SOCIAL SCIENCE, SOCIAL POLICY, AND LETHAL VIOLENCE: LOOKING FOR UPSTREAM SOLUTIONS
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ABSTRACT: *It is the contention of this article that sociologists should be more involved in social policy discussions because of their deep concern and extensive knowledge about policy-related issues and their broad theoretical and methodological traditions. Recent work by Stockard and O'Brien on changing age distributions in lethal violence is used to illustrate that policy recommendations based on sociological research would be more universalistic and effective than current approaches. If greater involvement in policy discussions were to occur, it would be important to pursue multidisciplinary work, use a nonpartisan approach, increase involvement in meta-analyses and field experiments, and develop collective and systematic ways of translating findings into policy actions.*

In preparing my presidential address, I carefully read the addresses delivered by past presidents. Many of them commented on the potential and value of our discipline (Howard 2003; Prather 1996; Ridgeway 2000; Snow 1999). They also presented their hopes for the future of the field (Charmaz 2000; Coltrane 2001; Scheff 1997). Throughout these addresses I saw what I think has been a common theme of sociology since its inception—the hope, as well as the belief, that our science of society can help us to come to a better understanding of the world and make it a better place in which to live. My address continues this tradition.

My thoughts have, of course, been influenced by my own biographical journey in the academy. Throughout my career I have been very fortunate to have worked and written with social scientists from a number of backgrounds, including political science, economics, education, and public health. Currently I am in a department in which I am the only sociologist, and I regularly interact with economists, specialists in public health and public administration, geographers, planners, and

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even biologists. I have learned from these interactions how much more fruitful our work can be when we share understandings across disciplinary boundaries. Many of my colleagues are actively involved in scholarship related to public policy, and over the past few years, I have begun to gather a little courage from them about such involvement.

Here, I want to assert that we sociologists may well be too timid in our attempts to influence public discourse and that it is time to be more assertive. Public policies can have a large impact on areas that we study, and they influence the expenditure of a great deal of time, energy, and money; thus it is important that we become more involved in this arena. I want to discuss, first, why I think our discipline can and should be more involved in policy discussions. I illustrate this point by describing work that I have done with my colleague Robert O'Brien on the changing age distribution of rates of lethal violence. Finally, I inject a note of pessimism, or perhaps caution, by voicing a number of concerns regarding our ability to have a viable impact in the policy arena.

SOCIOLOGISTS AND SOCIAL POLICY

Some might ask why sociologists should be involved in social policy discussions. Is this an appropriate role? Is our science at the point where we can provide usable advice? I take an ethnocentric position and assert that sociologists are perhaps the best suited among social scientists to provide input to the policy arena. Let me give five reasons to support this point.

1. We care about policy-related issues. Sociologists care deeply about public policy and social problems. This concern can be seen in the European roots of our discipline, and it permeated the early years of American sociology. We are probably most familiar with the tradition of the Chicago school, its extensive work with the various ethnic and racial minority groups in the Chicago area and its active involvement with social policy makers and activists of the era (Boskoff 1969; Carey 1975; Coser 1977; Harvey 1987; Ritzer 1988; Ross 1991). Yet this tradition continued throughout the twentieth century in the work of scholars as varied as Robert Lynd and Helen Lynd (1929, 1937), Paul Lazarsfeld (e.g., Lazarsfeld and Reitz 1975), Peter Marris (Marris 1982; Marris and Rein 1973), Charles Lindblom (Lindblom 1990; Lindblom and Cohen 1979), and James Coleman (e.g., Coleman et al. 1966; Coleman and Hoffer 1987).

A simple glance at the program for the current meetings of our association shows that this concern with policy-related areas still exists today: sessions cover areas from health to schools to racial and gender inequality. A number of the conference papers deal directly with policy development and implementation, but many more examine the precursors of conditions that social policies address. Although many, if not most, of us are not directly involved in the policy arena, we study, write, and teach about issues that are an integral part of public policy debates and concerns.

2. We know a lot more than we may think we do. We do not just care about issues, we actually know a great deal about them. In fact, I would assert that we know a lot more than we think we do. A few years ago I systematically reviewed a great deal of the literature in our field while writing an introductory textbook (Stockard

1998, 2000). In the process I became impressed with our accumulation of knowledge. Perhaps because each of us tends to read and write in certain limited areas, we may be unaware of the rapid accumulation of knowledge in all areas of our discipline. Yet today, we have sets of highly replicated findings that pertain to areas as diverse as improving racial-ethnic relations, developing more effective schools, creating more humane work organizations, and promoting democratic, prosperous, and peaceful societies.

In meetings at the University of Oregon a friend of mine who is a political scientist likes to talk about the "hard sciences" and "the *really* hard sciences." His point is twofold. First, the social sciences are sciences. We have well-developed methodologies and strict rules of scientific behavior, and we enforce these rules through professional norms and standards of publication. Although the content of our studies differs from that in the "hard sciences," the way in which we conduct our research can be just as rigorous. Second, because the content of our studies differs from that of the "hard sciences"—because we study real people and their actions, beliefs, and emotions—our work is much more difficult and complex than that of our colleagues in other disciplines. The entities and processes they study are often more easily observed, counted, and manipulated than those we study. I believe that our field is "really hard," but I also believe we are successful and that the mounting quantity of replicated findings demonstrates this success.

3. We know at least as much as people in other disciplines. The point I am making here is that we are just as successful and capable as other scientific enterprises and that we may need to overcome a disciplinary inferiority complex. Perhaps some of our families refer to medical doctors as "real doctors," in contrast to our less lofty status. Certainly the general public (as attested by our standard occupational prestige scales) views medical doctors as having much more prestige than simple sociologists. Yet one of the most surprising facts I learned when I began to work more closely with my colleagues in public health was the fallibility of the "science" of medicine. A large proportion of all treatments that physicians prescribe have no scientific basis in or support from controlled experiments. A recent episode is illustrative: within the past year a body of evidence from controlled experiments has demonstrated the lack of efficacy, and, in fact, the dangers, of hormone replacement therapy for women in midlife and later. Similarly, in just the past few months, many years after their development, simple diuretics have been shown, through controlled studies, to be just as effective as the much costlier beta-blockers and other medications for hypertension. Although we tend to think of medical science as "true science" and medical doctors as "real doctors," medical treatments are often based on folklore and tradition.

Of course, I could have chosen another discipline on which to focus my sociologically ethnocentric disdain. My major point is that areas that we, collectively, might hold in awe are not as infallible as popularly believed. I assert that sociologists could do just as well if not better in social forecasting.

4. Our sociological understandings provide a solid base for public policy. While I may have convinced you that sociologists care about public issues and that we know at least as much as people in other disciplines, you may still wonder if our knowledge base provides a good foundation for public policy. I suggest that sociology is

uniquely situated among the social sciences to provide the best analysis of social issues and the foundation for social policy. In contrast to the other social sciences, we examine virtually all areas of social life and the linkages among them. We also routinely use multiple levels of analysis. We use microlevel perspectives to examine individual attitudes and behaviors, mesolevel approaches to look at workings of organizations, and macrolevel approaches to examine entire communities or societies. We examine static structures and processes of change. We may study our own societies or compare many different cultures.

In addition to our extremely broad scope of inquiry, our work is methodologically and theoretically sophisticated. I find it notable that through the years sociologists have pioneered many of the most advanced statistical innovations that we now routinely use, such as log-linear analysis (Goodman 1978), event history analysis (Allison 1982; Tuma 1982), structural equation modeling (Bollen 1989; Duncan, Haller, and Portes 1968), and hierarchical linear modeling (Raudenbush and Bryk 2002; see also Raftery 2000). Similarly, advances in the rigorousness of qualitative work reflect the energies and imagination of sociologists, such as the pioneering work in grounded theory (e.g., Glaser and Strauss 1967), ethnomethodology (Garfinkel 1967), and conversation analysis (Hutchby and Wooffitt 1998). Sociologists have developed many of the theoretical perspectives used by other social sciences and are, I contend, the most theoretically flexible and innovative of all of these fields. As one of my policy colleagues reminded me, the strongest policy and intervention approaches are informed by robust theory (Judith Hibbard, pers. comm. March 2003). None of the other social sciences looks at such a broad swath of social life, uses such a wide array of methodological techniques and perspectives, or has shared in the development of so many theoretical approaches that have been adopted by other areas of academe.

5. The issues are too serious and pressing to leave to other disciplines. Perhaps most important, I suggest that if we leave policy debates to those in other fields, the world will not be as good as it could be. The concerns faced by our world—whether they involve areas such as inequalities and tensions within families and the workplace, underachievement in schools, income and health disparities between social class and racial-ethnic groups, or poverty and conflict between and in developing nations—are very serious. Because, as I argue above, we know a great deal about the structure and processes that underlie these issues and our understandings are rigorous and often more developed than those presented by other disciplines, it is important that we become more involved in policy discussions.

I turn now to the case of lethal violence, an area that I have studied in recent years, to illustrate both the depths of our understandings and the ways in which policy recommendations from sociological research differ from those that tend to dominate the policy arena.

THE CASE OF LETHAL VIOLENCE

Over the past few years, my colleague Robert O'Brien and I have examined changes in the age distribution of lethal violence—a change that is most easily

seen in the increasing rates of lethal violence among young people. I will first tell you a little bit about these changing age patterns, briefly summarize the results of some of our work, and then discuss policy implications of our results.

The Changing Age Distribution of Lethal Violence

Our examination of lethal violence has focused on homicide and suicide— violence directed toward others and violence directed toward one's self—perhaps the two most extreme indicators of violent behavior and the two for which we can obtain the most reliable data (O'Brien and Stockard 2002, 2003; O'Brien, Stockard, and Isaacson 1999; Stockard and O'Brien 2002a, 2002b). At first glance these forms of lethal violence seem strikingly different. We often think of violence directed toward others as involving impetuous, unbridled anger and aggression, whereas we think of suicide as stemming from deep despair and depression. Historically, homicides have primarily involved people in their late teens and twenties, whereas suicides have been more common among older age groups. Homicides in the United States are more common among nonwhites, particularly African Americans; suicides are more common among whites. Academic work related to these phenomena has tended to occur within different subspecialties, with criminologists focusing on homicide and demographers, sociologists, and epidemiologists examining suicide.

There are, however, some similarities. Both forms of lethal violence are more common among males than among females. More important for our work has been changes in the age patterning of lethal violence. Over the past few years, the typical age at which homicides and suicides occur has shifted: young people have become relatively more at risk for both types of behavior. For instance, as shown in Figure 1, in 1960 the highest rates for homicide offenses were found among people in their twenties and thirties. In 2000 the overall shape of the age distribution was dramatically different, with teens and those in their early twenties having far higher rates than members of any other age group. The rate of homicide arrest for younger age groups relative to older age groups is much larger today than in 1960. In short, people in more recent birth cohorts appear to have a relatively greater incidence of involvement in homicide than do those in earlier cohorts.

Similar changes have occurred in suicide rates. The early writings of the moral statisticians, as well as the writings of Durkheim, indicate that since records have been available suicide has been least common among young people and most common among those at older ages. This pattern can be seen in the data for 1930 and 1955 in Figure 2.[1] By the 1990s, however, a very different pattern emerged, which is illustrated in Figure 2 by the data for 2000. Currently, rates rise rapidly for those in younger age groups and remain relatively constant or even decline somewhat over older age groups. Most striking, rates among young people are now far higher than they were among young people in earlier periods, and rates among older people are lower than those among older people in earlier decades. In short, as in the case of homicide offenses, the age patterning of suicide has altered dramatically, with more recent birth cohorts being much more at risk.

These changing patterns of the relationship between age and lethal violence
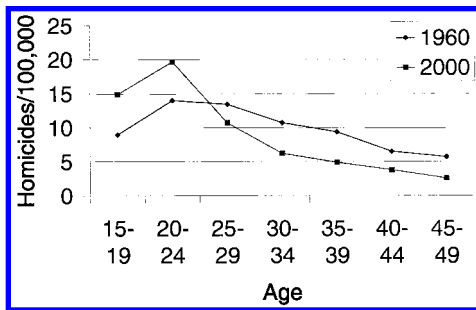
Figure 1

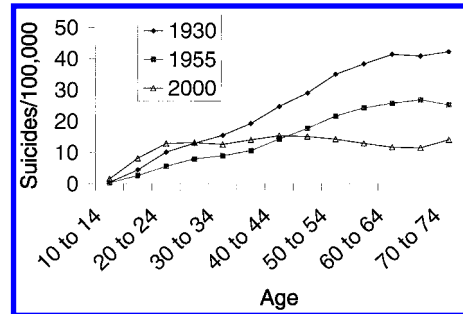Homicide Arrest Rates by Age,
1960 and 2000

Figure 2

Suicide Rates by Age, 1930, 1955,
and 2000

have occurred not just in the total population, as shown in Figures 1 and 2, but also in race-sex subgroups. In other words, the patterns are not restricted to one demographic group but appear across the population, including those groups in which either homicide or suicide (or both) have been relatively more or less common.

The toll of lethal violence is very large. In 2000 more than 8 of every 100,000 fifteen- to nineteen-year-olds and almost 13 of every 100,000 twenty- to twenty-four-year-olds died from suicide. Death rates from homicide in these age groups were slightly higher. Taken together, the death rates for lethal violence were almost 18 out of 100,000 for fifteen- to twenty-year-olds and 29 out of 100,000 for twenty- to twenty-four-year-olds. Suicides and homicides kill more young people than any other cause except accidents. The toll is much higher for men than for women and is especially high for nonwhite men, as a result of extraordinarily high homicide rates but also from suicide, the rates for which are close to those of white males. Our projections indicate that more than 2 percent of nonwhite men between the ages of twenty and thirty-nine could die as a result of violence if current rates persist (Stockard and O'Brien 2002b:632).

Explaining Lethal Violence

A relatively small body of theoretical work has focused on the similarities of homicide and suicide. Elements of this work can be seen in the linking of the prohibition on both acts in writings in the Talmudic tradition (Goldstein 1989) and the works of Saint Augustine and Saint Thomas Aquinas (Augustine [ca. 412] 1950:52; Battin 1996:31). Scholarly analyses that link the two phenomena can be found in the work of the moral statisticians of the nineteenth century (Morselli [1882] 1975; Quetelet [1833] 1984; see also Whitt 1994:18), in the writings of psychoanalysts in the early twentieth century (Dollard et al. 1939:21; Freud [1917] 1957, [1920] 1955, [1923] 1961, [1930] 1961; Menninger 1938:5–6), and in the work of sociologists in the mid- to late twentieth century (Henry and Short 1954; Porterfield 1949, 1952a, 1952b, 1960; Unnithan et al. 1994).

The theoretical framework developed by O'Brien and Stockard has been informed by these scholars but has relied most heavily on the Durkheimian tradition, particularly the Durkheimian influence on control theory in criminology and the classic writings of Durkheim himself on suicide. The tradition of control theory posits that low levels of social integration and regulation produce ineffective internal and external social controls, which in turn promote deviant behaviors (Gottfredson and Hirschi 1990; Hirschi 1969; Stafford and Gibbs 1993). The long-standing Durkheimian tradition of work on suicide (Durkheim [1897] 1951) demonstrates the relationship of low levels of integration and regulation to higher levels of suicide. In general, both theoretical traditions point to the importance of social integration and regulation in stemming lethal violence. We have built on this tradition by looking at variations among birth cohorts in social integration and regulation, what we have called cohort-related social capital, and have hypothesized that this cohort-related social capital is an important influence on cohort differences in lethal violence. That is, the reason that some birth cohorts are more at risk of suicide or homicide is that they have less resources, support, and social integration.

In our analyses we have used two indicators of cohort-related social capital, both demographic in nature and associated with the earliest years of life: the size of birth cohorts relative to others and childhood family structure. We suggest that family structure and relative cohort size influence the social integration and regulation of birth cohorts in at least three ways: financial strains that result from more children in a cohort or from fewer adults in a household; less attention and supervision for children, with adult resources spread more thinly among children; and stronger influence of peers relative to adults. While, in part, cohort effects reflect the aggregation of individual effects, all members of a birth cohort are affected by these characteristics, no matter what the size or composition of their own family.

Our analyses have used "age-period-cohort characteristic" (APCC) models. These models provide extremely strong controls for age and period and thus provide a conservative test of the effects of cohort characteristics. The results we have obtained have been very strong. Whether our analysis has involved homicide offenses (O'Brien and Stockard 2003; O'Brien, Stockard, and Isaacson 1999), homicide deaths (O'Brien and Stockard 2002), or suicide deaths (Stockard and O'Brien 2002a, 2002b), and no matter what type of statistical techniques we have employed, our hypotheses have received strong support. Birth cohorts that are relatively large or that have higher proportions of nonmarital births are relatively more at risk of lethal violence than are other birth cohorts. This heightened risk is independent of age and period and appears to last throughout the life cycle. Although the impact of these variables may be most obvious in the extreme variations in lethal violence rates seen in recent years, our examination of earlier periods indicates that these measures of cohort-related social capital also account for earlier, less dramatic variations.

It is important to emphasize that our analysis is structural. The effects of relative cohort size and family structure reflect the structures into which cohorts are born and grow up. They do not reflect the love or the hopes and dreams that individual parents have for their children. Instead, these cohort characteristics reflect

structural conditions that result in varying levels of financial strain, adult supervision and regulation, and influence of peers.

Perhaps most important, given the theme of this address, is the fact that these results can provide the basis for solid and reliable social forecasting. In every analysis that we have done the data fit our theoretical models with extraordinary accuracy. From examining these results, we can tell which birth cohorts are relatively more at risk than others of experiencing lethal violence. Given the strength of these models, I contend that they could provide clues as to both the directions that our social policies regarding lethal violence should take and who should be targeted. Unfortunately, current policy efforts in this area too often seem focused in other directions.

Policies Directed toward Lethal Violence

People who work in the policy arena often tell a story of someone who comes upon a river and sees people floating downstream, clearly in need of rescue. Others are standing by the banks frantically grabbing people as they float by. The newcomer is alarmed by what he sees and joins in the effort to pull people out. But the flow never seems to get any smaller; more and more people keep coming downstream, and the rescuers are working as hard as they can. Finally, the newcomer turns and starts walking up the river. "Where are you going?" ask those who are working by the riverbank, and he replies, "Why, I'm going to see why these folks are getting thrown into the river in the first place."

I contend that policies and programs currently directed toward lethal violence are, primarily, downstream efforts. The structural forces that promote lethal violence and that are uncovered by sociological analyses point, however, to upstream sources. Below I briefly describe major current policy efforts directed toward lethal violence and then discuss the implications of our work, including analyses that involve data from other countries, for upstream policies.

Current Policy Efforts: Downstream Approaches

Scholars who write about suicide prevention efforts discuss three types of interventions: universal, selected, and indicative. "Universal" refers to efforts directed at an entire school or community, such as programs to increase awareness of suicide and its prevention, increasing access to mental health services, and reducing the availability of a means of suicide. "Selected interventions" are those directed at target groups deemed at especially high risk and often involve training of bureaucratic gatekeepers in risk assessment or the use of special support or crisis management and response teams. "Indicative interventions" are those that are closest to the individual who is at risk of self-destruction and involve both medical and psychosocial approaches, including medication and psychotherapy (Goldsmith et al. 2002; U.S. Public Health Service 1999). All of these suicide prevention efforts are downstream in that they are directed primarily at developing nets that are wide enough and strong enough to identify and help people when they are in the throes of a crisis.

Policies and programs directed at the prevention of homicide and other types of violence directed toward others also tend to be downstream in nature. The majority of these efforts involve the criminal justice system, which is used to punish those who commit violent offenses as well as those who are assumed to be on the path to such actions. In addition, the threat of incarceration and punishment is often purported to serve as a deterrent to those who contemplate violence (Mendel 2000).[2]

It is understandable, of course, that downstream approaches are the most common. If a loved one were suicidal we would immediately try to find help from the mental health system; if placed in danger of violence from others we would call on the criminal justice system. When the prospect of lethal violence is immediate, the only logical response is to rely on such approaches. The professionals and scholars who are involved in developing and administering these programs are dedicated to their task, and many are devoted to finding the most efficacious approaches. Yet relying solely on the mental health or criminal justice system, or even on the strategy of education, media awareness, or psychotherapy—while understandable and often necessary and important—fails to address what may be the ultimate precursors of lethal violence. In other words, often these programs do not address the structural causes of lethal violence, only the symptoms. In addition, they fail to acknowledge the common sources of violence inflicted on the self and inflicted on others. To use a medical analogy, they may be using one medicine to treat the fever and another to treat the aches, but they are not using medication that might combat the underlying infection. To do so requires an upstream approach.

Upstream Approaches to Lethal Violence

Is it possible to have upstream policies, those that focus on the sources of lethal violence? What might such upstream policies look like? My answer is informed by work that O'Brien and I have conducted examining cohort variations in suicide rates among a variety of Western nations (Stockard and O'Brien 2002a).[3] As before, our analyses used the APCC model and explored the influence of cohort-related social capital on age period–specific death rates. This time our analysis included contextual, or country-level, variables. To summarize our findings very briefly, we replicated the results we obtained in the United States—that birth cohorts that had less social capital had higher rates of suicide. In addition, however, we found that this relationship was affected by contextual factors. The relationship was much smaller in societies that provided alternative means of social capital, primarily through programs that provided additional support to families and children.[4]

These results highlight ways to supplement, and perhaps replace, diminished levels of cohort-related social capital. Recall our hypothesized avenues by which diminished cohort-related social capital affects young people: (1) diminished financial resources, (2) less adult supervision and regulation, and (3) increased influence of peers. Programs in other countries that were tapped in the measures used in our analysis address each of these issues. For instance, monetary child allowances and

guaranteed medical care increase the financial resources available to families. Quality day care and after-school programs provide increased adult supervision and can counter the influence of peers. Of course, policy innovations would need to be adapted to U.S. cultural and economic values, such as individualism, self-reliance, and the importance of market forces (Owen 2003). I believe, however, that such policies can be developed and adopted. Longitudinal studies in the United States have demonstrated the power of employment and strong family ties, areas valued in our society, in changing the trajectory of delinquent or criminal careers by providing strong social bonds as well as more stable economic support (Horney, Osgood, and Marshall 1995; Sampson and Laub 1993; see also Western 2002).

In addition to having policies intended to replace social capital, upstream policies could also try to stem the loss of social capital in the first place. In a number of ways, policies that provide replacement sources of social capital may also affect family decisions and interactions. A major influence on the decision to marry, as well as marital stability, is economic well-being (Edin 2000; Manning and Smock 2002; White and Rogers 2000). Having greater access to the job market and well-paying employment may not only provide alternative sources of social capital for a generation that is currently in young adulthood. It can also enhance the probability that members of that generation will be able to establish stable families and thus increase social capital for subsequent birth cohorts.

Finally, we can have policies whose goal is to lower death rates among all members of society. An obvious policy would be more effective gun control, which a number of experts suggest could influence the extraordinarily high homicide rate in the United States (Prothrow-Stith and Weissman 1991; Zimring and Hawkins 1997). Given that firearms are responsible for almost two-thirds of all suicide deaths, gun control could also lower these rates (Goldsmith et al. 2002; U.S. Public Health Service 1999).[5]

Upstream approaches are important for at least two basic reasons. First, they attempt to address the structural sources of the problem of lethal violence rather than simply the symptoms. Second, because they simultaneously address the sources of increased rates of both youthful suicide and homicide, they may produce universalistic and unifying social policies. This, in my view, is very important. Lethal violence affects all in society, rich and poor, white and nonwhite, but the form that it takes downstream tends to differ for those in different economic circumstances. Whites and the middle class more often deal with self-inflicted violence; the poor and minorities more often are involved with violence from and toward others. Yet our research demonstrates that the upstream sources of changes in the age-based incidence of these two types of violence are the same.

Social policies that receive the most support, both in the United States and in other countries, tend to be those that are universalistic, such as Medicare and Social Security, rather than those that are means tested or focused on only one group, such as welfare and affirmative action programs. Upstream social policies regarding lethal violence would necessarily involve programs and approaches that are applied universally, and I suggest that these would not only be more effective but would also have more political support.

CAVEATS AND CONCERNS

In calling for greater involvement of sociologists in social policy formation, I have a number of concerns and caveats. Although I think that our discipline has a very real potential for promoting humane and effective social policies, there are a number of elements of our field that may work against such efforts.

First, for sociological work to have an impact on social policy, it must involve a multidisciplinary approach. This is important for developing adequate theory and research, but also for greater political acceptance. Policy recommendations are much more likely to be effective and reliable if they are based on research that can be supported from a variety of perspectives. In addition, policy recommendations are much more likely to be accepted in the political world if they are based on the work of a broad spectrum of scientists and if they deal with multiple levels of analysis. As I noted above, I believe that sociologists are well suited for taking the lead in such multidisciplinary approaches given the broad range and perspective of our discipline. At the same time, however, I worry that insular characteristics of our profession and interdisciplinary jealousies and rivalries can work against needed collaboration.

Second, it is important for us to take a nonpartisan approach (see also Bowman 2003). Again, this is important for political reasons. If our work becomes overly identified with one end of the political spectrum, our basic findings and their implications could be overshadowed and the chance that they would influence policy makers diminished. A nonpartisan approach is also important in that it may help us to consider a wider variety of policy initiatives. If we can get beyond our stereotypical views of liberal versus conservative, if we can think outside the box, I contend that we will be much more likely to find successful upstream policies. It is important for us to realize that people of all political persuasions, and of all backgrounds, deal with the types of issues that we study—whether they are lethal violence, family dynamics, racial-ethnic tension, or school quality. Thus our findings and results should be relevant to all citizens, and we should try not to alienate ourselves or our work from any broad segment of the population. Again, however, I worry that this might be very difficult for us as a profession to accomplish. We, as a group, have often been tied quite closely to liberal politics, and many of us are quite vehement in our views (see Light 2001:5). I believe that we have the ability and skills to be nonpartisan and the intellectual flexibility to look at a variety of perspectives, but I worry that we may be too immersed in earlier political traditions to pursue a neutral and even-handed approach.

Third, we must continue to stress the importance of strong social science. If our policy recommendations are to be effective, they must be based on findings that have been well replicated. We need to use the best methods we can, both qualitative and quantitative. We need to take off our intellectual blinders and explore the wide range of theoretical and methodological approaches that exist. For instance, we may need to increase the extent to which we use meta-analyses to examine quantitatively the cumulative nature of our findings (e.g., Lipsey and Wilson 2001; Raudenbush and Bryk 2002:205–27). We also need to become more involved in field experiments. Examples of experiments that have provided useful results

are those involving the Gautreux project in Chicago on the integration of housing (Rosenbaum and Popkin 1991), the studies of guaranteed annual incomes in the 1970s (Robins et al. 1980), and the work on police reactions to domestic violence in the 1980s (Sherman 1992). Only through field experiments can we adequately test the efficacy of different policy approaches. Unfortunately, we, as individuals, sometimes become overly fond of one methodological approach or another and are, as a discipline, somewhat reluctant to engage in experiments or conduct meta-analyses. If, however, we are to help to ensure that upstream policies are developed, we may need to broaden our methodological preferences and practices.[6]

Fourth, although many of us write about the policy implications of our work in books and articles, I worry that these individual efforts are insufficient. We must, if we are to have a larger impact, develop institutionalized ways of affecting public policy. As one of my policy colleagues pointed out to me, we sociologists, and other "pure" social scientists, tend to think that our job is over when we complete the discussion section of a paper and write a paragraph or two about policy implications. As he put it, we do not realize what "policy types see so clearly—that there's a critical third step, figuring out what to do. . . . Knowledge doesn't automatically lead to action" (Michael Hibbard, pers. comm. March, 2003). We have too often ignored this crucial step, and we need to develop systematic and collective ways to address it (for discussions of this step, see Berger and Neuhaus 1977, 1996; Fairweather and Davidson 1986:209–58; Lindblom 1990; Lindblom and Cohen 1979).[7]

CONCLUSION

My discussion has focused on lethal violence. However, it is important to note that many, if not most, areas of sociological inquiry have important upstream policy implications. For instance, in the sociology of education, a substantial body of work tells us how the ways in which schools are organized—including factors such as the integration of students by social class, the size of schools, the classroom-based grouping of children, and the types of norms that are encouraged—can influence student achievement and gaps between rich and poor (Stockard and Mayberry 1992). Work in the sociology of medicine points to the important influence of social inequality on the overall health of populations (e.g., Wilkinson 1996). Strongly replicated work in the area of race relations confirms the "contact hypothesis" and the very important role of integrated small-group settings in promoting stronger and more productive relationships between members of different racial-ethnic groups (e.g., Blalock 1967; Moskos and Butler 1996).

These studies have been methodologically rigorous and well replicated. Based on their results, we can, I contend, provide accurate social forecasts in many areas of social life. We can accurately predict students and schools that are most at risk of low achievement, communities and societies that are at risk of poor health, and work situations that are more or less likely to have problems regarding racial-ethnic relations. Even more important, these works point to upstream causes and policy solutions.

In 1968, a time of great urban unrest and racial-ethnic tensions and animosity, the sociologist Melvin Tumin wrote,

> A major cause of the enormous foment of hate, anger, and despair . . . has been the failure of the American government and public to respond to Negro [*sic*] needs in precisely the ways in which social science research since the 1940s, and even before, has indicated that these could and should be responded to, if we did not want to have what we have today by way of extraordinary inter-group conflict and hostility. . . . [I]t was all there for the knowing, and it was in large part, ignored. ([1968] 1969:242–43, 244)

Over the past thirty-five years we sociologists have learned a great deal and are probably much better at social forecasting than we were when Tumin wrote these words. I fear, however, that we have almost as little impact on social policy today as we did at that time or even in the 1930s and 1940s. I only hope that we can move to change this state of affairs. My hope for the future of sociology—and our society—is that we can move to a focus on the upstream sources of social problems and social policies and that sociologists can become more meaningfully involved in these discussions.

NOTES

1. Our data on suicide deaths come from Vital Statistics, which provides information from 1930 through 2000. In contrast, our data on homicide offenses, shown in Figure 1, come from the Uniform Crime Reports, which provide valid national data only from 1960 (see O'Brien and Stockard 2003; Stockard and O'Brien 2002b).

2. While only a small proportion of efforts directed to the prevention of violence among juveniles involve programs outside the criminal justice system, some of these appear to be very promising. Like suicide prevention programs, many of them focus on very high risk populations and have been applied in only limited settings. They are, however, often designed to increase social capital for those at risk (see Araki et al. 2003; Mendel 2000; Surgeon General 2001).

3. We had hoped to also examine variations in age-specific rates of homicide cross-culturally, but we concluded that the extremely low rates of homicide in these countries made the data too unreliable to examine.

4. We also found that the relationship was stronger in societies that had experienced rapid change in family-related factors.

5. It is important to note that in comparison to the United States, a number of countries, including Canada, have both more stringent gun controls and higher suicide rates (but lower homicide rates) at all ages. Thus, although gun control policies might lower the extraordinarily high U.S. homicide rates, I am less confident that they would have a long-term impact on suicide rates.

6. The Institution for Social and Policy Studies at Yale University has embarked on a program that explicitly encourages the development of field experiments in the social sciences (see http://www.yale.edu/isps/experimental).

7. In a recent article in the ASA newsletter, *Footnotes*, Herbert Gans (2000:8) called for the development of a role of "public sociologist[,] . . . a public intellectual who applies sociological ideas and findings to social . . . issues about which sociology . . . has something to say." I agree with Gans's suggestion that if more of us took such a role the impact of our discipline would increase. Yet while individual efforts are necessary, they are far from sufficient. In my view, the major danger in such an approach is that individuals might promote their own agendas rather than reflect the broad findings of the discipline as a whole. A more important goal than individuals becoming "media savvy" or "talk show experts" would be the development of institutionalized mechanisms of synthesizing strong research findings in a nonpartisan and multidisciplinary setting and then communicating these in an effective manner to policy makers (see Bowman 2003 for a description of one such attempt).

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