborhoods with

high levels of violence, and research shows that homicides in one's neighborhood lower executive function (Sharkey et al. 2012). Economic scarcity is associated with depression and sadness, and experimental research suggests that either scarcity itself or the resulting sadness saps energy needed for deferring gratification or other forms of self-regulation (Lerner, Li, and Weber 2013; Mullainathan and Shafir 2013). Overall, evidence suggests that conditions of lower-class life work against developing self-regulation.

Efficacy differences may also result from class effects on educational attainment. People from advantaged backgrounds complete more education (Belley and Lochner 2007; Hout and Janus 2011; Shavit and Blossfeld 1993), and research shows that education increases the sense of being able to control life, even when it does not lead to higher earnings (Mirowsky and Ross 2005; Ross and Mirowsky 2013).

Class differences in parenting styles may contribute as well. Research shows that the middle class uses more time-intensive parenting strategies (England and Srivastava 2013; Lareau 2011). Among married and cohabiting parents, this is due neither to fewer hours of paid work (people with higher education work more hours) nor to higher income (controlling for income does little to reduce the effect of education) (England and Srivastava 2013). Lareau (2011) suggests that a belief in "concerted cultivation" is a class-specific cultural disposition. I speculate that some of the extra time spent on childrearing by middle-class parents is used to develop children's self-regulation, and that, parallel to the way that lifting weights in the gym develops muscle, when parents bring children's attention back to something like their homework over and over, it may develop persistence with onerous tasks.

In summary, there are many mechanisms through which disadvantaged class backgrounds erode efficacy. Moreover, effects of class background on the personal characteristic of efficacy may be somewhat durable because, for better or for worse, most of us are captive in our families of origin for a long time.

To better understand inconsistent contraception, I undertook a qualitative interview study of single women in their 20s from diverse class backgrounds (England et al. 2015; Reed et al. 2014). One hint about the relevance of efficacy came from the stories women told of forgetting to take their pills or of forgetting to make clinic appointments for a new prescription until their pills had already run out. To code efficacy, my collaborators and I combed through women's stories looking for various indicators of efficacy. For example, we looked for whether women believed they had some control over life and made concrete plans toward their goals. One woman hit both these themes. She said, "I don't think there's a right time for anything; . . . it happens . . . because . . . it's gonna happen. . . . I'm not a person that really like tries to plan." We noted whether procrastination kept women from following through on plans. Some women talked about how losing their temper, or using drugs or alcohol, interfered with their goals. One woman clearly wanted to avoid pregnancy with her boyfriend. She said, "The closest thing we wanted to a baby was a cat or a dog together." Yet she described their use of condoms, their method of choice, this way: "Sometimes we would. Most of the time we would just be way too drunk . . . we would be like wasted . . ."

I found women with low and high efficacy from all class backgrounds. But, on average, women from more privileged backgrounds appeared to have higher efficacy, just as past research suggests. And women with higher efficacy used contraception more consistently.²⁸ This was true even when I used only stories having nothing to do with contraception to code efficacy (England et al. 2015).

The Role of Abortion in Explaining Class Differences in Nonmarital Births

Given their more inconsistent contraception use, single women are much more likely to have unintended pregnancies if they come

from disadvantaged backgrounds (Boonstra et al. 2006; Finer and Henshaw 2006; Musick et al. 2009). This raises the question of whether they will have an abortion. Data on abortion have serious problems of underreporting. The best approach to overcoming this problem uses data from surveys taken in the waiting rooms of a representative sample of abortion providers; it suggests that disadvantaged women are more likely than their privileged counterparts to have an abortion in any given year (Boonstra et al. 2006; Jones and Kavanaugh 2011). This is mainly because of the aforementioned higher rate of unintended pregnancies. But for any single unintended pregnancy, disadvantaged women are less likely to abort than are more privileged women (Finer and Zolna 2014). For example, in 2008, among unmarried women who had a pregnancy they called unintended, 33 percent of women with less than a high school degree aborted, 48 percent of women with a high school degree aborted, 61 percent of women with some college but not a bachelor's degree aborted, and 77 percent of women with a bachelor's degree aborted.²⁹ Put more simply, disadvantaged single women have more pregnancies and abortions, but abort a lower percent of their pregnancies. They may decide not to abort because of their weaker motivation to avoid a birth, discussed earlier. They are also more likely to believe that abortion is wrong. An analysis of 2012 and 2014 GSS data using the same regression-adjustment procedures and controls described for Figure 4 shows that, among young women whose mothers had less than a high school education, only 26 percent think women should be able to get a legal abortion, compared to 50 and 69 percent, respectively, among women whose mothers had a high school education and were college graduates (results not shown).

Another reason single women from lower-class backgrounds are less likely to respond to a pregnancy with an abortion is lack of money (Boonstra et al. 2006). This is an example of a direct effect of a class constraint on an outcome. I mentioned that studies have not found cost to be much of a barrier to getting birth control pills or the shot, but abortion is different. The Hyde

Amendment, passed by Congress every year, says that federal funds cannot be used for abortions, so with few exceptions, an abortion funded by Medicaid, the federal-state program providing health care for the poor, is possible only in the 17 states that spend their own money for this service (Guttmacher Institute 2015). Even Planned Parenthood's (2015) website says its abortions cost "up to \$1,500."

The evidence is clear that lack of government funding deters abortions for poor women. For a period in the 1990s, North Carolina funded abortions, but only until the allocated annual budget ran out. Thus, comparing abortion incidence in months before and after the funds ran out in these years provides a natural experiment. Two analyses show that in months after the funds ran out, abortions went down, primarily among women in groups poor enough to qualify for the subsidized abortions (Cook et al. 1999; Morgan and Parnell 2002).

The arguments I have made about how class background affects nonmarital births exemplify the two kinds of theoretical mechanisms through which constraints affect outcomes. In the context of lack of public provision of abortion, when lack of income directly prevents some pregnant single women from having abortions, the outcome is a nonmarital birth. In this case, the class constraint has a direct effect on the outcome, with personal characteristics not involved. I also argued that privileged backgrounds provide time-intensive parenting, and entail less exposure to economic scarcity and violence, and these class-based constraints shape the personal characteristic of efficacy, which, in turn, affects contraception, thereby affecting the likelihood of a nonmarital birth.

WHY SOCIOLOGISTS SHOULD CONSIDER THEORIES FEATURING PERSONAL CHARACTERISTICS: ADDRESSING THE CRITICS

In my empirical cases, I pointed to evidence for the two types of theoretical mechanisms I

introduced—direct effects of constraints, and effects of constraints operating through shaping personal characteristics. The two ways that constraints can affect outcomes are not mutually exclusive, so if there is evidence for each mechanism, a theory containing both or use of theories of each type is best. But my perception is that we sociologists sometimes avoid explanations involving personal characteristics, not because of contrary evidence, but because they make us queasy. So I want to address head-on some of the criticisms I think are implicit in this queasiness.

One criticism is that theories containing personal characteristics ignore constraints. But constraints are not ignored in the models I offered involving personal characteristics, they are just further back in the chain of causation behind personal characteristics. In fact, a theory saying that constraints change who we are in a durable way implies that constraints are quite powerful.

A second critique of models containing personal characteristics is political. The claim is that they encourage changing the characteristics of disadvantaged people, while leaving constraints intact. But, in fact, the models I offered imply that one way to change personal characteristics *is* to change the constraints that shape them.

A related objection is ethical. Some think that, when we explain an outcome by a personal characteristic commonly seen as unflattering, we blame the victim. To “blame” means to make a moral criticism. I do not agree that to claim that personal characteristics shape outcomes is to imply a moral criticism. (I am backed up by moral philosophers on this; see Bok 1998; Paul 1999; Wolf 1993.) But if one *is* going to infer blame, it seems just as sensible to me to blame those who have the most power in maintaining the constraints that shape personal characteristics.

In summary, I do not agree with the view that offering an explanation in terms of personal characteristics implies that constraints are irrelevant or that people with disadvantageous outcomes are to blame. Yet such explanations are seen this way by many sociologists

and this is part of why they are unpopular. Claims about class or race differences in personal characteristics that flow from subgroup cultural differences are a case in point. As Small, Harding, and Lamont (2010) recently noted, any consideration of culture together with disadvantage has been a sort of “third rail” in U.S. sociology the past few decades, and typically avoided in favor of structural explanations that feature direct effects of constraints. Instead, Small and colleagues (2010) urge us to consider culture and structure together. To take another example, some gender sociologists reject the idea that occupational segregation is importantly affected by gendered socialization (Jacobs 1989; Reskin and Maroto 2011), despite evidence that gendered aspirations (a personal characteristic) have at least some role in job segregation (England 2011; Marini and Brinton 1984; Okamoto and England 1999). When I suggested that aspiring to gender-typed occupations was part of why working-class women had integrated male occupations so little (England 2010), Reskin and Maroto (2011:85) countered, saying, “People’s choices do affect the extent of sex segregation, but they are not the choices of working-class women. . . . Sociologists understand that the choices that govern the distribution of desiderata are almost invariably those of the people at the top.”

Despite my argument that models featuring personal characteristics do not imply blaming victims or ignoring constraints, a legitimate concern is that they can be misread to imply *exactly* that. This is true for work on many topics in sociology—including, but not limited to, gender, crime, education, stratification, poverty, and health. If we want to discuss these topics as public sociologists, there are several ways we can try to avoid misreadings. We can point to the upstream constraint-related sources of the personal characteristics, if research has elucidated them. For example, we can point to or devise research illuminating the social sources of women’s career aspirations or men’s heterosexism. We can detail interventions that would attack those constraints and thereby

change the personal characteristics. To take a class-related example of this, we can point to a number of experimental and quasi-experimental studies looking at what happened when government programs increased poor families' income. Several studies report improvement in children's personal characteristics—such as better cognitive skills and a lower propensity to illegal behavior (Akee et al. 2010; Duncan, Magnuson, and Votruba-Drzal 2014; Duncan, Morris, and Rodrigues 2011). When we have a finding showing the importance of a personal characteristic under present conditions, we can talk about what interventions would make the characteristic less consequential. For example, interuterine devices (IUDs), once inserted, require no action for years; if they became the default contraceptive option, it would drastically reduce how much efficacy is needed to avoid pregnancy (Grimes 2009; Peipert et al. 2011; Trussell and Guthrie 2011), rendering the class differences in efficacy I discussed much less important.

As we go about our work as sociologists, my hope is that we will remain open to understanding both of the ways social positions and their constraints affect our outcomes. Sometimes constraints do not change our personal characteristics; they just change what we do and what happens to us. Other times, constraints change who we are in durable ways; sometimes the *social* becomes *personal*. When it does, studying the processes involved will enrich the science of sociology and its relevance to the social world.

Acknowledgments

I thank Jonathan Marc Bearak, Mónica Caudillo, Jessie Ford, and Abigail Weitzman for expert research assistance. I am grateful to sociologists at Johns Hopkins University, University of Virginia, Pennsylvania State University, Stanford University, University of Colorado, CUNY-Queens, and New York University who gave me comments on earlier versions of this paper.

Notes

1. I am not treating individual characteristics, such as national origin, class background, race, sex, or sexual orientation, as “personal characteristics,”

although they may affect such characteristics through the constraints to which they (as social positions) subject us.

2. I consider internalized dispositions toward such behaviors to be personal characteristics, but the behaviors themselves to be outcomes.
3. Kohn and his collaborators recognized the threat of selectivity—that people with more self-direction and intellectual flexibility may be selected into jobs involving more self-direction. They thus used panel data and types of modeling intended to minimize selection bias, although one prominent reviewer (Alwin 1993) found their approach to the problem inadequate. My goal here is not to adjudicate whether best practices for causal inference have been used in past research, but to point to past presentations—theoretical or empirical—of the thesis that social positions affect personal characteristics.
4. Another example of a research program exemplifying Arrow 4 of Figure 1 is the social-psychological part of the status attainment tradition. This work shows associations (argued to be causal) between fathers' aspirations for their sons' education, sons' aspirations for themselves, and sons' actual socioeconomic outcomes (Sewell and Hauser 1980).
5. However, income explains some variance in health outcomes that does not flow through measured personal characteristics or health behaviors, suggesting more direct effects of class on health outcomes as well (House 2015; Lantz et al. 2001).
6. Both the social structure and personality view and Bourdieu's theorizing are relevant to gender. In House and Mortimer's (1990) discussion of the former they mention gender as a social structural location affecting personal characteristics, and Bourdieu (2001) applied his concept of “habitus” to what he called “masculine domination.” Yet, few gender scholars writing on these issues have self-identified as following either Bourdieu or the social structure and personality view.
7. Ethnomethodological models do contain internalization of culture. But it is not Person 1 who “does gender” who is seen to be operating from beliefs about gender, but rather the Person 2, whose expectations of Person 1 are based on Person 1's gender. These expectations cause Person 1 to “do gender” to make sense to Person 2 (England and Browne 1992).
8. Whether a woman had a male partner is based on whether she reports having had vaginal intercourse with at least one man. Whether a man had a male partner is based on whether he reports having had oral or anal sex with at least one man. Whether a woman had a female partner is based on a question asking simply whether she had one or more women “sexual partners.”
9. For the contraception analysis, I did not use years earlier than 2008, because in those years the NSFG did not ask all women how they would feel if they got pregnant now, and I needed this variable to

- delimit my sample to women who did not want to get pregnant.
10. In all NSFG and GSS gender analyses, the race dummy for non-Hispanic blacks is interacted with immigrant status, because preliminary results showed this interaction, but not others, to be significant. In NSFG and GSS gender analyses, age is categorized as 18 to 23, 24 to 29, and 30 to 35. In all NSFG analyses regarding gender or class-background differences, because of the large N , I also controlled for year of birth, expressed in century months, as well as the square and cube of this variable. This captured cohort effects. In the GSS and RDSL, a measure of cohort is not included, so age coefficients capture cohort.
 11. For all analyses in the online supplement, race is classified as non-Hispanic whites (called whites), non-Hispanic blacks (called blacks), and Hispanics, with respondents from other race-ethnic groups dropped.
 12. Mother's education is a common indicator of class background. It is positively correlated with father's education and family income but generally better measured than income. It is preferred to father's education because some individuals never knew their biological father, and, if their parents separated, it is unclear if respondents are reporting on their nonresidential father or a step-father, and it is unclear which person is more indicative of the class advantages they experienced.
 13. For NSFG analyses on class differences in contraception use, age is measured with dummies to capture the categories 21 to 24, 25 to 29, and 30 to 35 years. In contrast, to model whether women (or in the online supplement, men) had a nonmarital birth while never-married before age 25, age is not in the model because it is built into the dependent variable. In NSFG analyses on nonmarital births and contraception, year of birth is entered linearly, as well as in squared and cubed form, to capture cohort effects. In the RDSL analysis on contraception, because respondents were all age 18 to 19 at baseline, but the observations are person-weeks as they were followed for 2.5 years, age was measured linearly to the month, and cohort was not included (given that it hardly varied). The RDSL did not ask about immigrant status because the county in Michigan from which the sample comes has few immigrants, so the RDSL analysis does not contain immigrant status or its interaction with race. Also, in RDSL analyses race was limited to black and other, where "other" is mostly whites because there were few Hispanics, Asians, or other races in the sample. In NSFG analyses on nonmarital births or contraception, the dummy for non-Hispanic black is interacted with the immigrant dummy because preliminary analyses showed only this interaction to be significant.
 14. Another possible problem of a causal interpretation of effects of mother's education occurs if a mother has a personal characteristic, acquired genetically or socially, that affected her own education. If her daughter "inherited" this characteristic from her, genetically or socially, and it affects the outcome of interest, I would find an association between mother's education and the daughter's outcome that is not a causal effect of mother's education or the class advantages it represents.
 15. Two qualitative studies provide different angles on "girls kissing girls." Whereas Hamilton (2007) describes the experiences of heterosexual women who kiss other women at parties but have no subsequent romantic or sexual relationships with women, Rupp and colleagues (2014) identify some women who use the acceptability of kissing women to explore attractions and later end up in sexual and romantic relationships with women.
 16. By contrast, only 66 percent of women age 18 to 35 who called themselves bisexual reported ever having had oral sex with a woman, suggesting that many young women develop a bisexual identity without having much sexual experience with women. Of course, many young women who have never had sex with a man identify as heterosexual as well. See Caudillo and England (2015) on links between reported sexual orientation and sexual experience.
 17. These numbers are reassuringly consistent with those obtained from a 2012 Gallup poll asking respondents the single yes-or-no question of whether they considered themselves lesbian, gay, bisexual, or transgender. I used adults age 18 to 35, so the Gallup numbers are not precisely comparable, as they include transgender persons and the closest age group is 18- to 29-year-olds. However, their numbers of 4.6 percent for men and 8.3 percent for women (Gates and Newport 2012) are very close to the NSFG figures I show in Figure 2; if I add respondents in Figure 2 who said they are gay/lesbian to those who identified as bisexual, the result is 4.2 percent of men and 8.4 percent of women claiming a non-heterosexual identity.
 18. In earlier years, the NSFG offered the option "something else." From 2006 to June 2008, taking respondents of all ages, .9 percent of women and .5 percent of men chose this option. It was small enough that the NSFG decided to stop providing the option, although the proportion making this choice was 14.6 percent of those choosing anything other than heterosexual for women and 13.4 percent for men. Because there was no significant difference between the percent of men and women choosing "something else" in the years when it was offered, and I prefer to provide the most recent data possible, I used only the years after the option was dropped, 2011 to 2013.

19. I know of two other hypotheses about why sex with same-sex partners is less common among men than women. First, Diamond (2008a, 2008b, 2014) suggests that women may have a greater biological propensity for sexual fluidity or bisexuality, but cautions that evidence is very preliminary and tentative. Second, in a personal communication, Leila Rupp (2015) has suggested that sex between two women is not stigmatized as gender-nonconforming in the same way that sex between men is, because sex between women is not seen as “real sex”; sex and sexual agency are defined in terms of the penis. Rupp (2012) points to a long history of women’s sex with other women being seen as of little importance.
20. Incentives are key to rational choice perspectives, but they are used much more broadly in sociology, even among scholars not identifying with the rational choice perspective.
21. For example, Mishel (2015) found job discrimination against lesbians in an audit study.
22. Figure S8 in the online supplement shows that men from disadvantaged backgrounds are also overrepresented in having such births; this is not surprising given that people often partner with others from a similar class background.
23. Table S7 in the online supplement shows that, among Hispanics, although the bottom two mother’s education groups differ as expected, women whose mothers are college graduates are not least likely to have nonmarital births. However, in results not shown, I eliminated non-U.S.-born Hispanic women and found the expected education gradient among U.S.-born Hispanics.
24. However, see Musick and colleagues (2009) for evidence questioning whether earnings (that would be forgone after having a baby if the woman left employment) predict fertility.
25. In results not shown, RDSL data show a class gradient within blacks and within whites (the RDSL sample contained few members of other groups).
26. Figure S9 in the online supplement shows that, while patterns differ somewhat by race, not using contraception is more likely for women whose mothers had less than a high school degree than for women whose mothers were college graduates for all three groups—blacks, whites, and Hispanics, although the difference is not significant in all groups. The anomaly is Hispanics, for whom the relationship is not monotonic; this is also the group with the smallest *N*.
27. The concept also bears some relationship to Clausen’s (1991) notion of planfulness and competence.
28. Little previous work has tested this. The two tests I could find examine only the belief aspect of efficacy, focusing on whether beliefs about one’s ability to successfully use contraception predict whether one actually does so (Longmore et al. 2003; Pearson 2006). Lewis, Ross, and Mirowsky

(1999) show that young women with less of a sense of personal control are more likely to get pregnant in their teens or early 20s.

29. Finer and Zolna’s 2014 article provides proportions analogous to these by education, but combining married and unmarried women. The numbers reported here are from a special computation they did, using the same data as their 2014 article, but limited to unmarried women. I received the results in a personal communication from Finer and Zolna in 2015. To be consistent with the data I presented earlier in this address, I would have preferred classifying women by their mother’s education rather than their own, because the former is an indicator of the more exogenous class background, but that variable was not available. However, women’s education is strongly correlated with their parents’ education.

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