

**The Creation of Girls' Spaces:
Gender Identity Formation in an Urban Public School**

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Introduction

Identity, or how one views oneself with regard to values and characteristics, is an important factor influencing mental health. An individual's identity is formed, in part, by the messages received by significant others, including parents, teachers and peers. Societal beliefs about an individual's gender and ethnicity (among other reference points) also shape identity (Vasquez, 1994). By spending time in a high school, I sought to understand how adolescent girls make sense out of and build their gender identities, and how school, as an institution, plays a role in girls' gender-identity creation.

This ethnographic research project proposes to investigate complex landscape of female gender identity development in an urban public high school. Through observation, I examine how school culture, classroom dynamics, and in-school peer relationships contribute to gender identity formation among high school girls. To gain a deeper understanding of shared meanings of femininity in Hamilton High School¹ I address the following questions: How do teachers and students negotiate gender roles in a high school? How do organizational structures (in classrooms and in the school-at-large) contribute to gender dynamics in the high school? How do individual students or teachers cooperate with or subvert the dominant gender narrative(s) within their school environment? In short, how is femaleness constructed in the classrooms of a high school? My analysis focuses on the interplay between individual girls and the social institution of school. I discovered that girls' spaces (unique situations where girls' voices dominate) are created around sexuality, pregnancy, and childbirth, and are mediated by ethnicity.

¹ Names of schools and individuals have been changed.

Literature Review

Psychoanalytic Theories on Gender Development and Difference

Psychoanalytic perspectives have wielded enormous influence on our societal beliefs about maleness and femaleness. In classical psychoanalytic thinking, gender difference was ignored or reified. Though Freud's phallogocentric psychosexual theories assumed that girls grew like little men, at the same time Freud advanced an essentialist notion of gender. In Freud's thinking, women's gender identity was biologically determined. That is, because of a perceived lack of penis, little girls developed a female identity characterized by a girl's sense of inadequacy (Zilbach, 1995), (Shapiro, 1988). Freud theorized that both female and male children follow the same line of (masculine) line of development. For Freud, development of gender identity does not begin until boys and girls recognize genital differences. For the girl, this recognition is characterized by feeling of lack, propelling her to feel envious, inferior, and develop castration anxiety. She then identifies with the mother and desires the father, entering the oedipal phase. However, the girl soon transforms her wish for a penis into a desire for a baby (preferably one with a penis). While many identify maternal striving as an important component of female gender identity, for Freud the wish for a baby is secondary to the wish for a penis (Shapiro, 1988). How do Freud's theories inform our understanding of the identity of the girls at Hamilton, several of whom have babies?

Karen Horney challenged the Freudian conception of female sexual development in her critique of the castration complex. The female genitals are hidden, whereas a little boy can readily examine his genitals while he urinates. Horney points to scopophilia as the primary source of penis envy. She believes that boys satisfy their curiosity about their own bodies and move on to direct their attention to "external objects." A girl, however, "can arrive at no clear knowledge of her own person and therefore finds it far harder to become free of herself" (Horney, 1967). Furthermore, boys receive tacit approval to masturbate since they are already familiar with holding their penis to urinate, whereas

female masturbation carries a heavier taboo. The little girl, for Horney, comes to realize the precariousness of women's position when she sees her parents having sex and assumes that her mother has been injured. This idea of female vulnerability is given further weight when the girl sees her mother's menstrual blood (Horney, 1967).

Many of the traditional female analysts such as Karen Horney, Helene Deutch, Melanie Klein, and Clara Thompson ignored, altered, or discounted Freud's castration complex; however, they substantiated his concept of female masochism, "in which genital mutilation is internal, rather than external" (Lupton, 1993). Freud's biologically deterministic stance held that women were doomed to passive masochism, men to active sadism. Helene Deutch, who authored the most authoritative reference books on female sexuality in her day, echoed Freud's beliefs on female sexuality and advised women to make peace with their role as sufferers (Deutch, 1944). Menstruation, childbirth, and intercourse were the proofs that early psychoanalytic theorists held up as evidence of women's propensity to seek pleasure in pain. Notably, girls at Hamilton High School formed girls' spaces around some of the same experiences that traditional psychoanalytic thinkers deemed masochistic. Do Hamilton girls understand their own experiences in terms of masochism? Are there more useful ways of framing these experiences?

Karen Horney accepts the traditional psychoanalytic position, put forth by Freud and developed by Deutch, that women are masochistic. However, Horney splits with Freud in that she believes female masochism to be culturally constructed and bound. Horney emphasized the culturally-laden aspects of gender identity development, but it was Simone DeBeauvoir who first elucidated woman's status as "other" and argued for de-essentializing gender. Man is the subject, argues DeBeauvoir, while woman is the object of life's dramas. *Otherness* forms the basis for oppression. Ideas about the social construction of gender identity can be traced to DeBeauvoir's unlinking of biology and destiny. In DeBeauvoir's account, according to 18th Century scientific views, the womb is a passive holding cell for the man's contribution of life. DeBeauvoir challenged the Aristotelian belief in the passivity of women's contribution to conception. According to DeBeauvoir, biological facts alone do not explain woman's "otherness." She believes that

society maps certain associations and expectations onto these biological facts (DeBeauvoir, 1989).

Recent scholars argue that women *are* different from men, but that this difference does not imply deficiency (Shapiro, 1988), (Gilligan, 1982), (Chodorow, 1978), (Miller, 1976). Contemporary research and theory discredits Freud's psychosexual stages by positing a primary female identity, not secondary or inferior to male development (Shapiro, 1988), (Stoller, 1985), (Stoller, 1977), (Galenson, 1977). Contrary to Freud's oedipal stage, gender identity is established as early as 18 months in both males and females (Stoller, 1977), (Money, 1972). "A core sense of femininity is primarily based on parents' ascription of gender and can be established even in the absence of a vagina or in the presence of a Y chromosome. Thus, a primary female identity is distinct from awareness of the lack of a penis" (Shapiro, 1988). Social constructivism asserts that knowledge of our world "is not a simple reflection of what is there, but a set of social artifacts; a reflection of what we make is there" (Schwandt, 1997). Therefore, social constructivism allows us to view femininity and masculinity as "powerful fictions or ideas, 'imbued with fantasy and lived as fact'" (Thorne, 1993). Indeed, Stoller (1984) distinguishes between gender, which is a cultural or psychological construct, and sex (male or female), which has a biological basis. These concepts form the basis upon which we can examine gender identity formation in a public school.

Adolescent Development

Traditional psychoanalytic theorists grounded their ideas about gender identity in studies of infancy and early childhood, ignoring or minimizing the importance of the period of adolescence in gender identity formation. Recent theorists and researchers have reframed adolescence as a critical juncture in gender identity formation (Martin, 1996; Shapiro, 1988; Zilbach, 1995). Upon entering a high school, the researcher becomes a participant observer in adolescent culture. The developmental period of adolescence is a "modern invention" (Moran, 2000), (Irvine, 1994). G. Stanley Hall coined the term "adolescence" to describe the youth culture emerging in the United States at the turn of the century. The need to control adolescent sexual urges was the hallmark of defining adolescence for Hall

and the legacy of psychologists, sociologists, physicians, and politicians who are concerned with managing adolescents. "The history of professional attempts to regulate adolescent sexuality is as old as the category of adolescence itself..." (Irvine, 1994). Moran (2000) describes the social climate that allowed the concept of adolescence to reach fruition. As public schooling expanded, young people were increasingly age-segregated, enhancing distinctions from adults. The advent of industrialization created improvements in nutrition, and children began to reach puberty earlier. At the same time, the average age for marriage increased; young men spent more time in training to pursue careers in the newfound arenas of commerce and industry and delayed marriage. As the period between sexual maturation and marriage (i.e. legitimization of sexuality) increased, and Victorian youth were admonished to remain chaste. Thus, the concept of adolescence was constructed with the sole purpose of controlling and regulating adolescent sexuality (Moran, 2000).

In our present-day culture, adolescent sexuality remains "a social problem" (Irvine, 1994). Our culture decries adolescent sexuality, searing in the minds of young people the fears associated with it: STDs, loss of educational opportunities, and teenage pregnancy. The "escalating cultural panic" surrounding teenage pregnancy (evident in research agendas, popular media, etc.) serves to make adolescent females "the source of public anxiety and the target of social control (Irvine, 1994). However, the negative consequences of teenage pregnancy have mixed support (Irvine, 1994). Regardless of whether or not sex bears risks, our societal fears of adolescent female sexuality carry their own consequences for the psychological well-being of girls. When young women and men find themselves circumscribed into the narrow roles of passive victim and aggressive conqueror in sexual relationship, desire and pleasure are silenced. Adolescents who learn to relate in this strangulated manner grow into adults who are beset by relational problems.

Adolescents, particularly girls, receive conflicting cultural messages regarding their sexuality and their selves. "We demand that they (adolescents) 'just say no' to sex despite the ubiquitous message that it will transform their lives" (Irvine, 1994). National Surveys

indicate that the numbers of teenagers engaging in sexual intercourse have increased significantly since the 1970s (Irvine, 1994). The media barrage of sexualized teens sells sex as fun and important. However, schools socialize children through sex education classes to view sex as a dangerous game in which men are aggressors and women are victims (Fine, 1992). Given that schools communicate these ideas, how do individual children receive these messages and integrate them into their identities? Further research should address ways in which boys and girls themselves play roles in negotiating and creating their own gender and sexual identities.

What happens to girls at adolescence? Loss of sexual subjectivity, self-esteem, and voice

Whereas males are more often diagnosed with psychological problems in childhood, pathology is more prevalent for females in adolescence. Increased pathology begs us to question: What is it about being an adolescent female in our culture that is so risky? Brown and Gilligan (1992) suggest that girls suffer at puberty because they experience a relational crisis; girls trade in authentic selves for inauthentic relationships. In order to connect with others, they silence themselves. On the way to womanhood, therefore, girls lose their "voice" and experience blows to self-esteem (Brown, 1992).

Children are socialized to gender norms in childhood, but these norms become stricter at adolescence (Martin, 1996). At puberty, boys experience an enhanced sense of agency and are afforded more responsibility and freedom by adults, whereas girls experience increased adult control (Hill, 1985), (Eme, 1979). Stringent expectations that children play certain gender roles may contribute to increases in psychological distress. Girls' adolescent experiences may differ from boys based on adults' differential treatment of girls. For example, teachers may give more of their classroom attention to boys than girls, or parents may uphold a "double standard" for sons and daughters behavior.

What is the relationship between self-esteem and gender identity formation? At adolescence, girls suffer losses of confidence and self-esteem, especially in the area of school competence. Girls' lack of interest and diminished success in math and science has been linked with drops in self-esteem (AAUW, 1991). Although all adolescents

suffer identity confusion and blows to self-confidence at adolescence, girls experience more precipitous drops in self-esteem than boys. Additionally, having weathered adolescence, girls emerge with fewer expectations for themselves and significantly less confidence in their abilities than their male counterparts. Researchers investigating schools found that gender inequity pervades the classroom; girls and boys both report that teachers encourage boys to be assertive and that boys receive most of teachers' attention in the classroom (AAUW, 1991).

Ethnicity mediates the relationship between gender and self-esteem in adolescence. The AAUW study (1991) found that African-American girls retain overall self-esteem throughout adolescence, although they are less confident in their academic abilities. Meanwhile, adolescent Latinas' loss of self-esteem plummets at a greater rate than White or African American girls' does. More research is needed to investigate how ethnicity and gender interact to influence confidence in academic work and in the self. For example, we need to better understand African American girls' resilience and to explicate the forces that inhibit Latina girls from maintaining a positive self-image as they mature into young women. Although girls' loss of self-esteem and sexual agency has been documented through quantitative methods and interviews, more work must be done to understand the social climate of schools and the complex interplay of gender relations within this context (Orenstein, 1994).

Methodology

Ethnography seeks to both understand and explain the social world of others. To achieve understanding the researcher must get close to the phenomenon under study, participate in the world she wishes to research. Rather than view the relationship between researcher and researched as a source of contamination or bias, ethnography acknowledges the relationship between researcher and researcher and actively involves their respective subjectivities (Tolman & Brydon-Miller, 2001). Thus, rather than deny or repress biases, the ethnographer investigates them in order to understand and challenge them (Burawoy, 1991). Social science differs from the natural sciences in that the social scientist faces a hermeneutical challenge; she must filter and interpret data, which has itself been

constructed by the people and communities under study. The meaning derived from data is dependent on the context in which the data is created (Burawoy, 1991), and cannot be understood independent of this social context.

Participant observation as a method is particularly suited to researching the lived experience of adolescent girls. In order to understand how adolescent girls actively construct their own gender identities, that is, how they "do gender" (Thorne, 1993) it is necessary to get close and observe their day-to-day social world. Like Barrie Thorne, I believe that "social practices shape the transition" from childhood to adolescence over and above biological changes (Thorne, 1993). Examining adolescence from a constructivist framework, acknowledges that adolescence is a "'more' socially constructed moment of development than childhood" (Martin, 1996). Social forces interact in a complicated way with biological processes during adolescence. Therefore, observation of the social environment as it unfolds moment by moment is a powerful method for understanding girls grow into their gendered selves.

Research Setting and Participants

Hamilton High School is a small public school in a large city that provides an alternative curriculum and enhanced social services for adolescents who cannot succeed in other high school settings. The school accepts ninth graders whose parents want a small, safe school environment for their child. Guidance counselors also refer older adolescents who have not succeeded in other schools because of truancy, safety violations, or other reasons. The student population is comprised of 62% Hispanic students and 37% Black students. Teachers represent a mix of cultures, including Latino, White and Black. Eighty-one percent of the students are eligible for free lunch, indicating that many students live in poverty. Last year, 50% of 12th graders graduated, 29% were still enrolled as of the summer, and 22% of the senior class dropped out.

Students address teachers by their first names, and the school exudes a sense of safety and warmth. Teachers seem committed to working with undeserved populations and using alternative teaching methods, such as experiential learning. Students participate in

traditional classes, as well as classes such as Family Group, an enhanced homeroom with a focus on health and development, and Project Adventure, a physical education class dedicated to building social skills and developing trust and respect in relationships.

Methods

My methods included observation and informal discussion with students and teachers. I spent Tuesdays from 8:30 until 2:00 in the school building, observing in classrooms, in hallways, at assemblies, and in informal meetings between teachers and students.

Girls Spaces

Group relations theorists have noted that the whole or gestalt of a group of people is greater than the sum of its parts (Wells, 1985). Observation of groups provides a powerful lens for investigating gender identity formation. In trying to understand how adolescent girls understand their "femaleness," I observed girls *in groups* and identified girls' spaces - unique situations where girls' voices dominate. These girls' spaces emerged out of a confluence of factors, including teacher support and the stance of the school as an institution. However, the defining characteristic of girls' spaces at Hamilton is their grounding in discussions of sexuality, pregnancy, and childbirth - issues intimately linked to girls' bodily experiences. Girls' spaces occur in both mixed and same gender groups, they exude "hostile" or "safe" overtones, they spring up in "formal" classroom groupings as well as informal "hang-out" settings. In each of these situations, girls voices dominate as they work through feelings and experiences related to their bodies. These girls' spaces contrast with other "spaces" in the school, for example, in many classes boys' voices dominate academic discussions. Girls spaces provide a medium through which girls struggle to understand themselves as gendered individuals.

Wanda's room provides the setting for one particular girls' space at Hamilton. Young women - mostly Latina, some Black (African American as well as Caribbean) "hang out" in Wanda's room in the mornings before class, during lunch, and between classes. Wanda, a school social worker, plays the roles of den mother, counselor, teacher, and life coach. Her room entices students, stocked with tins of cookies and pretzels. Four leather

chairs provide the physical setting for a group. Wanda's room is cluttered with college materials; a bookshelf holds volumes like Changing Bodies, Changing Selves (a teen health book). Students often come under the pretense of gathering college application materials or information, but stay to chat.

The creation of girls' spaces is mediated by ethnicity. That is, ethnic distinctions seemed at least as important to the group members as gender distinctions. As mentioned above, while many girls suffer a loss of self-esteem at adolescence, Latina girls' self-esteem falls to a greater degree than White and Black girls' (AAUW, 1991). One of Wanda's aims is to improve the self-esteem of young Latina women, or at least to understand why it plunges at adolescence. To that end, Wanda created a "Latina Girls' Group," a safe space where ethnicity defined the purpose of the group at least as much as gender.

Wanda: This group is exclusively for Latina women. The theme of this group - help me out, Rachel - Well, I see Latina's not doing as well as others.

K: What do you mean - you mean we're not doing as well in school as the Black girls?

W: You speak up individually, but when you're in a group, well...who volunteered for student counsel this morning?

K: I don't know.

Wanda lists the names of girls who volunteered.

K: What about S.?

W: She's from Honduras - it's different.

K: I'll tell you why we don't talk - cause we know they won't listen to us.

Rachel: Who's they?

K: The Black girls. We had a lot of ideas about things we wanted to do.

Tension between "the Black girls" and "the Spanish girls" is palpable in some classes. In this conflict, race and gender work as self-defining characteristics in complex ways. In the conversation above, the Latina girls in Wanda's group frame themselves as competing academically with "the Black girls," *not* with boys of either race. More work must be

done to understand the complicated relationship between the girls' ethnic identities and their own understanding of their femaleness.

Wanda often tries to shift the conversation in the group to college planning, or even tries to spark a discussion about Latina girls' loss of self-esteem and voice. However, the girls in Wanda's room bring the conversation back to the topics that they are most interested in; the topics that form the foundation of the girls' space. Girls talk about their own experiences with pregnancy and childbirth. As a teacher, then, Wanda does not engender this discussion, but she encourages it by providing a safe environment in which girls can broach these topics. The following excerpt from my field notes occurred when several of the girls were looking at career planning information.

K: Midwifery - What's that? Oh! That's when you help someone to have a baby...That's cool. There was this student when I was having a baby. She stuck her finger in me to feel my cervix...I was like, 'that hurts!' Then she stuck two fingers in - I was about to kill her - My mom was screaming, 'Don't touch my baby!' Then they couldn't get the placenta out and she had to stick her whole hand up inside me! I felt like I gave birth to a whole other baby!

J: When I gave birth I was thinking about you and what you went through with the placenta. I was scared...but I just pushed and it came out.

K: The placenta's nasty.

Rachel: You know, in some cultures they eat the placenta.

There are squeals of disgust and laughter.

Wanda: Well, how do you think they make placenta shampoo?

Rachel: I guess there are nutrients in there.

K: Yeah, but that shit's nasty. Its your menstrual stuff...Its like sucking on a tampon! "Eeeehew!" more laughter. There is a shift with the laughter here. I feel I have joined the group.

In the above passage, K. shifts quickly from musing about career options to a dramatic story about the physical experience of childbirth. On one level, K.'s story is about her

attempted defense of the boundaries of her body; she recounts her lack of control as she experiences her body being invaded by medical professionals. Then the girls marvel at the placenta - a part of them that is *other* than them, a foreign, "nasty" element to be expelled. They are united by their wonder and revulsion at the "disgusting" things that their bodies produce.

The girls unite in the experience of childbirth - in relaying their experience and relating their experience to others. During another lunch period in Wanda's room...

M., a slight dark-skinned young woman, enters the room and the girls begin to question her about her new baby, as she has just returned to school after giving birth a month ago.

B: How is she? How big is she? Where is she now?

M. talks about the birth and the rest of the girls (except S. who has never had a baby) jump in and relate it to their own experience.

M: I woke up and I said, 'Its happening!' My mom said 'Wait' - but I'm like 'No way.' I went to the hospital and they said, 'No, you're only dilated 1 cm. You gotta go home and come back.' So I did and I came back and I said, 'If they send me home I'm taking one of these Doctor's with me!'...I was yelling at those doctors and nurses....Then they stuck their fingers in me and it hurt!

J: Yeah, I'm like, I'm in pain, why are you giving me more?

M: That's it for me. I'm never doing that again. Gimme some of those condoms!

M. talks about how she countered her mother's advice with her own experience, and attempted to fight the medical staff at the hospital, relying on her own self-awareness rather than others' expertise to guide her. However, like J., she describes the birth in somewhat dissociative terms, as something happening to her over which she has little power. M. struggles for control, but ultimately finds that she, like J., is in the hands of medical professionals who are manipulating her body in a painful way. Nevertheless, she reasserts her own control (and her sexuality) in a joking manner when she says, "Gimme some of those condoms!" During yet another lunch period, the discussion turned again to

childbirth, as two girls who had not given birth sought out K. to share her experience with them.

S: I saw my sister give birth.

C: Me too.

Rachel: What was that like?

C: Nasty! A thing that size can't come out of a hole that size! That's why I'm gonna adopt! Forget it, not for me.

S: And then they give birth again.

Rachel: You mean they decide to have another baby?

S: I meant the placenta, but, yeah, also they have other babies. K! (yells for K, who is in the hallway) K, c'mere! We're talking about birth.

K enters. She is a tiny girl with long honey colored hair pulled in a ponytail. She wears an enormous gold and silver nameplate that says "Antonio" on it.

S: Did it hurt?

K: Yeah!

S: Would you do it again?

K: Yeah!

S: Why?

K shrugs.

K: The worst part was I had to get stitches. Cause my baby came out with her hand up here near her head. I got ripped from back to front. I couldn't feel it when she was sewing me up. But I was so pissed cause she did a bad job sewing me up.

S: What happened?

K: It's all crooked...I'm like, 'damn!'

S: You shoulda sued!

K: I didn't want to have to take pictures of my private parts. Still, I'm so mad. I'm all crooked down there.

S. and C. wonder out loud about the limits of their bodies, and express fears about birth. Both K. and M. recounted their experiences with childbirth viewed it as a painful and

strange experience. They expressed anger at having to cede power over their bodies to medical professionals whom they blamed for inflicting pain, and in K's case, injury. K. feels damaged from the experience. Cultural values may be at play in the girls' distrust of the medical establishment. Though Latino culture is heterogeneous and multifaceted, one central value is familism (Vasquez, 1994). More work must be done to understand how the importance of family in Latino culture contributes to the girls' sense of themselves as mothers, and thereby to their gender identity.

Recounting these intimate discussions about experiences with childbirth, I noted in my field notes that "I feel I have joined the group." As a White woman studying Latina girls, our "femaleness" becomes the common ground that allows me to become a participant observer. Even though I have not experienced childbirth, I believe it was my femaleness, coupled by my willingness to talk about "nasty" topics like placenta, which allowed me further access to this girls' space.

Researchers and theorists have noted that lack of concrete knowledge about their bodies contributes to girl's loss of sexual self. The female genitals are hidden, whereas boys can readily examine their genitals while they urinate (Horney, 1967). Additionally, girls are denied accurate factual knowledge about their own bodies as adults do not accurately name girls' genitals (e.g. vulva, labia) (Lerner, 1976), (Ash, 1980). This lack of accurate information creates confusion and anxiety for girls (Martin, 1996). The hidden nature of female genitalia is furthered by taboos around masturbation, menstruation, and even exploring one's own genitals. However, several of the girls in this group have knowledge about their bodies gained through pregnancy, and revel in it as they dramatically recount the details of childbirth. Nevertheless, it is unclear how much factual knowledge they have concerning their bodies, and they dissociate from their bodies when describing childbirth. Girls often treat their bodies as "other;" "a separate actor or character from the self" (Martin, 1996). DeBeauvoir notes that "woman is the theater of a play that unfolds within her and in which she is not personally concerned." (DeBeauvoir, 1989). In this statement, DeBeauvoir describes the alienation that women feel from their bodies. The female body is an object, separate and distinct from the *person*, or *self*. Woman is not

only "other" as compared to men; she also feels her body is "other" in relation to her "self."

Researchers note that adolescent girls are aware of boys and men scrutinizing and demeaning their bodies. Girls internalize the male gaze and learn to objectify their own bodies, acting "on" their bodies rather than "in" them (Martin, 1996). The process of female objectification begins in childhood (Benjamin, 1988) and heightens in puberty and adolescence (Martin, 1996). Girls dissociate from their bodies, and act on their bodies through extreme preoccupation with physical appearance.

Simone DeBeauvoir noted that men are the subjects of life's dramas, while women are relegated to the status of object (DeBeauvoir, 1989). As objects, women cannot recognize their own desire and lack a sense of agency; sex becomes solely about male desire. This lack of sexual subjectivity or agency alienates women from their bodies and from their desires. Researchers have noted the negative consequences of women's lack of sexual subjectivity, including a loss of self-esteem (Martin, 1996), (Tolman, 1994), (Fine, 1992), (Benjamin, 1988), (Benjamin, 1986), (Lee, 1994).

Benjamin (1988) described how female sexual subjectivity is repressed in childhood, and Martin (1996) argues that adolescence is also a primary time for developing sexual subjectivity. During adolescence, the groundwork for sexual subjectivity is established. Females must develop a sense of "agency" in order to experience positive self-regard. Schools socialize girls to see themselves as potential victims of male sexual aggression (Fine, 1992), and as objects of male desire (Martin, 1996). Consequently, girls' own desires become repressed or denied. This lack of a sense of sexual agency, or subjectivity, is associated with deficits in overall self-esteem (Martin, 1996).

Through I described girls' spaces as created around sexuality, pregnancy, and childbirth, sexuality is broached obliquely in the school. Sex is rarely discussed directly, and I never saw anyone address girls' sexual desire. Hamilton High School as an institution participates in the creation of a culture that allows for girls spaces through discourse

around teenage pregnancy. Hamilton H.S. is one among approximately 50 high schools in the city that house a special program for pregnant and parenting teens. The program has two components: a child care center on site and a social worker who counsels and teaches teens about topics relevant to safe sex, pregnancy, childbirth, and childcare. The program is almost exclusively geared toward teenage mothers (as opposed to teen fathers). At Hamilton, the program's social worker Marie has an office next door to Wanda. Marie, a Columbian woman in her 40s, is involved in a project that offers dyadic therapy for teen moms and babies, aimed at encouraging parental-infant attachment. Regardless of whether or not young mothers at the school participate in Marie's programs or bring their children to childcare at the child care center on site, the presence of these programs signals to students that this school is a place where pregnancy and childcare are accepted. Thus, the culture of the school (at least in Wanda and Marie's corner of the building) allows for discussion of these topics; girls who are pregnant or parenting do not hide these parts of their lives, but readily bring them up for discussion.

There are areas in the school, however, where teenage pregnancy is not so readily embraced, and where teenage mothers are shamed. Celia teaches a "Health Education" class, which she privately confides to me involves "mostly sex ed." During the four classes I have observed, students have learned about pregnancy and completed a month-long research project on STDs. While the institutional factors allow for the allocation of resources to Marie's program for pregnant and parenting teen mothers, institutional factors also undermine the sexual education classes. Students worked out of a textbook that is 20 years old, and their teacher is untrained in health education. A thorough discussion of these institutional factors (which hinge on class and economics) is beyond the scope of this paper.

Celia: "Some women use abortion for birth control - That's disrespectful. In my opinion, it is murder. You have to make your own decision."

Girl at my table: "My cousin's wife had seven abortions!"

Celia refocuses the class on the textbook. On page 28 there is a picture of a very depressed looking African American woman holding a baby as she sits in a rocking chair. Bottles and dirty dishes are strewn all around her.

Celia: "She looks ragged."

A student continues reading aloud from the textbook. The passage informs students that babies born to young mothers can be sick, deformed, and have a low IQ.

Celia interrupts the reading to say: "We should do a study with the students in our school who are not doing well and see if these kids were born with a low IQ because their parents were not yet developed when they had them."

G (student at my table): "That's not true of my baby! My baby's smart."

In Celia's health education class, boys and girls learn receive a frightening and potentially confusing message about sex and pregnancy. Sex is defined exclusively in terms of risk, danger, and exploitation of *females*. Abortion is "murder," in the teacher's opinion, leaving pregnant *girls* with diminished options and hope. The message, delivered to the girls in the class, is: Avoid sex at all costs. If you do get pregnant, you have the option of facing the risks of pregnancy...

Celia: "What are the physical consequences of birth?"

Various girls: "Stretch marks... getting fat...being stressed out."

Celia: "And what are the emotional consequences? You have no social life."

Or, you have the option of ending your pregnancy, which the teacher deems "murder." The class discussion frames sex as a distinctively *female* problem. Although the culture of this classroom includes aspects of fear, intimidation, and negative messages about bodies and desires, this classroom *is* a girls' space. Students learn that these topics are *female* topics. Framed as a disease or sin, sex and pregnancy are discussed as female dilemma.

Celia's class is an example of a girls' space that is created, in part, by silencing boys. Boys are effectively rendered irrelevant and girls' voices dominate in Celia's health class.

Upon visually scanning the Celia's 5th period classroom, I discovered that students self-segregated by gender; the boys sat together at one table and the girls at another, with few exceptions. Throughout the class, students received an implicit message from the teacher as well as the textbook that this course in sexuality is really a course in female sexuality, or, rather, the consequences of female sexuality. For example, the class read a section of the textbook outlining the dangers of teenage pregnancy. At the end of the chapter, they read a list of bullet points summing up the responsibilities that teenage mothers face. One of the bullet points noted that teenage fathers also share in responsibilities.

Celia: "Is that true?"

Girls yell: "No!!!"

Celia: "Do they get up in the middle of the night to change the Pampers? They should, but they don't."

Though Celia told the class that boys "should" change diapers, she effectively communicated that it is normative for teenage boys (and perhaps all men) to remain uninvolved. There was also a sense in which she shamed the boys, and cut them out of class dialogue, uniting with the female students in "male bashing." For example, Celia told the class, "I think more girls are having more sex than boys. Boys are more passive and slow." Girls frequently insulted the boys in the class, saying things like, "Those boys are immature!" Celia reinforces the concept of boys being less mature than girls by saying, when the whole class is talking, "Excuse me little boys!" By infantilizing the boys in the class and deeming their contribution to sexuality and childrearing unimportant, Celia and the girls created a sort of "no boys allowed" clubhouse in the classroom. Thus, a girls' space formed in a mixed gender classroom.

Also of note is how individual students counter or subvert the teacher's messages. G., a dark-skinned young woman with long braided hair, speaks out from her own experience, "That's not true of my baby! My baby's smart." Additionally, G. actively participated in this particular class by reading aloud for much of the class period. On one level, by making her presence and her life experience known, she invites the class to consider that

she is a real person (as opposed to the stereotyped picture in the textbook) who has experience with the topic of study. On another level, she actively challenges one of the dominant narratives of this classroom - that pregnancy is debilitating and shameful - by asserting that her baby is not like those described in the text.

The "hidden curriculum" of Celia's class includes a message about female vulnerability to male sexual aggression that ironically sows the seeds for a unique girls' space to grow. My findings about the hidden curriculum of Celia's classroom are in concert with what other researchers have found. Through sexual education classes, schools socialize girls to see themselves as potential victims of male sexual aggression (Fine, 1992), and as objects of male desire (Martin, 1996). Consequently, girls' own desires become repressed or denied. This lack of a sense of sexual agency, or subjectivity, is associated with deficits in overall self-esteem (Martin, 1996). A common cultural assumption is that whereas adolescent boys want sex, adolescent girls want relationships. Within this cultural narrative, there is no room to discuss girl's own feelings of desire (Tolman, 1994). Society's efforts to protect girls from sexually transmitted diseases and unwanted pregnancy "have obscured even the possibility that girls experience and must deal with their own sexual desire" (Tolman, 1994). Sexual education classes such as Celia's uphold this cultural script that denies female desire.

Conclusion

Stephen Jay Gould identifies four classic errors of social science: reductionism, reification, dichotomization, and hierarchy (Gould, 1996). Social scientific study of gender has been plagued by all of these errors. The idea of gender as individual difference is often "suppressed" or "exaggerated" in psychological theory and research (Rabinowitz, 2001). Where researchers look for sex differences, they find them, often concluding that these differences are innate and immutable. Thorne finds that a common narrative describing boys and girls living in separate worlds exaggerates gender differences and dichotomizes an elaborate range of children's behavior. Gender roles among children are, in fact, fluid and complex; children's individual differences are greater than differences between gender groups (Thorne, 1993). Differences assumed to

be gender-based are sometimes better explained by contextual factors (Rabinowitz, 2001). Reductionism holds a seductive allure simplifying an often complex and messy field; however context and culture cannot be neatly compartmentalized. Rather than view gender as a static variable, we can resist the temptation to reduce, reify, and dichotomize; we can investigate how adolescent girls actively construct their own gender identities, that is, how they "do gender" (Thorne, 1993). Thereby, gender is an ongoing dialogue between individual and context.

Within this dialogue, girls' spaces develop when teachers use their power to help create them, and when institutional factors support them. I found that some girls' spaces are "safe" environments, where girls feel free to talk openly without being condemned by adults or peers, where girls discuss topics they feel a sense of mastery over. Yet, even in the safe space of Wanda's office, sexuality is a taboo topic that teachers and students refer to obliquely, and only in reference to pregnancy. Some girls' spaces feel hostile; here girls' desires are pushed out to create an environment of intimidation and fear about sexuality, defined as a "female problem." However, even in the hostile girls' space, individual girls spoke out about their unique experiences, countering the dominant culture of the classroom. The defining factor of girls' spaces was thematic, focused on bodily experience. The common denominator between "safe" girls' spaces and "hostile" girls' spaces is that in both the space is created through a focus on sexuality, pregnancy, and childbirth. Girls wrestle with the definition of their femaleness neither in the academic arena, nor around fashion, school clubs, or sports. The girls' spaces I observed flourish from discussions about girls' bodies.

References

- AAUW. (1991). Shortchanging Girls, Shortchanging America: A Call to Action. Washington, DC: American Association of University Women.
- Ash, M. (1980). The misnamed female sex organ. In M. Kirkpatrick (Ed.), Women's Sexual Development . New York: Plenum Press.
- Benjamin, J. (1986). A desire of one's own: psychoanalytic feminism and intersubjective space. In T. de Laurentis (Ed.), Feminist Studies/Critical Studies . Bloomington: Indiana University Press.
- Benjamin, J. (1988). The Bonds of Love: Psychoanalysis, Feminism, and the Problem of Domination. New York: Pantheon Books.
- Brown, L. M., and Gilligan, Carol. (1992). Meeting at the Crossroads. New York: Ballantine Books.
- Chodorow, N. (1978). The Reproduction of Mothering: Psychoanalysis and the Sociology of Gender. Berkeley: University of California Press.
- DeBeauvoir, S. (1989). The Second Sex (Parshley, H. M., Trans.). New York: Vintage Books.
- Deutch, H. (1944). The Psychology of Women: A Psychoanalytic Interpretation. New York: Grune and Stratton.
- Eme, R. F. (1979). Sex differences in childhood pathology: a review. Psychological Bulletin, 86, 574-595.
- Fine, M. (1992). Sexuality, schooling, and adolescent females: the missing discourse of desire, Disruptive Voices: The Possibilities (pp. 31-60). Ann Arbor: The University of Michigan Press.
- Galenson, E. R., H. (1977). Some suggested revisions concerning early female development. In H. Blum (Ed.), Female Psychology . New York: International University Press.
- Gilligan, C. (1982). In a Different Voice. Cambridge, MA: Harvard University Press.
- Gould, S. J. (1996). The Mismeasure of Man. New York: W.W. Norton & Company.

- Hill, J. P., Holmbeck, G., Marlow, L., Green, T., & Lynch, M.E. (1985). Menarchal status and parent-child relations in families of seventh grade girls. Journal of Youth and Adolescence, 14(4), 301-316.
- Horney, K. (1967). Feminine Psychology. New York: W.W. Norton & Company.
- Irvine, J. M. (1994). Cultural Differences and Adolescent Sexualities. In J. M. Irvine (Ed.), Sexual Cultures and the Construction of Adolescent Identities . Philadelphia: Temple University Press.
- Lee, J. (1994). Menarche and the (hetero)sexualization of the female body. Gender and Society, 8(3), 343-362.
- Lerner, H. E. (1976). Parental mislabeling of female genitals as a determinant of penis envy and learnign inhibitions in women. Journal of the American Psychoanalytic Association, 24, 269-284.
- Lupton, M. J. (1993). Menstruation and Psychoanalysis. Urbana: Univesity of Illinois Press.
- Martin, K. A. (1996). Puberty, Sexuality and the Self: Boys and Girls at Adolescence. New York and London: Routledge.
- Miller, J. B. (1976). Toward a New Psychology of Women. Boston: Beacon Press.
- Money, J. E., A. (1972). Man and Woman, Boy and Girl. Baltimore: Johns Hopkins University Press.
- Moran, J. P. (2000). Teaching Sex: The Shaping of Adolescence in the 20th Century. Cambridge, MA: Harvard University Press.
- Orenstein, P. (1994). SchoolGirls. New York: Anchor Books.
- Rabinowitz, V. C. D. M. (2001). Choices and consequences: methodological issues in the study of gender. In R. K. Unger (Ed.), Handbook of Psychology of Women and Gender . New York: John Wiley & Sons.
- Schwandt, T. A. (1997). Qualitative Inquiry: A dictionary of terms. Thousand Oaks: SAGE Publications.
- Shapiro, S. A. (1988). Menarche and Menstruation: Psychoanalytic Implications. In J. Offerman-Zuckerberg (Ed.), Critical Psychophysical Passages in the Life of a Woman (pp. 69-91). New York and London: Plenum Medical Book Company.

Stoller, R. J. (1977). Primary femininity. In H. Blum (Ed.), Female Psychology . New York: International Universities Press.

Stoller, R. J. (1985). Presentations of Gender. New Haven: Yale University Press.

Thorne, B. (1993). Gender Play. New Brunswick, NJ: Rutgers University Press.

Tolman, D. L. (1994). Daring to desire: culture and the bodies of adolescent girls. In J. M. Irvine (Ed.), Sexual Cultures and the Construction of Adolescent Identities (pp. 285-309). Philadelphia: Temple University Press.

Vasquez, M. J. T. (1994). Latinas. In L. Comas-Diaz & B. Greene (Eds.), Women of Color: Integrating ethnic and gender identities in psychotherapy . New York: The Guilford Press.

Wells, L. J. (1985). The group-as-a-whole perspective and its theoretical roots. In A. D. Coleman & M. H. Geller (Eds.), Group Relations Reader II (Vol. II,). Jupiter, FL: A.K. Rice Institute.

Zilbach, J. J. N., M.T. (1995). Toward a separate line of female development: on adolescence. In J. F. T. Gurewich, Michael (Ed.), The Subject and the Self: Lacan and Psychoanalysis . Northvale, New Jersey and London: Jason Aronson, Inc.