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The Experience of Loss of Voice in Adolescent Girls: An Existential-Phenomenological Study

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THE EXPERIENCE OF LOSS OF VOICE IN ADOLESCENT GIRLS:
AN EXISTENTIAL-PHENOMENOLOGICAL STUDY

by

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A thesis submitted in partial fulfillment of the requirements for the degree of
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The Experience of Loss of Voice in Adolescent Girls: An Existential-Phenomenological Study

Deborah Cihonski

ABSTRACT

The purpose of this study was to examine the meaning of the Loss of Voice experience in adolescent girls using an existential-phenomenological interview approach. An open-ended interview was conducted and participants were asked to “Please think of a specific time when you had something important to say, but did not say it. In as much detail as possible, describe that experience.” Each interview was tape-recorded, transcribed by the investigator, and then independently thematized (Jones, 1984) by the author and a doctoral colleague trained in Jones’ (1984) analysis method. Interrater reliability of the themes reached 96% agreement for the overall sample. Individual transcription reliabilities ranged between 85-98%. Thematic analysis revealed six superordinate themes and four subthemes. The superordinate themes were Difficult Position, Feeling, Might Explode, Not Worth It, Who Am I?, and Nevermind. The subthemes So Much To Lose and Strong were part of superordinate theme Difficult Position. The subthemes Emotion and Physical were part of the superordinate theme Feeling. Analysis of these themes in
their totality suggested a complex meaning structure of co-researchers Loss of Voice experiences. This research supports and expands the current literature on Loss of Voice by providing a more in-depth study of the meaning contained in a Loss of Voice experience. Directions for future research efforts, intervention, and prevention education are discussed.
Chapter I.

Introduction

“Eleven-year-olds cannot be bought,” said Brown and Gilligan (1992), “They are articulate, resourceful and know their own minds.” But age eleven seems to be the last year that many girls are in charge of their feelings and voice. As girls move into adolescence, their relationships often become characterized by disassociation and disconnection from themselves and others (Brown & Gilligan, 1992). As these girls move into womanhood, they often do not remember, tend to forget, or even cover up what they experienced and knew as girls.

Contradictory Messages and Loss of Voice

Adolescent girls receive contradictory expectations from different aspects of their lives: parents, teachers, peers, the media, and themselves. “They are to be sexy and flirtatious but at the same time remain ‘good girls’. They are to fend off aggressive male attention while simultaneously meeting teachers’ expectations of nonaggressive behavior. Females are to put domestic life first at the same time that they prepare for financial independence” (AAUW, 1996, p.2). Girls struggle with these conflicting messages, trying to figure out who to
please in their everyday lives (Brown & Gilligan, 1992). While many girls, especially those of lower socio-economic status, have adult responsibilities such as cleaning, cooking, and caring for younger children, they are discouraged from speaking up at school and claiming this same type of authority (Leadbetter & Way, 1996).

During adolescence, as girls mature physically, they become suspended in a sort of limbo, caught between childhood and womanhood. “Girls become looked at, talked about and judged against standards of perfection and ideals of relationship” (Brown & Gilligan, 1992, p. 164). Rosenbaum (1993) asked girls what they would “magically” change about themselves if they could. Most teenage girls responded that they wanted to “lose weight and keep it off, [have] blonder hair and bluer eyes, and a perfect figure...” all drawing the girl closer to our society’s stereotypes of ideal female beauty as portrayed by Miss America and the models in women’s magazines which the girls frequently consulted for guidance (p. 71).

As a part of this struggle with conflicting messages about feminine behavior and appearance, many girls stop stating their true and honest feelings and emotions. They give up this authentic voice in favor of an acceptable voice that is proper, pleasing, quiet, and nice; a voice that lacks strong opinions or true thoughts and feelings. When girls give up their voices -- when they patrol their own feelings and
responses so people will like or approve of them -- girls remove their true selves from their relationships. Girls enter into caricatures of what they have been taught of how to behave in that particular relationship. As they please others, they adopt a submissive or false female role that has been perpetuated by popular culture and schooling, teaching girls that women should not be too assertive, too loud, or too domineering (Mazarella & Pecora, 1999). Girls are often passive in their relationships because “speaking up can be dangerous and disruptive. Girls recognize all too well the potential loss of relationship if they do say what they feel and think too forcefully or too directly” (Brown & Gilligan, p.164).

As a result of the women’s movement, adolescent female problems such as body image dissatisfaction, sexual harassment, and date rape have been attended to recently in academic publications and the popular media. Unlike these issues, Loss of Voice has rarely been studied or, in many cases, even labeled as problematic.

*School and Society: Girls’ Choices and Opportunities*

By conforming to stereotyped acceptable female behaviors, girls are often limited in their choices and opportunities. Liedel (1992) said that, “By stereotyping women’s roles, popular culture plays a role in shortchanging girls by limiting their horizons and expectation. Unintentionally, schools sometimes follow suit, depriving girls of
classroom attention, ignoring the value of cooperative learning, and presenting texts and lessons in which female role models are conspicuously absent” (p. X). Adolescent girls may have aspirations of being involved in a typically “male-oriented” career, yet they often are denied guidance in support of these pursuits from their school’s “hidden curriculum” (Sadker, Sadker, Fox, & Salata, 1993).

Schools often, even if unintentionally, set lower expectations for girls (Chapman, 1997) and further silence them while perpetuating gender role stereotypes in many ways. For example, girls are often not called on in the classroom while boys speak out (Sadker & Sadker, 1985), women rarely are portrayed as famous scientists (Potter & Rosser, 1992) or musicians (Koza, 1994), or seen in textbooks in general (Corfield, 1999; Mann, 1994; Sadker et al., 1994). Further, girls, as compared to boys, are given less constructive feedback for classroom comments (Sadker & Sadker, 1984) and receive lower expectations (Stein, 2000), none of which will help girls excel in school.

Research documents that adolescent females, undergoing pubertal change, are most vulnerable to the loss of voice phenomenon (Brown & Gilligan, 1992; Orenstein, 1994; Pipher, 1994). While this age group has been investigated frequently, often using quantitative approaches, the nature and essence of adolescent girls’ loss of voice
experience remains largely unknown. This study will attempt to remedy this gap in the knowledge base by asking girls who have had the experience of loss of voice to describe it in their own words.

The Study of Loss of Voice

Loss of Voice can be described as an experience when a person has something she or he feels is important to say but does not say it. Often this refusal to speak one’s mind is linked to feelings of inadequacy, fear of rejection, or fear of humiliation (Brown & Gilligan, 1992; Orenstein, 1994; Pipher, 1994). The loss of voice has been studied using both quantitative and qualitative methods.

Those studies using quantitative methods such as surveys allow researchers to examine many factors related to loss of voice, such as depression, self-esteem, and masculine/feminine gender role beliefs (Smolak & Munstertieger, 2002). Such studies fail, however, to allow participants to explore and discuss freely their Loss of Voice experience by describing its accompanying emotions, feelings, and cognitions.

Efforts to understand the loss of voice experience using qualitative methods such as interviews are presently limited by a number of factors. These include: (1) the descriptive data about the loss of voice are often brief and secondary to the primary focus of the study, (2) the interviews are structured in such a way that participants
may not be free to articulate their experiences, outside of a prescribed set of questions, or (3) the study focused on factors that may “cause” a loss of voice rather than focusing on the nature of the experience itself.

While these research data are valuable in providing information about the loss of voice experience, they fail to tell us about the meaning of loss of voice for adolescent girls. It is known that loss of voice is prevalent in adolescent females, but little is really known about the specific cognitions and emotions that make up this lived experience. Specifically, what is the essence of the Loss of Voice experience? To examine this more fully, this investigator selected a method in which a rich description of the experience could be captured.

**Need for Existential-Phenomenological Approach**

As mentioned previously, the thoughts and emotions of adolescent girls experiencing a Loss of Voice are poorly understood. The research herein provides insight into the nature and essential meaning of the loss of voice experience.

The Existential-Phenomenological method allowed for the extraction of emotional information (i.e., from the words of the study participants, also known as co-researchers) from within the individual’s “lived experience” (Valle, King, & Halling, 1989) and required the
researcher to move beyond an objective interpretation of the data (Holstein & Gubrium, 1994). Further, by studying the data within the framework of the lived experience, or contextualizing, the researcher was better able to understand the meaning of the experience itself rather than relying on conjecture.

In summary, this research explores the emotions, thoughts, and feelings of adolescent girls’ Loss of Voice using the existential-phenomenological method. Through the use of this method, a clearer picture of the experience of loss of voice, within the context of our present culture, was obtained.

Purpose and Description of Study

The purpose of this study is to describe the experience of Loss of Voice in adolescent girls. To do this, co-researchers were asked, “Please think of a specific time when you had something important to say, but did not say it. In as much detail as possible, describe that experience.” Analysis of the tape-recorded answers yielded data that expanded the understanding of Loss of Voice experienced by many adolescent girls, filling a gap deemed worthy of study by many researchers (e.g., Brown & Gilligan, 1992; Pipher, 1994; Orenstein, 1994). Further, possible directions for intervention (i.e., linking the co-researchers’ words to suggestions for educational reform and self-
awareness training) emerged, suggesting new research avenues and relevant implications for education.

*Research Question*

What is the experience of loss of voice?

*Key Term*

*Co-researcher.* The title given to each of the girls, aged 12-16 years, participating in this study.
Chapter II.

Review of the Literature

This review of the literature is divided into three sections. The first section, Voice and Its Loss, examines the research that defines the concept of “voice”, explores societal definitions of the “perfect” girl, and discusses methods used by adults, peers, and society to silence girls. Also discussed is the literature on different roles adolescent girls fulfill in relationships with adults and peers. Section Two, Costs of the Loss of Voice, reviews the literature on the personal costs to girls and to society when adolescents, knowingly or unknowingly, give up their voice. Further, this section explores studies on girls’ thoughts and feelings about the factors that led to their loss of voice and the impact of this loss on their lives and the lives of others. The final section, Study of Loss of Voice -- Research Methods and Results, reviews methods used in past studies on the loss of voice, as well as presents a description of, and justification for, the use of the Existential Phenomenological approach in this study examining the phenomenon of loss of voice.
Voice and Its Loss

Definition of voice. Rogers (1993), in a study exploring voice and courage in the lives of girls and women, refers to the “ordinary courage” of adolescent girls as their ability to speak authentically, “to speak one’s mind by telling all one’s heart”. Most pre-adolescent girls show a strong sense of self and an ability to know and voice their thoughts and feelings (Taylor, Gilligan, & Sullivan, 1995, p. 23). The Harvard Project on Women's Psychology and Girls' Development investigated this authentic voice of girls and referred to it as the “resistant voice” or the voice that expresses “honest thoughts and feelings” (Brown & Gilligan, 1992).

More than one voice. The lives of adolescent girls are characterized by the existence of many different voices. Gilligan (1982, 1986, 1987) and her colleagues (Gilligan & Attanucci, 1988; Gilligan, Brown, & Rogers, 1990; Gilligan, Ward, & Taylor, 1989) have studied these multiple voices within girls and stated that most girls speak in at least two different voices. Further, girls switch between voices in their interactions with others (Brown, 1989; Johnston, 1989).

Voices identified in the literature include the aforementioned authentic voice, that expresses a strong inner voice, pursues happiness, their goals, hopes and dreams. Once adolescence is in full force, this inner, authentic voice is rarely shared with anyone, except
for a few people whom girls trust. Outside of these close and trusting interactions, girls use an “acceptable” voice – one that expresses what they assume others expect them to think and feel (Gilligan, Lyons, & Hanmer, 1990). This acceptable voice of girls is used to convey the thoughts, desires, beliefs, feelings, attitudes, and behaviors believed by girls to conform to the values and expectations of their culture and of significant people in their lives. This acceptable voice itself is multivocal, tailored for interactions with different people. For example, with boys, girls are likely to use a proper voice without elements that will identify them as overly knowledgeable, opinionated, or sexually active – without appearing prudish. Girls have a different acceptable voice with teachers, other adults, or people in positions of power.

In the classroom, boys are typically given more time to answer questions than girls are and often receive more attention and feedback from teachers (e.g., AAUW, 1999). Further, research has shown that school responses play a crucial role in recasting potentially “unfeminine” girls’ behavior such as intellectual aggressiveness into stereotypically feminine and encouraged behaviors (AAUW, 1999, p.27). Girls in traditional learning environments will often be quiet rather than risk answering incorrectly or being made fun of or belittled for answering too well in front of peers. Individual researchers and
groups such as those in the Harvard Project have asked girls to speculate on why they rarely talk in school or why they will not share their true thoughts and feelings with others. As much as silence can be a barrier to success, many girls view their silence as an advantage; if they do not understand school work or have unacceptable feelings, no one will know, and they are spared negative judgments by others. Girls often retreat to silence in school, and, when they do speak, their voices frequently lack confidence and assertiveness. As one study reported, “Fitting in often involves playing dumb, hiding their intelligence, and being quiet” (AAUW, 1999, p. 27).

Brown and Gilligan (1992) tracked the progress of girls from first through fourth grade. Then fifth grade, seventh grade, and tenth grade. They documented the gradual loss of girls’ sense of self as they approached adolescence, a time when traditional expectations and feminine behaviors are emphasized. These researchers found that, at this time, most girls began to switch from an authentic voice to an acceptable, or “perfect girl/nice girl” voice. As girls got older, they increasingly expressed the acceptable voice (Brown & Gilligan, 1992).

Pipher (1994) has argued that with puberty comes cultural pressure to split into more than one “self” (p.38). This pressure comes from places such as television, magazines, schools, movies, and peers. The message is that, if girls are true to themselves, they will
rejected by their peers and by society. Most girls choose to be accepted socially and, as a result, split into two or more selves, one that is authentic and others that are culturally scripted. By adopting a false self, girls fail to accept their thoughts and feelings as their own. Only by dissociating and sending their voices underground, by failing to own and acknowledge inner voices of confusion, hurt, and protest, can girls cope with and process the distortions surrounding them. The disconnections from the self are at the same time both adaptive and psychologically wounding. Because self-esteem is based on acceptance of the self, many girls suffer enormous losses in esteem and confidence through disowning themselves (Pipher, 1994, p.38).

*Adolescent girls and the loss of ordinary courage. *Adolescence is a time of dramatic physical development, a trigger for adults and peers to begin seriously attending to traditional gender roles. Brumberg (1997), in a study about the development of adolescent body image, stated that adolescence is often seen as a time of crisis for girls (1997, xxii). Brown and Gilligan (1992) claimed that one result of this crisis is that this ordinary courage, this resistant voice of girls, often goes underground. They found that during the teenage years girls stop stating their opinions or expressing their true beliefs, desires, feelings, and attitudes. The silencing of the self and loss of authentic voice have been recognized as a pervasive problem among adolescent girls
in Western culture (e.g., Spinazzola, 1999). The effects of this loss are far-reaching, often extending into adulthood (Stern, 1990). For example, the loss of authentic voice has been linked with such things as weak identity development, depression, negative body image, and lower global self-esteem (Hart & Thompson, 1996). Further, it has been hypothesized that this loss of voice contributes to other problems such as teen pregnancy and school failure (Smolak & Munstertieger, 2002). Clearly, it is a phenomenon worthy of study.

The ideal girl. Orenstein (1994) interviewed approximately 25 adolescent girls, both individually and in groups, as well as their parents and teachers, to collect their thoughts on issues affecting adolescent girls in school. Her interviewees came from two separate schools in different areas of the same town. The two schools were markedly different in the socio-economic and minority status of attending students. In Orenstein’s (1994) interviews, she found among her sample a "time-honored notion of the good girl: the girl who is nice before she is anything else – before she is vigorous, bright, even before she is honest" (p. 35). She goes on to define European femininity as grounded in delicacy, innocence, and an idealized helplessness (p. 159). The "ideal" girl is "calm, controlled, quiet," and "never cause(s) a ruckus (Walters, 1988). Brown and Gilligan (1990) talked about the “perfect girl”: “the girl who has no bad thoughts or
feelings, the kind of person everyone wants to be with... who speaks quietly, calmly, who is always nice and kind and never mean or bossy.” In school, girls earn praise for their exemplary passivity, getting reinforced for behaviors that become obstacles to later success (Orenstein, 1994, p.36)

Mary Pipher (1994) analyzed interviews with 13 adolescent girls and concluded that girls discover that it is impossible to be both feminine and adult. Interestingly enough, these results fit the classic findings of Broverman (1970). In the latter study, people were asked to check off characteristics of healthy adults, healthy men, and healthy women. Healthy women were viewed as passive, illogical, and dependent while both healthy adults and healthy men were viewed as active, independent, and logical (p.39). Pipher’s interviews, conducted nearly 22 years later, showed that girls still seemed to buy into this view of typical, and therefore acceptable, female behavior. Pipher went on to contend that, while the rules for female behavior are confusing to girls, the punishment for breaking them is seen by girls to be nonetheless harsh. Girls who speak their minds are labeled as bitches by peers and some adults and unattractive girls are scorned by all (p.39).

An enormous body of literature exists exploring adolescent girls’ body image development. It has been well documented that the
Western definition for physical attractiveness in females favors excessive, and often unhealthy, thinness (Gil-Kashiwabara, 2002). Fouts and Burggraf (2000) argued that a combination of thinness modeling and vicarious punishment for being overweight contribute to the internalization of gender stereotypes of weight in girls and women. In a media study examining body weight, negative comments, and audience reactions, Fouts and Burggraf (2000) showed that underweight females were overrepresented in television sitcoms. Further, these sitcoms presented men making negative comments about heavier women’s bodies, reinforced by audience laughter.

Women also are presented differently than men in the media and are often sexualized, portraying an unrealistic and impossible-to-obtain body image. Crawford and Unger (2000) reported that female television characters are usually younger than male characters by an average of ten years. Further, Crawford and Unger (2000) stated that women in 73% of all magazine ads were found to be decorative and sexualized while the number of women shown partially clad or nude has risen in recent years. According to a study by Kong (1997) on the portrayal of women in the media, 40% of the women in magazine ads are shown touching or caressing themselves. In music videos, women engaged in significantly more sexual and subservient behavior than men (Sommers-Flanagan, Sommers-Flanagan, & Davis, 1993).
Even girls’ toys present unrealistic body images and often encourage premature sexualization. The Barbie Doll has been said to give children a warped perception of beauty and attractiveness (Assunta & Jallah, 1995). The probability that a human female would have the same proportions as Barbie are about 1 in 100,000 while the odds of a man being built like Ken are 1 in 50 (Norton, Olds, Olive, & Dank, 1996).

In summary, evidence has shown that girls receive an unclear and impossible-to-achieve image of the ideal female through the media, their peers, adults, and society. Trying to live up to a vague and unattainable standard -- one that tells girls to be smart but not too smart, painfully thin yet voluptuous, sexy but pristine -- puts girls at risk for a wide variety of social and psychological problems. Girls, faced with such standards, often find that the only smart and safe strategy is to dumb down and shut up.

*Peers and adults silencing girls and self-censorship.* Institutions and individuals in society reinforce the definition of femininity and acceptable behavior for girls in both subtle and obvious ways. Peers and adults of both genders reinforce feminine ideals and behaviors. In addition, women and girls model it for each other and themselves.

Orenstein (1994) reported that girls monitor each others’ behaviors and keep a vigilant watch over each other and themselves.
Girls of all socio-economic, racial, and ethnic classes reported that they had to be very careful with their behavior because other girls and boys would pass judgments on them, resulting in negative consequences. Girls reported concern about being branded as “sluts,” and gaining a ruined reputation (Orenstein, 1994, p. 236). These girls reported that, while they did not like being called “schoolgirl,” being called “slut” was equally as bad. They felt their behaviors had to fall into a narrow path between appearing too good and appearing “slutty.” Girls reward what is acceptable, often reminding one another to be sweet and compliant. One of the girls interviewed by Orenstein (1994) stated that she wanted to be a lawyer. Her friend admonished her, reminding her that “sweet girls” like her make ineffective attorneys. The girl responded by saying that she was indeed “too cute” to be a lawyer (Orenstein, 1994, p. 35). In effect, this girl saw herself as too cute to be competent.

Judy Mann (1994) cited a study showing that female babies at seven weeks of age are encouraged to smile and vocalize more than boys. Mann suggested that girls are taught from infancy to be pleasant and “to make the atmosphere around them pleasing” (Mann, 1994, p. 23).

Teachers are more likely to describe females than males as “ideal” students (AAUW, 1991). One of Orenstein’s (1994)
interviewees reported that teachers like girls because they are quieter, nicer, and better behaved. Through the schooling process, girls are taught to be self-inhibiting, to become outsiders, passive observers, of the learning process rather than competent participants (Orenstein, 1994). While girls often speak of themselves in terms of their grit and independence, these qualities are rarely displayed in the adolescent’s classroom (Orenstein, 1994).

Even adults who hold gender egalitarian values inadvertantly reinforce feminine ideals. For example, a school counselor charged with helping girls talk about sexual harassment at school completed a successful session with a group of girls. Following the session she offered them candy, adding “like we need to add to our rear ends!” (Orenstein, 1994, p.122) On the home-front, one well-intentioned father was reported to have informed his teenage daughter that he wanted her to be a “man’s woman” -- one who would be able to please the man she was with (Orenstein, 1994, p. 90).

The conventions of femininity and womanhood are complex with mixed messages coming from different sources (i.e., mothers versus fathers, teachers versus parents, TV and music personalities (Taylor, Gilligan, & Sullivan, 1995). The influence of adults on development of adolescent girls is apparent, but male adults and female adults influence girls in different ways. Men are often the accepted authority
figures in the home where girls are meant to be subordinate, even submissive (Taylor, Gilligan, & Sullivan, 1995, p.79). At the same time, fathers send the message to their daughters that girls are to be attractive, sexy, and “daddy’s perfect little girl.”

Both men and women influence the behavior of girls through reinforcement and punishment, but women also directly model acceptable behaviors, offering a visual display of appropriate or desirable behaviors for girls. Because girls perceive a similarity between themselves and women, women tend to hold a disproportionate amount of referent power over the development of adolescent girls as compared to men who are not able to model or teach directly in the same way as women. In support of this conclusion, direct evidence exists that mothers serve as significant role models for girls, and are important sources of information and guidance, showing and telling their daughters how they should feel, behave, and how their bodies measure up (Usmiami & Daniluk, 1997). In their study, Usmiami and Daniluk (1997) explored the relationship between self-esteem, gender role identity, and body image for mothers and their adolescent daughters. They found that, as mothers’ body image scores became more positive, so did their daughters. Further, a positive correlation was evident between mothers’ and
daughters’ levels of self esteem. Body image scores were positively correlated with self-esteem for both daughters and mothers.

Indirect evidence has also shown that adolescent daughters more than sons are at greater risk for depressive disorders and symptoms when their mothers are depressed (Sheeber, Davis, & Hops, 2002). Song (2001), in a study of Korean women’s career choices and their relationships with their mothers, reviewed literature from the United States and abroad. She concluded that mothers play a crucial role as models and socializers and are highly influential in their daughters’ perceptions of themselves and their sex-role attitudes. For example, women who model subservient roles pass along a negative self image to their daughters due to shared gender.

In summary, both the self, other individuals, and society reinforce behaviors in adolescent girls that are viewed as stereotypically feminine. Girls report monitoring their own behavior with others so they will not gain a ruined reputation or be thought of as a know-it-all or stupid. Peers and adults reinforce and punish, both directly and indirectly, behaviors seen as feminine or unfeminine. Girls receive mixed messages about femininity: to behave in a way that is neither too good nor too willful.
Costs of the Loss of Voice

Sacrificing the self. The pressure placed on girls to shape themselves, both within and without, to comply with the dominant cultural ideals of womanhood and femininity, of “selflessness”, are enormous and pervasive (Gilligan, 1982). Hart and Thompson (1996), in a study linking traditional gender role characteristics and higher rates of depression among women, stated that “silencing the self includes deferring to the needs of others, censoring self-expression, repressing anger, judging the self against a selfless ideal, and censoring experience to establish and maintain safe, intimate relationships” (p. 409). Further, they stated that there is a gender-specific set of cognitive schema for appropriate behavior in intimate relationships.

Research (e.g., McCabe, Ricciardelli, & Finemore, 2002; Pipher, 1994; Stern, 1990) has suggested that girls in early adolescence (12-14 years of age) undergo a major developmental transition in terms of gender-role identity, body image, and psychological structure, often at great cost to themselves and society. Stern (1990) reviewed several studies showing that adolescent girls were more likely than boys to be depressed, have more negative self-appraisals, and poorer emotional well-being. In her study of adolescent girls and sense of self, Stern found that girls lose significant ground in terms of confidence and self
esteem during adolescence. She further added that “there are strong indicators that disavowing the self will be sustained into adulthood” (p.114). Usmiami and Daniluk (1997) studied the relationship between self-esteem, gender-role identity, and body image with mothers and their adolescent daughters. They found that lower self-esteem made a significant contribution to poor body image scores in both mothers and daughters.

Many girls undergo a change in attributional style during adolescence; they begin not to trust their own judgments and lose the ability to tolerate frustration without becoming overwhelmed (Pipher, 1994). Pipher said that, when the girls in her research failed, they were more likely to attribute the failure to internal factors such as a lack of ability. That is, they thought they were stupid and tended to give up while boys tend to attribute failure to external factors and stick with difficult problems and situations. Just as bad, girls tended to attribute success to luck and external factors while boys were more likely to view successes as evidence of ability. Importantly, Pipher notes that recent research has shown that this gap between boys’ and girls’ attributional styles may be closing, with girls being more likely to attribute their successes to internal factors. Further, she noted that girls in her study had a tendency to become anxious when faced with difficult situations, which interfered with problem-solving skills, leading
to further failure and even more anxiety and self-doubt the next time around. Additionally, this cycle of anxiety and failure can account for the withdrawal of many girls from math and science – keeping girls from wanting to be astronauts and brain surgeons. According to Pipher (1994), many adolescent girls lose their resiliency, assertiveness, and optimism. They become less curious and energetic and less inclined to take risks. They are more deferential, self-critical and depressed (Pipher, 1994). Pipher observed that girls in her research were not able to say why they lost interest in their dreams and aspirations, they just reported their “mysterious” disappearance (p. 63).

*Relationship losses.* Jack (1991) developed a theoretical model of self-silencing behavior in girls. She posited that women and girls organize their experiences according to their relationships with others. Gilligan and her Harvard Project colleagues (1992) also believed that adolescent girls give up their voice and adopt an inauthentic façade of compliance and niceness to build and maintain relationships. Girls are socialized in traditional feminine roles that teach them to relinquish themselves. These traditional values espouse ideals such as likeability and self-sacrifice in order to make others comfortable and preserve relationships (Smolak & Munstertieger, 2002). Ironically, the inauthentic self detracts from the quality of the very relationships girls
are seeking to build and protect. The spouse, friend, child, parent is relating to a hollow woman/girl, a façade, deprived of contact with the real person herself. The paradox here, said Brown and Gilligan (1992), is “the giving up relationship for the sake of Relationships” (p.7). When a girl's voice is silenced or compromised, when she patrols her own responses and feelings so people will continue to like her, she removes herself from living in the relationship and enters into a caricature of what she's been taught a relationship should be.

Hart and Thompson (1996), in a previously cited study on the link between depressive symptoms and female gender roles, stated that depression in women and girls is related to the value they place on establishing and maintaining close relationships. Jack and Dill (1992), in a study focusing on the effect of levels of intimacy in relationships and depression in women, noted that characteristics such as over-investment in relationships and over reliance on the opinions of others are associated with reduced levels of well-being.

Hagborg (1993) used Harter’s Self Perception Profile for Adolescents (SPPA) to explore the self concept of girls and boys. She noted gender differences in self-concept ratings, with females in this study rating themselves significantly higher on close friendships and social acceptance than on physical appearance and athletic
competence, as compared to boys, further illustrating the importance many females place on relationships with others.

Girls want to win the attention and affection of others and fear distancing themselves or being perceived as “different” from the assumed feminine standard. “Guys like it if you act all helpless and girly, so you do”, one of Orenstein’s (1994) participants offered. As one girl stated, following participation in a classroom discussion, “Oh god, I hope I didn’t say something... that makes me different” (Orenstein, 1994, p. 100). Becca, a quiet girl, said, “I don’t raise my hand in my classes because I am afraid I have the wrong answer and I’ll be embarrassed” (p. 11). Later in the interview process, she went on to say that she never talked in class unless she was “really, really, sure of an answer, and then sometimes not even then” (Orenstein, 1994, p. 89). Orenstein (1994) said that some girls take their silence so far that they will not even cough in class.

Societal losses. Society suffers serious losses when girls give up their voices and confidence, and subsequently, chances for future achievement. As previously noted, Pipher (1994) found that most adolescent girls withdraw from participation in math and science -- keeping them from potential future careers as astronauts and brain surgeons. Indeed, while the overall math gap between boys and girls appears to be shrinking, this is only in lower level math. Girls are still
less well-represented in most higher-level courses in math, science, and computer science (AAUW, 1999, p.12, 13). Since a lack of education is positively correlated with fewer life opportunities, it is apparent that girls’ lack of participation in higher-level technical courses will ultimately lead to diminished opportunities later in life. Women lacking in education also tend to be viewed as incompetent and incapable (Yoder, 2002, p. 213). Indeed, there is a significant under-representation of women in political and upper-level corporate positions, as well as in the fields of science and technology, thus depriving society of women’s creativity and leadership skills in these areas (Yoder, 2002). Finally, girls -- and all of society -- are deprived of important role models, contributing to a continuation of this cycle.

Further, a lack of education generally leads to a lower future income. Indeed, there is a serious discrepancy in income levels of men and women in the workplace (Yoder, 2002). Women without the means to support themselves financially often become dependent on others for financial welfare, leaving them in poverty and vulnerable to abuse. Significantly, two out of every three poor women have been victims of domestic violence, with 25% of these experiencing violence within the past year, as compared to the lifetime average of 21%-34% among the general population of women (Yoder, 2002). A lack of education and subsequent lack of income puts women, and their
children, at serious risk. Society cannot possibly benefit from the abuse of a substantial number of its members who will then be unlikely to become productive citizens.

Hall (2000), addressing the issue of domestic violence in families, stated that by not critically exploring in classrooms the issue of violence against women, schools become implicated in the silencing and “normalizing” of abuse. Again, silencing has far-reaching implications of loss for girls, women, families, and society.

Study of Loss of Voice

Research methods used to study loss of voice. Both qualitative and quantitative methods provide important data toward understanding the phenomenon of loss of voice, although they differ methodologically.

Quantitative research on the loss of voice in adolescent girls has traditionally focused on the comparison of scores on standardized measures, such as self-esteem and depression rating scales, especially by comparing male and female adolescents (Marshall & Arvay, 1999). Such studies have provided valuable insight into the intensity, frequency, and prevalence of loss of voice as well as highlighting possible correlational factors. Survey studies are valuable in establishing the prevalence and possible determinants of loss of voice, but require the researcher to infer from the data the nature of the
experience. Although some of the more advanced quantitative techniques, such as structural equation modeling, allow for more powerful internal/causal statements to be made (Borg & Gall, 2001), the data gathered using such techniques do not permit the development of the meaning, essence, or structure of the lived loss of voice experience.

However, research using qualitative methods, such as interviewing girls individually or in small focus groups, self-report surveys, or anecdotal evidence from therapists, is more common (Rogers, 1993) and yields increased detail about individual experiences. It also allows the formation of hypotheses about possible causal forces. The interview method is the most frequently employed qualitative technique used in research on loss of voice. Despite the time-intensive nature of interviews, they are fruitful sources of information (Seidman, 1991; Crowther & Sherwood, 1997) and have been recommended by some researchers in the study of the loss of voice experience (e.g., Brown & Gilligan, 1992; Orenstein, 1994; Pipher, 1994).

The present study uses an individual interview technique, specifically the existential-phenomenology interview, to examine the Loss of Voice experience. Since this study uses an interview
technique, the following review will be limited to those studies using a qualitative interview technique approach to the study of loss of voice.

*Interview studies.* Interview studies often present the actual language of the individual speakers’ in answering questions about the loss of voice. Most of these studies are focused mainly on the antecedents to or consequences of the loss of voice. Some researchers chose a structured format while others favor an open-ended interview technique; none could be located that used the existential-phenomenological approach with adolescent girls.

Brown and Gilligan (1992) used a “relational method” of interviewing in which the listener/interpreter is empathetic and responsive to the speaker. They stated that “by taking in the voice of another, we gain a sense of entry, an opening, a connection with another person’s psychic life” (p.28). From 1986-1990, Brown and Gilligan (1992) interviewed 1st, 4th, 7th, and 8th grade girls at a private school in Cleveland, Ohio.

Before talking with the girls, the authors observed each girl in the classroom setting. Following observation, girls were interviewed using an open-ended format. An example of a typical exchange involved the investigators asking the girls to think of a time they were upset in class. When girls responded that they were sad or angry about such times as when they were not called on to talk in class, the
girls were further queried with prompts such as, “Was there anything else you were thinking about?”, “So your decision was to walk out of the room. And do you think that was the right thing to do?”, and “Does the teacher know why you left the room?“.

Brown and Gilligan (1992) interviewed the same group of girls over a four-year period and found that girls’ psychological development is “inherently traumatic.” The authors present a powerful picture of loss in girls entering adolescence, in terms of academics, relationships, self-esteem, voice, and sense of self.

Brown and Gilligan’s (1992) data, while revealing important components of the loss of voice phenomenon, fail to make known the essence or meaning of the experience of the loss itself. Further, Von Kaam (1969) stated that it is essential that the co-researcher is able to express her personal emotions, thoughts, and feelings easily, allowing for a clear and detailed recollection. The 1st and 4th grade girls participating in this study may not have yet developed the ability to recall and articulate their experiences as accurately as the older girls.

Mary Pipher (1994) used an open-ended interview technique in her study of 13 adolescent girls. She analyzed the interviews and concluded that girls give up their voice in early adolescence, discovering it is impossible to be both feminine and adult. Pipher’s
interviews showed that girls still seemed to buy into a view of the
typical, and therefore acceptable, female as illogical and passive.
Pipher’s (1994) research, while examining many variables correlated
with the loss of voice, such as depression and self-esteem, did not
explore the meaning of the loss of voice experience itself.

Orenstein (1994) interviewed approximately 25 adolescent girls,
both individually and in groups, as well as their parents and teachers,
to collect their thoughts on issues affecting adolescent girls in school.
Her interviewees came from two separate schools in different areas of
the same town. The two schools were markedly different in the socio-
economic and minority status of attending students. Using an open-
ended interview format, Orenstein and her participants explored issues
such as relationships with boys, parents and teachers not listening,
appropriate and acceptable behavior for girls, and future orientation.
Overwhelmingly, even girls who spoke of themselves with grit and
independence were silent in the classroom, preferring to be silent than
wrong and humiliated.

Orenstein’s (1994) interviews yielded a great deal of information
about adolescent girls’ experiences in school, in relationships, and with
silencing. The data from these interviews, however, failed to explore
or attempt to discover the very nature and meaning of the loss of
voice experience itself.
Marshall and Arvay (1999) interviewed 13 early adolescent students, both male and female, at a private Canadian school. The interviews were conducted using Brown and Gilligan’s relational method. Children were asked a series of eight questions about voice and silencing. The first question asked the children if they had been silenced, or not listened to, by persons in authority and to tell what that experience was like. While both boys and girls reported feeling powerless, they interpreted the meaning of the experience differently, with girls excusing and accepting the nonlistening behavior of adults. Further, the girls and boys were asked to tell about a situation where they wanted to say something but did not say it. The children were asked if they were glad they did not speak up or if they thought they should have spoken up. Girls also focused on saying what they “should” say rather speaking their true thoughts and feelings and risking appearing uncaring or rude. Although this question appears similar to the question to be asked of co-researchers in the present study, Marshall and Arvay (1999) were “interested in learning about situations in which the participants had lost their voices and what understanding they had gained about why this happened” (p.46). Further, this particular question about the loss of voice experience asked for only brief responses and was only one question among many asked during the interview session. The authors were not attempting
to understand the fundamental nature and meaning of the loss of voice experience itself, rather they tried to identify situations, factors, and gender-specific reactions to the loss.

In Marshal and Arvay’s (1999) study, the researchers followed a predetermined interview format that may have been restrictive, limiting the respondents’ freedom to express themselves openly. This potential limitation likely impacted the study’s ability to reveal the very personal nature and meaning of the loss of voice experience. Further, the brief answers did not allow for elaboration on the meaning or essence of the experience.

In summary, while the previously mentioned qualitative studies are a rich source of information about the phenomenon of loss of voice, these studies did not get at the very essence and personal meaning of the loss itself.

Existential-Phenomenology

Existential-Phenomenology has its foundations in both the existential philosophy of Sören Kierkegaard and the phenomenology of Edmund Husserl (Valle & Halling, 1989). Kierkegaard thought it essential that philosophy address the concrete existence of the individual while clarifying the basic themes with which human beings struggle. Husserl’s approach was more academic in nature and attempted to understand human consciousness and experience by
rigorously, and without bias, studying things as they appear in the world.

Martin Heidegger was one of the first to join existentialism and phenomenology into a discipline seeking to understand the meaning of human existence without presupposition or personal bias (Valle & Halling, 1989). Psychology has traditionally embraced a natural scientific approach with several assumptions about phenomena in the natural world: they must be observable and measurable, and it must be possible for more than one observer to agree on their existence and characteristics (Valle & Halling, 1989). More recently, the definition of psychology has grown to include both experience and behavior. If we define psychology as the complete science of human experience (Ornstein, 1985), the need for approaches that elucidate the meaning of these experiences are needed. Through the psychological application of Existential-Phenomenology, we seek to understand the fundamental nature and meaning of the human experience through descriptive techniques, such as disciplined reflection and interviews or thematic verbalization (Valle & Halling, 1989, p. 6, p. 10). Through this process of verbalization, the unity and interrelatedness of the individual and his or her world and the meaning of the lived experiences are revealed (Valle & Halling, 1989, p.7). Through a
“bias-free” examination of these verbalizations, a fuller understanding of the themes of human experience can be drawn (Eckartsburg, 1986).

The verbalizations that take place during existential-phenomenological inquiry can be viewed as a “conversation” between co-researchers, the people describing their experiences and the person directing and recording that description (Moustakas, 1994; Polkinghorne, 1989). Following this conversation, the researcher attempts to extract relevant themes revealed through the descriptions of co-researcher life events. These themes are thought to reveal a superordinate structure of experiences across all human beings regardless of personal traits or demographics (Jones, 1984).

In Existential–Phenomenology, the researcher’s own biases and preconceptions are put “on hold” through the process of bracketing (Valle & Halling, 1989, p. 11). Bracketing is a self-reflective process by which the researcher’s own assumptions or biases about the targeted phenomenon are verbalized and made as clear as possible to the researcher and others so that the world of the co-researcher can be considered as pure phenomena without bias or preconception (Valle & Halling, 1989, p. 11). This process allows co-researchers to make the stories of their lives known without the interference of researcher bias or interpretation.
In this study, adolescent girls were asked to describe their experiences with a loss of expression of voice. Each girl described a specific experience, in a specific context, in as much detail as she was able remember it. She was encouraged to give details of her experience so that the thoughts, sensations, feelings, emotions, and perceptions involved in the experience was known.

As previously stated, it was imperative that co-researchers have experienced the phenomenon, in this case a loss of voice. The girls must be familiar with the phenomenon as well have the ability to articulate their experiences to enhance the insight their reports afford. Each girl had an expert role as the informant and was seen as an equal to the researcher in the research process. This equivalency of power is of the utmost importance in the interview process because the researcher’s role should be one that only fosters, rather than leads or guides, discussion through brief responses and probes for more description (Thompson, Locander, & Pollio, 1990). Polkinghorne (1988) also cautioned the researcher to remain aware of unexpected variables that may come up in co-researcher dialogue so that the researcher’s own preconceptions do not impact the elicited descriptions.
The essence and form of girls’ experiences was sought, and since the existential-phenomenological approach does not attempt to predict, control, or explain phenomena, the girls’ experiences were considered independent of cause and effect relationships (Valle, King, & Halling, 1988). Importantly, each girl’s awareness of her particular experience in a given situation must be understood, rather than merely a description of the particular events that occurred at the time (Polkinghorne, 1989).

It was believed that the dialogues of these girls, and subsequent themes extracted from them, provide insight into the nature of the experience of loss of voice in adolescent girls. Further, this approach reveals previously unknown aspects of this experience so future researchers may continue to explore their significance. Glassford (1991) found that educators who asked adolescents for their thoughts and opinions on the design of an acceptable drug and alcohol abuse prevention program, as well as possible rules about drug and alcohol abuse, discovered valuable information that was different from what the researcher had theorized would be effective.

Chapter Summary

As stated previously, both quantitative and qualitative data collected thus far on the loss of voice experience are valuable. However, they fail to capture the meaning or essence of the loss of
voice experience from the adolescent girl’s perspective. Specifically, quantitative data require the researcher to make inferences about the experience of loss of voice, and presently available qualitative data are also limited for several reasons.

First, much of the descriptive data on loss of voice are brief and were gathered as secondary to the primary focus of the present study. Second, participants in interviews were often younger than age 12 years and may not have been able to recall and articulate clearly their experiences (e.g., Brown & Gilligan, 1992). Further, none of the interview studies conducted with the desired age group used the existential-phenomenological approach, that probes the co-researcher to reflect and describe as they re-live the experience. Instead interviewers used “guides” or focus groups to gather information.

Finally, although loss of voice experiences were well described by some authors (i.e., Brown & Gilligan, 1992; Orenstein, 1994; Pipher, 1994), they featured no systematic analysis of the descriptive data. Therefore, it is uncertain whether the theme(s) contained therein are shared across the participants. Thus, no meaning structure was developed as will be the case in the present study.

In sum, adolescent girls are undergoing changes that are pushing them toward adulthood. This study targets young females in
the midst of this developmental period when the loss of voice experience appears to be a common phenomenon.

This study, using the existential-phenomenological approach and employing the thematizing method proposed by Jones (1984), gathers data that illuminate the structure and meaning of adolescent girls’ loss of voice experiences. It is believed that, in doing so, a better understanding of the essence of a girls’ loss of voice experiences will be revealed.
Chapter III.

Method

Design

This is a qualitative study that employed an existential-phenomenological interview to collect detailed descriptive information about the experience of Loss of Authentic Voice in adolescent girls. The existential-phenomenological approach was used to examine the thoughts, sensations, and feelings of each girl’s own individual experience with Loss of Voice to “explicate the essence” of this experience (Valle, King, & Halling, 1989, p. 13). The basic assumption of the existential-phenomenological paradigm is that, in order to fully understand the meaning of human experience, we must investigate “phenomena as they are experienced by people” (Becker, 1992, p. 33).

It has been suggested that the “interview best fits the qualitative paradigm” (Borg & Gall, 1989, p. 397). Further, Borg and Gall (1989) stated that investigators must maintain vigilant awareness of any self-biases or presuppositions that may surface under examination that may influence the interview. A review of the literature indicated that wide support exists for the interview format as most appropriate for
qualitative research (Becker, 1992; Moustakas, 1994; Polkinghorne, 1989). To ensure the collection of unbiased data, it was imperative that, during the interview, the researcher remained cognizant of her own assumptions about the experience so as not to influence the interview content (Becker, 1992). The interviews conducted for this study were “semi-structured” in that the co-researchers were asked the same style question and subsequently probed by the investigator as needed to encourage them to elaborate on their answers.

Co-Researchers. The selection of co-researchers for this study followed the guidelines set forth by Moustakas (1994) who identified several criteria essential for co-researchers to possess so that meaningful information would be presented in the interview. The following five criteria were said to be essential: experience with the phenomenon under investigation, considerable interest in understanding the meaning of her or his own experience, an ability to articulate that experience in a detailed and meaningful way, an agreement to participate in a tape-recorded interview, and agreement to the possible publication of the investigator’s research data. To be selected, co-researchers must acknowledge and agree to these criteria.

Co-researchers were adolescent girls between the ages of 12 and 16 years. Although demographic diversity among co-
researchers was welcomed, no specific efforts were made to recruit a diverse sample. The goal for selection was to find adolescent girls who had experience with a Loss of Voice, and thus could serve as “experts” on this topic. It was imperative that they not only have experienced the phenomenon but were also able and willing to describe that experience. Thus, a “representative sample” of the adolescent population was not needed (Guba & Lincoln, 1994). Table 1 contains demographic information.

Table 1
Demographic Data

<table>
<thead>
<tr>
<th>Age</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Range 12-16</td>
<td>Range 7-11</td>
</tr>
<tr>
<td>M=14.4</td>
<td>M=9</td>
</tr>
</tbody>
</table>

Note: Race/Ethnicity data were also collected. Of the 12 girls who volunteered (1 interview was not included in thematization), 6 were Caucasian, 4 were Hispanic, and 2 were African American.

As stated, of crucial importance was each girl’s ability to articulate her thoughts and feelings in a clear, detailed manner. Given that most children, by early adolescence, have developed the ability to speak abstractly about themselves with a complex vocabulary, it is believed that none of the co-researchers selected for this study displayed significant difficulties verbalizing their thoughts and feelings.

Sample size. Among existential phenomenological scholars, it has been noted that the number of co-researchers in any given
investigation may vary considerably (Jones, 1984; Polkinghorne, 1989; Glesne & Peshkin, 1991). While some studies have used as few as three, others have had more than 300 co-researchers. For this study, it was desirable to interview between 10 and 12 co-researchers to achieve the ultimate goal of eight usable interviews. In fact, of 12 interviews conducted, only one was deemed not usable because, while the co-researcher articulated the events of the experience, she was unable or unwilling to give a description of her thoughts and feelings during that experience. As a result, only the remaining 11 interviews were thematized. It is believed that this number of co-researchers achieved the “saturation” point recommended by many existential-phenomenological researchers. This saturation cut-off point, according to Seidman (1998), has been determined to be the point at which there is a “saturation” of information or an exhaustion of repetitive themes across co-researchers. This exhaustion of potential themes contained in each description of the experience allowed the investigator to understand the essence of the experience of Loss of Voice as clearly and fully as possible.

Selection. The researcher sought volunteer co-researchers through friends and colleagues aware of girls matching the desired criteria. The researcher explained thoroughly all relevant aspects of the study to all potential co-researchers and their parent(s). This
description included explanations of the voluntary nature of the research study, the use of audio-taping, confidentiality issues, and the approximate time involved (i.e., three separate meetings).

_Researcher._ The researcher for this study is a 35-year-old Caucasian female enrolled in a doctoral program in a south Florida university School Psychology program. During her graduate education she successfully completed coursework, practicum experiences, and an internship that required objectivity, rapport-building ability, and exceptional interviewing skills with both children and adults.

As a female, the researcher experienced a Loss of Voice during her adolescence soon after entering a private parochial school. Up to that point she often contributed in her classes and voiced her opinion when she felt strongly. The researcher recalls the one specific experience in 10th grade when she had a strong opinion about a topic in class and did not say it. Following this experience, she remembers speaking infrequently, if ever, in classes, a habit that carried over into undergraduate and graduate classes. As a result of this and experiences with sexism, she developed an interest in women’s issues during her undergraduate career. Today, she incorporates feminist pedagogy into her teaching and daily life. As a result, she has found that many of her female undergraduate students report vividly remembering the experience of a Loss of Voice in their adolescence.
These students have reported, on several occasions, that the researcher’s description of this phenomenon in class stimulated their awareness of its existence, and helped them regain this lost voice.

**Instrument.** Two instruments were used for this study. The first “instrument” was the core question posed to the co-researchers: “Please think of a specific time when you had something important to say, but did not say it. In as much detail as possible, describe that experience” (See Appendix A).

To elicit further description from the co-researchers, the investigator used probes in which information was repeated back to the co-researcher to ensure understanding and to invite the co-researcher to elaborate on her answer. Further, probes were used to help the girls shift their focus from historical accounts of the event that are not considered part of the experience itself. These clarifying probes included statements and questions such as: explain what you mean, tell me more, can you expand on that?, how so?, what was that like?, are there other words to describe that?, and can you return to describing...?

The second instrument was a demographic data sheet (see Appendix B) which was used to collect basic demographic information about the co-researchers.
Procedure

Bracketing interview. Prior to conducting co-researcher interviews, the researcher herself engaged in a reflection of the research question following an existential-phenomenological process called a bracketing interview. The purpose of this bracketing interview was to identify any preconceived notions she has about the topic and to allow her to identify and acknowledge her own experience (i.e., emotions, thoughts, and feelings) with Loss of Voice. Further, this helped protect her from imposing her own personal views on her co-researchers’ descriptions (Polkinghorne, 1989; Valle, King, & Halling, 1989). Her interview was conducted and bracketed by another graduate student who is also conducting an existential-phenomenological study. Because this graduate student also was chosen to assist in the thematic analysis of the co-researcher interviews, the investigator completed a bracketing interview with her to reveal any potential biases.

Pilot study. To uncover potential procedural difficulties, a pilot study with three co-researchers was completed. These interviews were successful and were included in the actual sample selected for participation. The pilot study helped the investigator refine her skills in conducting an existential-phenomenological interview. Further, no
difficulties were revealed and all co-researchers comprehended the purpose of the study and were eager to participate.

Interviews. Three separate meetings for interviews (Seidman, 1998) with each co-researcher were completed during this study at a location selected by the co-researcher and her parents(s).

During the first meeting of approximately 30 minutes, the researcher introduced herself to the co-researcher and her parent(s). At this time she obtained the co-researcher’s and parent’s consent to participate in the study (see Appendix C). The researcher asked the co-researcher to consider the research question for a short period of time (e.g., three to four days) before a second meeting took place. Each co-researcher was asked to keep a journal of her thoughts and reactions over the interview period. The researcher also maintained “field notes” (See Appendix D) during this time to track her reactions and thoughts during the interview process. At this time, the researcher set up the second meeting and answered any questions the co-researcher or her parent(s) may have had.

Meeting two was audiotaped and lasted approximately 20-30 minutes. The consenting parent was not present at this meeting, and the goal was to capture the co-researcher’s emotions, thoughts, feelings, and sensations about a specific experience of Loss of Voice. The investigator’s role during this second interview was simply to
listen to the co-researcher’s description of her experience, ask for more detail, seek clarifications when needed, and keep the interview centered around her experience, rather than studying the event itself or providing therapeutic intervention. The researcher attempted to create a relaxed, safe, and nonjudgmental atmosphere during interviews so that her co-researchers were comfortable recalling and sharing as much detail as possible about their experiences. At this second interview, a time for the third meeting was set up.

Following the second meeting, the audiotape of the interview was transcribed. The researcher and her colleague completed a thematic analysis of this transcription. This thematic analysis followed the guidelines set forth by Jones (1984), and is further described in the Data Analysis section to follow.

During the third meeting, the researcher presented each co-researcher with a thematized protocol of her interview to ensure that her experience was fairly and accurately represented. Each girl was encouraged to offer any changes she thought would make the protocol a more accurate representation of her experience. At this third meeting, the girls were given another opportunity to discuss any additional thoughts they would like to add, as well as to supply new information not recalled or reported in the second interview session. Further, this third interview allowed each co-researcher to ask any
additional questions she may have had. The third interview session concluded the interview process with the researcher restating the level of confidentiality in the study and thanking the co-researcher and her parent(s).

Data Analysis

Analysis of the interview transcripts was completed following the guidelines set forth by Charles Jones (1984) entitled “Training Manual for Thematizing Interview Protocols Phenomenologically.” This systematic method of analysis allowed for the development of themes derived from co-researchers’ words expressed during interviews. There are multiple steps required to complete thematization and these steps are detailed in the following section.

Thematic analysis. Each transcription was first read in its entirety to gain an understanding of the overall meaning contained therein. Second, tentative thematic units, or “units of significant meaning” were marked off (Jones, 1984). These thematic units often contained the actual words used by the co-researcher and, in fact, using the co-researcher’s exact words were of great concern. Specific units may have been distinguished if there was a change in verbal direction of context of the speaker’s words. It has been recommended that transitional words such as “but” and “and” be left out of the thematizing process since they generally offer little meaning (Pollio,
1984). This study followed Pollio’s (1984) recommendation. In the third step, these tentative thematic units were charted on a separate piece of paper. The themes were sequenced as they were presented in the interview. Fourth, the themes were clustered, which involved organizing tentative units into groups by identifying similar ideas or phrases in each unit of expression. These groups were then numbered and named as specified by Jones (1984) in the thematic analysis process. During the naming process, stringent efforts were made to preserve the verbatim words spoken by the co-researchers.

Once these interview transcriptions were thematized, the investigator examined all the protocols together to determine if any superordinate themes, or shared themes among all the co-researchers, emerged. Indeed, multiple superordinate themes emerged, suggesting that it may be possible to characterize the essence of a specific experience across all the co-researchers involved in this study (Jones, 1984).

Reliability

This researcher enlisted the help of another graduate student to thematize protocols. Both the researcher and the fellow student independently read and thematized a sample of protocols, allowing a measure of reliability. These results were compared to determine whether the themes identified were consistent across raters. This
measure of reliability (i.e., percent agreement between raters) was thus obtained. The desired level of reliability for this study was .70, a level of reliability commonly used in quantitative research as a whole (Thompson, 1996). In fact, the total interrater reliability for the pilot study was 88% and was approximately 96% across all protocols. Additionally, a triangulation of the data occurred with data from the third interview. At this time, co-researchers were asked if the experience was fairly and accurately represented. Without exception, each co-researcher agreed that the extracted themes represented her experience. Using multiple raters contributes to the trustworthiness of the analysis of the obtained data (i.e., triangulation) and a circumvention of potential researcher biases.
Chapter IV.

Results

This chapter presents the thematized results of 11 existential-phenomenological interviews completed with adolescent girls between the ages of 12-16 years. Each girl reported that she had experienced one or more Loss of Voice episodes. The contexts of the girls’ experiences will be reported first, followed by the themes extracted during analysis of the interview transcripts. These themes were named using the words of co-researchers. All quotes were carefully selected to represent equally the experiences of all co-researchers.

Context of the Reported Experience

The contexts in which the co-researchers experienced a Loss of Voice varied, as seen in Table 2. Being called on by a teacher to answer a question in the classroom and being reprimanded at school, in a social situation, or at a school-related club meeting such as Student Government Association were the two most common settings in which girls experienced a loss of voice.
Table 2

Context of Loss of Voice Experience

<table>
<thead>
<tr>
<th>Context</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reprimanded</td>
<td>5</td>
</tr>
<tr>
<td>Prompted to Speak in Class</td>
<td>4</td>
</tr>
<tr>
<td>Discussion with Parent</td>
<td>2</td>
</tr>
</tbody>
</table>

Thematic Analysis

Thematic analysis of the 11 interviews detailing Loss of Voice experiences yielded six superordinate themes or themes shared by all the girls. Four subthemes also were revealed. Further, many additional themes were shared among some, but not all of the co-researchers. The following section describes each theme in descending order of frequency of its appearance. A graphic representation follows each theme’s description to symbolize the meaning of that structure visually in the Loss of Voice of experience. Finally, all themes revealed in the experience and their relationship to one another will be represented graphically.

Difficult Position

Difficult Position emerged as a superordinate theme in the girls’ Loss of Voice experience. All 11 participants revealed that, following a
desire to speak, their Loss of Voice experience was characterized by a
decision-making process in which they silently weighed the potential
losses and gains associated with speaking up, putting them, as one co-
researcher said, “in a difficult position” or “hard position.” Girls felt
this position was difficult because they reported seeing themselves in a
“lower position” relative to those with whom they wanted to speak.
One girl, summing up her position in relationship to the other, said,
“She was older, you know, elderly and more experienced, she had a
lot more power over me.” Another girl identified a peer who
reprimanded her as more experienced and “having a lot under her
belt.” Another teenager stated with agitation, “I was being put in a
bad position where I cannot...say what I feel and not have to worry. I
felt like I had a lot to lose and that’s why I had to keep my mouth
shut.” One co-researcher dejectedly said, when faced with the
decision to speak or be silent, “I had to weigh the costs...either I
suffer or everyone else suffers. Neither choice was good.” Another
put it this way, “It’s a balancing act.”

This decision-making process was characterized in terms of
consequences, both positive and negative, for both speaking out and
remaining silent. Girls reported that they would experience a variety
of losses for speaking out (So Much to Lose) but identified relatively
few gains (Strong) if they chose to speak their minds.
So Much to Lose. So Much to Lose emerged as a subtheme of Difficult Position. All participants stated that they would experience at least one of three negative consequences for speaking up. The first of these consequences, “long-term effects,” reflected many girls’ concerns about the potential loss of future opportunities as a consequence of speaking their minds. This particular type of loss always was reported as a result of girls being in a “lower position” than another who was viewed as their “superior” or one who was seen as holding power over future opportunities. Girls feared that speaking out and “causing trouble” could compromise these future prospects. One girl stated that she had been called “stupid” and “incompetent” by an older student in front of her peers. This older student was the president of a school club and thus was viewed as being “more experienced” and “above” the other students. Further, this older student was seen as having the ability to impact the future social or political opportunities available to the younger girl. This girl worried about her future membership in the group as she pondered speaking up, wondering, “Will I ever get this [chance to be in Student Government Association] again?” Another co-researcher said, “I don’t want to get kicked out [of the group] or my chances of being in it next year might be spoiled.” One girl, contemplating a verbal response to her employer who had reprimanded her in front of peers said about
speaking up, “How will this affect me in the future? I mean he has so much control, like he may not want to write a letter [of recommendation], then I ruin my chances later just because I said something I was feeling right now.”

The second consequence involved fears of being harshly judged by peers and adults. Girls often worried that they would be seen as “stupid”, “different,” “bitchy,” or “a complainer” if they spoke up and would then lose the respect of peers and adults. One girl decided, as she contemplated answering a question in class, that she was “not as smart as everyone else.” Another girl, while taking part in a Bible study group, wanted to ask a question but decided not to say anything because she felt that she “should know this, everyone else knows but me.” Several girls believed they were “not as good as” everyone else and did not want to risk being judged as such. Another girl put it this way: “People might think I was wrong, it was just too risky.”

A third component of loss can be summarized as “Good Girl/Bad Girl.” Girls were concerned about maintaining others’ views of them as “good”, one who shows that she cares about the feelings and concerns of others. Girls frequently held the needs of others as more important or worthy of consideration than their own, even when these others had hurt or mistreated them. Several girls reported that, although they felt they had been mistreated and disrespected by
another, they did not want to speak up and risk hurting the other’s feelings or being viewed as uncaring. One girl said, “I knew she was just stressed out so I didn’t want to say anything that would hurt her feelings.” Another girl who said she had been mistreated by a friend and wanted to defend herself, plaintively said, “I was really hurt, but I didn’t want people to think I was mean.” Girls often thought that by simply stating their needs or wants or standing up for themselves they would be looked down upon. One co-researcher summed it up this way: “I just want everybody to be happy.”

Further, girls often took responsibility for the behavior of others as a result of their own. As one girl explained it, “If I speak up, then someone else might get the nerve to say something and get in trouble, and I would feel responsible. It would be all my fault.” Ten of the 11 girls stated that they did not want to get themselves in trouble as well.

*Strong.* The decision-making process also resulted in the identification of some positive consequences of expressing thoughts and feelings, although these were identified much less frequently than negative consequences. Further, girls ultimately decided that the risks of speaking up far outweighed any positive consequences. Several girls stated that, if they had spoken up, they possibly would have had some impact on the hurtful behavior of others. The girls themselves might not be hurt again in the future by the same behavior, and they
may also protect others from experiencing the same ill treatment. “She might not do it again if I tell her how I feel,” said one girl. Another girl felt that she might keep the person from hurting others in the same way, stating, “If I had told her how I felt, she might not have done it to someone else.” Still another girl said that, if she had asked her question in class, she “might have been able to help other people and learn something at the same time.” Several girls said that, if they had spoken up and answered questions in class, their teachers would have been proud of them.

All the girls felt that if they had spoken up, they would have felt more in control and better about themselves as individuals. “If I had told him how I felt, what I thought, I would have been proud of myself. I would have felt strong, like I mattered,” said one girl, sadly. Another girl stated that if she had said what she was thinking, “I would have felt so good!”

The superordinate theme Difficult Position and its subthemes, So Much to Lose and Strong, occurred across all ages, races, and contexts. Each of the participants in this study reported taking part in a decision-making process, determining the consequences for speaking and, often, for remaining silent. All girls identified at least one negative consequence for speaking up, while nine of the 11 also identified positive consequences.
All major themes are represented by bold text and larger symbols while subthemes are indicated by smaller symbols and text embedded in the symbols of the major, superordinate themes. Here, the superordinate theme, Difficult Position, is symbolized in Figure 1. as the diamond-shaped decision symbol from a common flowchart. This symbolizes the dichotomous decision making process all girls went through before choosing to remain silent. Within this diamond, the subthemes So Much to Lose and Strong are shown because most girls reported thinking about both positive and negative consequences for speaking their minds. So Much to Lose is shown overlapping a small diamond representing the subtheme, Strong. This diamond is small since fewer girls reported this particular theme. There is an overlap of themes since So Much to Lose received much more consideration by every girl who considered both themes and So Much to Lose always overshadowed Strong.
Figure 1. Theme of Difficult Position with Subthemes, So Much to Lose and Strong.

*Feeling*

The superordinate theme of Feeling was reported by every co-researcher as occurring along with the decision-making process in Difficult Position. The Loss of Voice experience involved a range of deep emotional and physical reactions for every girl interviewed.

*Emotions.* Girls reported emotions that can be categorized into four specific feelings, Diminished, Different, Angry, and Afraid. All girls reported emotions which fell into at least one of these categories, and several girls reported emotions from all four groups. Further, encompassing all descriptions of Feeling, every girl stated that she felt like she might “explode” or “just lose it.” Might Explode is, therefore, a superordinate theme and will be discussed at the end of this section.
The first subgroup of emotions expressed by co-researchers, Diminished, described the Loss of Voice experience as leaving them feeling, in their own words, belittled, weak, childish, young, stupid, invisible, dumb, powerless, frozen, small, worthless, or “just no good.” Nine of the 11 girls specifically used the term “trapped” to describe this feeling. One girl, upon reprimand by a teacher, described her feeling of diminishment this way: “I didn’t talk because I didn’t want him to think I was weak or childish. If I had said it, I was afraid he would think I was so young and so stupid and could not handle criticism. I felt almost invisible at that moment.”

The second group of emotions under Feeling is Different. Ten co-researchers spoke of feeling different from everyone else, isolated, or alone. They talked about comparing both themselves and their abilities negatively to those around them when deciding if they should speak. One girl said, as she decided not to speak, “I guess I just can’t measure up.” “All eyes were on me,” said another girl, “it’s like everyone else knew [the answer], and I was the only one that didn’t. I just thought, am I the only one?” One co-researcher remembered wondering of her classmates: “Do they know how insecure I am? ...if I talk, they would think, ‘Are you stupid?’” A very different approach with the same outcome -- silence -- was revealed by another co-researcher: “I knew the answer but I didn’t want to seem too smart,
too uppity, like ‘oh, she thinks she knows everything!’ I don’t want to be that girl, that girl that’s too smart, better than everybody else, no one likes that.” One girl lamented, “I realized at that moment that I was just not like everybody else.”

Another group of Emotions can be classified as Angry. All the girls reported feeling anger and resentment toward themselves as well as the other. “At that moment, I hated myself,” said one girl recounting her experience.” “It was just a mixture of feelings, like I was mad, upset, flustered...,” said another girl. One co-researcher, talking about a loss of voice with her teacher in class, put it this way, “I was disappointed in myself, but I knew she wouldn’t have listened to me anyway. I was mad at her, really mad that she never listens. She’s rude and annoying – it just made me so mad to be silenced!” Another girl, commenting on a club meeting where she was reprimanded for her performance, said, “I hated being there, I hated myself, but most of all I hated her (the group leader).”

The final Emotion in the Superordinate category of Feeling is Afraid. Nine co-researchers said that at the moment of loss of voice they were fearful and felt “vulnerable”. One girl, commenting on a classroom experience, said, “School is supposed to be a place where you feel safe and comfortable, and right then I didn’t.” Some girls talked about a fear of the unknown, or afraid, as one girl put it, that
“something bad was about to happen but I didn’t know what. It sounds really stupid but I was just scared.” Still another girl compared the feeling to a near traffic accident.

It was like me almost hitting the guy crossing the street the other day in the car. It scared me. I had that same feeling inside – the pounding heart, getting all flustered, it was pretty much just like that. Very scared, a lot of fear. Ahhhh! That explains it right there, just out of control, like oh my god! You wonder if it’s really happening.

*Physical.* Within the superordinate category of Feeling, co-researchers reported various physiological reactions experienced during the Difficult Position phase of the Loss of Voice process.

Physical can be categorized into five specific reactions, Hot, Shaky, Tense, Visual/Aural, and Heart/Hard to Breathe. All girls reported marked physiological reactions of varying intensities during their experience.

All 11 co-researchers reported feelings that can be classified as Hot. They described their bodies using such words as warm, hot, or burning up. “I felt like I was on fire, like I was going to melt right there,” said one girl. Another reported, “My face was bright red, I could feel the heat.” “My skin was on fire, it felt prickly, I thought I was going to pass out,” said another co-researcher.
Seven girls reported feeling Shaky. One girl described it this way: “My body was shaking -- I knew everyone could see it. I thought I might just collapse right there.” “I was just trying to hold still,” said another girl, “but I was shaking so bad.” “My adrenaline was going hard,” said another co-researcher.

Ten of the 11 girls reported feeling Tense in some way. Several talked about feeling their fists clenched or grabbing their desks tightly. Many said they felt a “tight throat.” “I was under so much stress, my whole body was tight,” said one girl. “I realized I was latched onto my desk, I was holding on tight, I was so angry and it was all I could do was just hold on,” said one researcher, gritting her teeth.

Ten of the 11 participants said they experienced some Visual or Aural Feelings. “I could hear my blood rushing in my ears,” said one girl. Another girl reported that her vision became blurred: “I could not see very well, like I was in such a rage, so scared, I could not even see anymore. It was like tunnel vision.” “Everything became very quiet right at that moment, but the noise in my ears was so loud, it made me dizzy, I couldn’t hear anything else, just that rush,” said another co-researcher.

Another nine girls reported feeling some sort of sensation in their heart as well. “My heart was pounding out of my chest,” said one co-researcher, “I could hardly breathe.” Another said, “I felt massive
pressure on my chest, on my heart.” The final Physical reaction was Heart/Hard to Breathe. Eight of the 11 girls reported finding it difficult to breathe. “I could not catch my breath,” said one girl, “like there was this huge weight on my chest. Like someone was squeezing me.”

*Might Explode*

Finally, culminating all descriptions of Feeling and the decision making process in Difficult Position, every girl stated that she felt like she might “explode” or “just lose it.” Might Explode is, therefore, a theme that encompasses the entire Difficult Position and Feeling superordinate themes and seems to be the final phase of all feeling before the decision not to speak was made.

“I just wanted to scream!” said one girl. “I felt like I was about to lose it, like I might not be able to stop myself from saying it, like it would just come out at any second. I was about to explode, literally explode,” said another girl. “It was overwhelming, like I was going to just explode, I almost could not help it, I was about to cry,” said another girl, with great sadness. “I held onto the desk because I felt like I was about to lose control, I was going to just blurt it out.”

The theme, Feeling, in Figure 2 is shown as a nebulous cloud containing all the Emotion and Physical Reactions reported by co-researchers. All girls reported feelings from both subcategories. A cloud was chosen, since several girls said they felt they were in a
“haze of emotions.” The Feeling cloud completely surrounds Difficult Position shown in Figure 1, showing that intense Feeling encompasses the Loss of Voice process.

Figure 2. Theme of Feeling and subthemes contained in Physical and Emotional, encircling and in relation to Difficult Position. Might Explode can be seen at the right as a sharp object crystallizing from the cloud of Feelings

*Not Worth It*

Not Worth It emerged as the fourth superordinate theme in each co-researchers’ Loss of Voice experience. All 11 participants revealed that, as a result of the decision-making process, they chose not to speak. As one co-researcher said, “I could lose so much. It’s just not worth it.” Another girl said sadly, “There’s no point, I won’t accomplish anything. Someone will be mad or hurt.” Eight girls said that they would delay speaking until the next opportunity arose to
speak. As one girl put it, “I’ll probably just wait until next time, I’ll say it later.” For this reason, the “D”-shaped symbol for Delay from a common flowchart was chosen. Figure 3 symbolizes the delay in speaking that co-researchers made when they decided it simply was not worth it to speak.

Figure 3. Theme of Not Worth It following Difficult Position, Feeling, and Might Explode.

Who Am I?

All 11 participants reported that, after deciding not to speak, they questioned their decision, reported feeling anger or resentment toward themselves, and wondered, as one co-researcher put it, “What kind of person am I? If I can’t even tell someone what I think, who am I?” Another girl said, “Every time it happens, it really changes the way I think about myself.” One co-researcher said angrily, with her face flushed, “I was so mad! I knew the answer but I didn’t say it.
Afterward, I wanted to punch myself in the face! That always happens!” Figure 4, a question mark, was chosen to symbolize the self-questioning of identity girls underwent at this point in the experience.

![Diagram](image)

Figure 4. Theme of Who Am I? in relation to Not Worth It, Difficult Position, Feeling, and Might Explode

*Nevermind*

The sixth superordinate theme, Nevermind, followed closely behind Who Am I? Most girls, after feeling anger and resentment toward themselves and questioning their decision and, in many cases, their identity, decided that the whole experience simply was not worth thinking about. “I just told myself, ‘Don’t think about it’,” said one girl. Three other co-researchers put it this way: “I tried not to think.” One girl said nervously, “I just laughed and put it off, I told myself, ‘just try to take it’.” Still another girl dejectedly put it this way:
I was so angry, so upset, then I just felt hopeless and figured it was better not to think about it. I said to myself, “Nevermind, nevermind, just deal with it”. I knew there was nothing I could do. It was too late, I could not change what had just happened so why even worry about it. I let it go.

In sum, as one co-researcher stated sadly, “It isn’t important.”

Interestingly, this theme always was revealed last during each interview. Each girl suddenly brightened at this point, reporting that her Loss of Voice experience “wasn’t really worth thinking about” after all.

Figure 5 shows an octagonal “stop sign.” This symbolizes the final step of the Loss of Voice experience for all 11 co-researchers -- the point where the experience “stops,” where they decided to stop thinking about it and forget about what had just happened.
Figure 5. Theme of Nevermind, completing the meaning structure of the Loss of Voice experience.

Difficult Position, Feeling, Might Explode, Not Worth It, Who Am I?, and Nevermind formed the primary meaning structure of the Loss of Voice experience. These themes did not occur in isolation, but were intimately related to one another and moved in a temporal sequence denoted by the arrow connections in the above model. Co-researchers reported their Loss of Voice experiences starting with an awareness of one-down positioning in relation to another person or people along with a related dichotomous decision-making process weighing potential losses and gains from speaking (Difficult Position). This decision-making process was characterized by an emotionally upset state of Feeling (i.e., Hot Shaky, Angry, Diminished) which culminated in each co-researcher feeling like she Might Explode. At this point, all co-researchers concluded that they indeed had too much to lose and that speaking up was simply Not Worth It. Following the decision to remain
silent, each girl immediately questioned her decision, expressed some form of self-recrimination (i.e., I hated myself, I wanted to punch myself in the face), and even questioned her very identity, asking Who Am I?. Following this self-questioning, all co-researchers engaged in some form of denial of the importance of the Loss of Voice experience. Nevermind shows each girl’s ultimate resolve – that the Loss of Voice experience was not relevant or worth thinking about, thereby ridding herself of the unpleasant memories of that experience and placing her in control of her voice again.
Chapter V.

Discussion

“If I do say something, how is this going to affect everything that I have to do with her? Like I’m going to have to suck up to her after this, and I don’t want to do that and, at the same time, I am sucking up to her because I’m not telling her how I really feel, so it was just this thing about what kind of person am I if I don’t say this or I do say this. Who am I really? I’m just a coward. I would be if I don’t talk but then I would have to be really sorry so she wouldn’t be mad. Then I’d have to act like a coward to make her happy. Either way I lose.” (co-researcher, age 16)

This study set out to describe the lived experience of the Loss of Voice in adolescent girls. An existential-phenomenological interview method was used to capture descriptions of the Loss of Voice phenomenon from 11 girls who had experienced it. This group of co-researchers was chosen because a review of the relevant research literature on this topic reported the presence of this phenomenon in the lives of virtually all adolescent girls. A methodological approach that would allow for maximum insight into the cognitions, feelings, and emotions that make up the Loss of Voice experience was of great
importance. Therefore the existential–phenomenological approach was chosen. In fact, the use of this approach facilitated an atmosphere of comfort, safety, and impartiality in which the co-researcher openly explored the research question. The average response time used to answer the single, open-ended research question was 24½ minutes. This researcher feels the information gathered in the interviews was candid, vivid, and revealing of the intensely lived experience of Loss of Voice.

Context and Demographic Impressions

Through the analysis of the interviews, it appears that neither co-researcher age nor racial or ethnic background had a distinguishable impact on the Loss of Voice experience. Girls of all ages in this study (i.e., 12-16 years) as well as girls of diverse racial and ethnic backgrounds (see Table 1) easily recalled at least one Loss of Voice experience and described it with marked consistency. That is, the themes and their meaning structure for each protocol were remarkably similar to the others as well as to those revealed by the investigator and her similar-aged doctoral colleague in their bracketing interviews, even though there was a discernible age difference between them and the co-researchers. In addition, despite the setting of the event (i.e., home, school, job, peers, teachers, parents), the meaning structure was the same for all co-researchers. This suggests
that the context of the experience does not seem to shape dimensions of the lived Loss of Voice experience, although it may be important in understanding what triggers the experience. The apparent finding that the Loss of Voice experience is fundamentally the same regardless of age, race or ethnicity, or even context, is supported by the literature (Brown & Gilligan, 1992; Mazarella & Pecora, 1999; Smolak & Munstertieger, 2002).

**Extracted Themes**

*Difficult Position.* Difficult Position, the first major theme extracted from interview transcripts, reflected an awareness of power and position and, subsequently, a desire to save face. Each co-researcher silently negotiated the best way to be seen as the “ideal girl,” always choosing silence as the safest option. Each girl’s first impulse was to speak freely -- to be strong and say what she thought. Following this initial impulse, each girl enumerated a variety of negative consequences she might suffer for revealing her true thoughts and feelings. Most of the girls also thought of at least one positive consequence for speaking up but all ultimately decided that the benefits of speaking up (i.e., feeling good about self, influencing others in a positive way) were far outweighed by the risks (i.e., loss of opportunity, harsh judgment by others, wanting to be “good”).
This theme aligns well with the research on voice, suggesting that girls place ideals such as likeability, self-sacrifice, the comfort of others, and preservation of relationships above their own needs and desires -- even at great cost to themselves (Smolak & Munstertieger, 2002). As further revealed by the literature, these ideals are ultimately unattainable and, ironically, detract from the very self-image and quality of relationship these girls are trying to protect (Brown & Gilligan, 1992).

The words of many co-researchers in this study appear to reveal this lack of attainability and the ultimate double-bind of losing face and relationship by trying to preserve them. For example, many co-researchers explained that they had too much to lose if they spoke up; yet they would lose all the same by remaining silent. This would appear to limit the intimacy of relationships between girls and their peers and adults. Further, the decision that there is simply too much to lose by speaking up leaves girls with silenced voices -- and girls’ voices, when they are heard, are often weak and lack value in school and society. This desire to be good, not to cause trouble or hurt others, while being unattainable, seemed to leave these girls feeling torn, frustrated, desperate, and ultimately resigned.
Feeling. The second major theme extracted from interview transcripts was Feeling which included both emotional and physical reactions during the Loss of Voice experience. These feelings are well-documented in the literature and reveal the range of negative emotions and reactions girls endure trying to maintain a sense of self while placing the needs of others above their own. Further, from a developmental perspective, adolescent girls often exhibit strong, frequently exaggerated, physiological and emotional reactions. Additionally, adolescence is a time when girls are particularly vulnerable to the opinions of others and seem to respond to an imaginary audience (Elkind, 1967; Newman & Newman, 1999). As several co-researchers reported, “All eyes were on me.”

Many co-researchers in this study stated that they knew they would find themselves in this Difficult Position again in the future. One girl identified this cycle by saying, “If I don’t say it now, she won’t know how I feel, and she will just put me in this position again. It happens all the time.” This cycle of silencing parallels findings showing that adolescent girls experience anxiety and doubt when faced with difficult situations, which interferes with problem-solving skills, leading to further failure, in this case, a failure to speak, leading to more anxiety and self-doubt the next time around (Pipher, 1994). When co-researchers found themselves in Difficult Positions and tried
to decide whether to speak or remain silent, they did indeed experience a range of negative emotions.

*Might Explode.* The third major theme shared by all co-researchers, and an apparent culmination of Feeling, was Might Explode. As girls defer to the needs of others, silence themselves, and judge themselves against a selfless ideal, they must repress their anger (Hart & Thompson, 1996). Further, as girls enter adolescence they adopt a submissive role and are careful not to be too assertive, too loud, or too domineering (Mazarella & Pecora, 1999). It is in this process of repression and silencing that girls reported feeling like they were “just going to lose it.” Might Explode appears to be a culmination of the negative feelings surrounding the Difficult Position in which girls determine whether to be true to themselves or remain silent and safe. It is important to note that, although every girl felt like she Might Explode, might be unable to stop from saying what she was thinking and despite these intense feelings, not one girl said what she thought, thereby upholding the traditionally feminine characteristics of being pleasing, quiet, and nice.

*Not Worth It.* Following the intense emotional experience of determining whether or not to speak, each girl decided that, despite personal costs and potential gains, silence was the best option. Speaking up simply was Not Worth It. The co-researchers were
apparently aware that “speaking up can be dangerous and disruptive. Girls recognize all too well the potential loss...if they do say what they feel and think too forcefully or directly” (Brown & Gilligan, 1992). Six co-researchers said they did not want to be thought of as “bitches” confirming Pipher’s (1994) contention that girls who speak their minds are labeled as bitches by peers and some adults.

**Who Am I?** Girls are faced with societal expectations that tell them to shape themselves, both within and without, to conform to cultural ideals of femininity, of “selflessness” (Gilligan & Brown, 1982). As girls take on a role of selflessness in adolescence, placing the needs and feelings of others above their own, as they lose their assertiveness, they also lose their optimism, become more self-critical, and depressed (Pipher, 1994).

As these girls took on a role of selflessness and silence to preserve their relationships, self image, and future opportunities and as they placed the needs and feelings of others above their own, they became self-critical. This self-critical response to selfless behavior was identified by Pipher (1994) who said that it leads to anxiety and depression. Many girls lose significant ground in terms of self-esteem and confidence during adolescence (Stern, 1990). This is apparent during the Loss of Voice experience, when girls talked about feeling self-hatred and self-loathing because they had not been true to
themselves and felt powerless to change. This powerlessness leads to the final major theme, Nevermind.

**Nevermind.** While censoring experience to establish and maintain safe, intimate relationships (Hart & Thompson, 1996) and preserve self-image and future opportunities, girls reported feeling defeated and decided that it was not worth their effort to think about the Loss of Voice experience anymore. The literature supports the position that adolescent girls often lose the ability to tolerate frustration without becoming overwhelmed (Pipher, 1994). It is possible that the co-researchers were unable to continue to think about their experiences without becoming overwhelmed and, therefore, decided to forget about them. This theme appears to support Brown and Gilligan’s (1992) finding that, as girls move into adolescence, their relationships and experiences become characterized by disassociation and disconnection. As girls move into womanhood, they often do not remember, tend to forget, or even cover up what they experienced as girls. While the girls said the experience of Loss of Voice was “not important,” this researcher does not believe that to be the case. Rather, she believes that the strategy of denial, often used to deal with difficult or painful situations or emotions, was used to cope with the negative emotions and self-recrimination felt during
the Loss of Voice experience. Further research might illuminate this assumption.

Structure and Meaning

The structure of the Loss of Voice experience seems to present a temporal sequence of events. There appears to be an initial process of decision making characterized by intense emotions and physical reactions, culminating in a strong feeling of being on the verge of exploding (Difficult Position, Feeling, Might Explode). This initial segment is quickly followed by a decision not to speak (Not Worth It). Girls then experience a level of self-recrimination and identity questioning (Who Am I?), and finally decide that the experience is not important enough to think about (Nevermind).

As discussed, all the girls said that they wondered who they were or were angry or disappointed with themselves for failing to speak up and be true to themselves. Girls reported feeling intense emotional and physical reactions throughout the process of dichotomous decision making (e.g., should I speak or shouldn’t I – and what are the costs?), the decision not to speak (Not Worth It), and the questioning of that decision and of themselves as people (Who Am I?).

Given the amount of literature on voice and related issues (i.e., depression, selfless behavior, anxiety), the coping strategy of giving up to maintain opportunities, self-image, and relationships is likely to
contribute further to many problems faced by girls in Western culture. Girls who give up their voices reinforce gender role stereotypes in themselves and others. They are likely to experience a lack of intimacy in their interpersonal relationships. Also, this giving up of voice is likely to impact school performance and future academic success negatively leading to fewer life options and reduced career opportunities in adulthood (Pipher, 1994). Women lacking in education tend to be viewed as incompetent and incapable (Yoder, 2002). Additionally, those without education often lack the means to support themselves, leaving them in poverty, dependent on others for financial well-being, and more vulnerable to domestic violence (Yoder, 2002). As they are at risk, so are their children at-risk in a self-perpetuating cycle.

A review of the themes extracted from interview transcripts appear to align well with the existing literature on the experiences of adolescent girls. More importantly perhaps, the results illuminate the meaning structure of the lived experience of Loss of Voice, which has not been reported previously in the literature. This model of the lived experience offers compelling insight into the vortex of swirling emotions and sensations of girls experiencing the Loss of Voice phenomenon. It can be hypothesized that this meaning structure of the Loss of Voice experience in adolescent girls reveals the essence, or
core experience, of a Loss of Voice. This speculation is supported by the fact that variables of age, race and ethnicity, and context failed to demonstrate any disparity in aspects of the experience. A comparison of the themes from the bracketed interviews of the lead investigator, her doctoral colleague, and the 11 co-researchers showed great overlap. Since great effort was made during data collection and analysis to ensure that the experiences of the researcher were not imposed on those of the co-researchers, this outcome can be viewed as evidence that the experience of Loss of Voice is commonly shared. It could be argued that this sharing of themes among all interviews was due to investigator bias. However, the interrater reliability of 96% between two independent thematizers would suggest that the extracted themes reflect the words and experiences of the co-researchers and not those imposed by the lead investigator. Further, the interviews were tape-recorded and transcribed, allowing the investigator and her doctoral colleague to review the interviewer’s comments and questions to determine whether she was leading the interviewee or otherwise inappropriately re-phrasing co-researchers’ words. Neither of these occurred, further suggesting that adequate “bracketing” was used during the interview and analysis processes.
Journals

As stated in Chapter III, each co-researcher was asked to write down her thoughts between the time she was presented with the research question and the time she was interviewed. This request was initially met with enthusiasm, but, ultimately, only one co-researcher actually wrote in her journal. Her writing, rather than recounting thoughts, feelings, or emotions experienced, consisted of anecdotal accounts of interactions during the experience itself (e.g., he was so pushy, he always wants me to help, I did it anyway, I’m never going to help him again). Several possible reasons for this lack of response were considered. First, the investigator may have presented the journaling of thoughts and ideas as optional. Girls were encouraged to write to help them gather their thoughts, but the task was not presented as a necessary part of the process. As one girl stated, “I didn’t think I had to do it!” Second, journaling may have resembled schoolwork and several co-researchers in this study reported already being overwhelmed by schoolwork. Third, the experience itself was often characterized by intense emotion and, subsequently, a desire to deny the intensity and events of the experience. Perhaps the co-researchers found contemplating journaling of the event to be aversive for this reason.
Limitations

The research topic for this study considered the meaning of the Loss of Voice experience in adolescent girls. To minimize limitations, great care must be taken when completing a qualitative research study using an existential-phenomenological approach (e.g., Becker, 1992; Moustakas, 1996; Polkinghorne, 1989). The investigator must establish an awareness of her or his own thoughts and perceptions about the experience under investigation to reduce the imposition of researcher subjectivity during data collection and analysis. Tremendous care was taken during the course of this study to implement an objective data collection and analysis process.

Generalization of results to a larger population is one common goal of traditional research studies. However, the ability to generalize results is not a focus of existential-phenomenological research: Rather the goal is to “provide sufficient enough detail so a reader can connect and understand the experience” (Seidman, 1994). In this study of Loss of Voice, the shared themes extracted and their derived meaning structure may help to create an understanding of the meaning of the Loss of Voice experience. Further, this investigator believes that the model presented (Figure 5) has the potential to represent a universal model of the Loss of Voice experience. This universal representation
embodies generalization – the model may essentially be the same for everyone who experiences the phenomenon of Loss of Voice.

**Future Directions, Purpose, and Summary**

This study, unlike other studies, both qualitative and quantitative, focused not on the “cause” of the Loss of Voice experience, but rather on cognitions, emotions, and sensations contained in the experience itself. Further, while research on the Loss of Voice in adolescent girls has traditionally focused on the comparison of scores on standardized measures, such as self-esteem and depression rating scales, especially by comparing male and female adolescents (Marshall & Arvay, 1999), this study provides a rich and detailed description of the meaning, essence, and structure of the lived Loss of Voice experience, thereby filling a void in the literature.

It is hoped that future research will build upon the results of the present study, given that Loss of Voice is a common phenomenon thought to contribute significantly to a lack of quality and opportunity throughout life. Further, there is a need for further qualitative research in this area so that the detailed experiences of girls can be captured more fully.

The data gathered in this study can be practically applied in several ways. Since there is very little information on prevention or remediation of Loss of Voice in the literature, the use of the present
data in initiation of such programs would be a highly practical application. Programs for young girls to help them retain their voices and also remediation programs that will help older girls find and use their authentic voices again -- and learn to speak confidently and without fear – would be highly relevant uses of the present research information.

Most girls reported intense feelings and emotional reactions during their Loss of Voice experience, yet 10 of 11 girls chose not to think about the experience afterward, even denying its existence. This denial may leave girls vulnerable to future losses of voice since they did not cope with or problem-solve to ensure more effective resolution in the future. An effective cognitive-behavioral intervention and prevention plan using an experiential approach (Cash, 1997) can be formulated from the lived experiences reported in this study. Further, programs using information from the “lived experience” may be much more effective in the prevention and treatment of phenomena such as Loss of Voice (Piran, Levine, & Steiner-Adair, 1999). Data from this study can be presented to girls in a therapeutic environment, allowing them to examine openly their Loss of Voice experiences and make choices and changes in their futures. Further, these data offer a guide to the thoughts and behaviors that may be targeted for therapeutic intervention. Girls may benefit from specific techniques such as role-
playing and dialoguing that allow them to express their authentic thoughts and feelings. Social skills training should be modified to accommodate the different needs of girls. Girls are not likely to benefit from social skills training, often targeted at boys, that teaches silence and accommodating behaviors, rather girls would likely benefit from training that builds skills in assertiveness and speaking up for oneself. Since many girls undergo a change in attributional style during adolescence and they begin not to trust their own judgments and lose the ability to tolerate frustration without becoming overwhelmed (Pipher, 1994), girls would likely benefit from attribution training. Additionally, instruction should include positive self-talk and problem-solving skills to help girls cope with unrealistic self-blame and self-loathing, fears of being judged, or taking responsibility for the thoughts and behaviors others.

These data may also be useful for the development of policy or a curriculum promoting an egalitarian learning environment in schools – one that embraces girls’ authentic voices and experiences. This curriculum would make teachers and school personnel aware of the needs of girls and would promote female role models, embrace the voices and experiences of all students, and give fair consideration to the special needs of girls -- growing up in a society that demands selflessness and unattainable beauty standards for women.
Another consideration worthy of mention is the impact on voice that several girls mentioned after taking part in this study’s interview process. One co-researcher said she realized after talking about her Loss of Voice experience with the investigator that she was much more aware of the Loss of Voice incidents and saw them as less problematic – indeed she found herself much less afraid to speak in class or to tell people what she really thought. “I just started being more honest,” another girl said in an E-mail exchange with the researcher.

Oakley (1981) interviewed expectant mothers and said that these interviewees often reported a “therapeutic effect of talking: getting it out of your system” (p. 50). These women said that being interviewed had impacted them in several ways, including leading them to reflect on their experience after talking about it, reducing their level of anxiety and normalizing their experience, and giving a valuable outlet for expression of feelings. Since feelings of anxiety and being “different from others” are pervasive in the Loss of Voice experience (Gatenby & Humphries, 2000; Hart & Thompson, 1996; Smolak & Munstertieger, 2002), it is thought that talking about this experience in the interview may have benefited the co-researchers. Indeed, two other co-researchers in the third and final meeting with the investigator reported that, after talking about their experiences they experienced a marked difference in the way they expressed
themselves, especially in school. Both girls said that they are talking more, and, as one girl put it, “I am just not afraid anymore. I realized I was being silly, that I was just as important as everyone else, and they felt just like I did. I don’t feel stupid anymore if I get something wrong. I can help other people by asking questions too.” Future research may focus on the impact of open-ended interviewing and potential therapeutic effects.

Finally, a survey or scale may be developed to confirm the incidence and intensity of the Loss of Voice experience in the larger population, facilitating traditional generalization.

In summary, evidence has shown that girls receive an unclear and impossible-to-achieve image of the ideal female through the media, their peers, adults, and society. Trying to live up to this vague and unattainable standard -- one that tells girls to be smart but not too smart, painfully thin yet voluptuous, sexy but pristine -- puts girls at risk for a wide variety of social and psychological problems. Girls, faced with such standards, often find that the only safe strategy is to dumb down and shut up. This investigator believes that the data presented here capture information central to understanding the lives and viewpoints of girls, useful for furthering policy, curricular, and therapeutic changes necessary for the well-being of all girls and the women they will become.
References


Appendix A

Research Question

This research study used an interview format based on the existential-phenomenological method. This method involves using an open-ended question that elicits a detailed description of the experience under investigation. In this study, female adolescents’ experiences with Loss of Voice were examined.

The specific interview question was:

Please think of a specific time when you had something important to say, but did not say it. In as much detail as possible, describe that experience.
Appendix B

Demographic Data Sheet

1. What is your name? ____________________________________

2. How old are you? ____________________________________

3. What grade are you in? ________________________________

4. What is your race/ethnicity? __________________________

5. What groups, sports, or activities are you involved in?
   _______________________________________________________________________
   _______________________________________________________________________

6. What is your favorite class(es)? ______________________
   _______________________________________________________________________
   _______________________________________________________________________
Appendix C  
Informed Consent/Assent

The Experience of Loss of Authentic Voice in Adolescent Girls: An Existential Phenomenological Study

Person in Charge: Deborah A. Cihonski  #(813)866-5447  
Faculty Advisor: Ellen B. Kimmel  #(813)974-9497

Parent/Child Consent Form

The purpose of this research is to gain insight into the experience of the loss of authentic voice from a female adolescent’s perspective.

I, ____________________, give permission for my daughter, ____________________, to voluntarily participate in a series of interviews with Deborah A. Cihonski, M.A., a doctoral student in the University of South Florida’s School Psychology Program. These interviews will occur in three short sessions of approximately 30 minutes each at a location of my choice. All interviews will be audiotaped and transcribed and destroyed at the study’s completion. I understand that my daughter’s identity will be protected and all matters of confidentiality provided. The thoughts my daughter shares during this interview process will not be identifiable by name. Only the researcher, Deborah A. Cihonski, M.A., will have ownership of the audiotapes or transcriptions. Ms. Cihonski retains the right to share portions of the audiotapes or transcriptions (which will be identified by an assigned number) with her advising educational specialist committee member.

I understand that my daughter may experience mild emotional distress during her interview. I understand that she has the right to discontinue the interview at any time without penalty and will be provided with follow-up information. I also understand that my daughter may benefit from sharing her experience with a supportive adult (i.e., a trained School Psychologist), however, I understand that Ms. Cihonski’s role in this investigation is not therapeutic.
Appendix C (continued)

My daughter will receive a $5.00 gift certificate to a local movie theater for her participation. I understand that there will be a total of 10 girls participating in this study.

If I have any questions or concerns I understand I can contact Deborah A. Cihonski, M.A., directly or her major professor, Ellen B. Kimmel, Ph.D. at the University of South Florida. Or, if I have questions about my rights as a person taking part in this research study, I can contact a member of the Division of Compliance Services at the University of South Florida #(813)-631-4498.

- I have fully read or have had read and explained to me in my native language this informed consent form describing a research project.
- I have had the opportunity to question one of the persons in charge of this research and have received satisfactory answers.
- I understand that my daughter is being asked to participate in research. I understand the risks and benefits to her, and I freely give my consent for her to participate in the research project outlined in this form, under the conditions indicated in it.
- I have been given a signed copy of this informed consent form, which is mine to keep.

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<th>Printed Name of Parent Or Guardian</th>
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Appendix C (continued)

Child’s Assent Statement (for children ages 13-16)

I have read the consent form and understand the requirement of the study. I agree to be in this study.

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<th>Printed Name of Child</th>
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Investigator Statement

- I have carefully explained to the Parent(s)/Guardian(s) the nature of the above protocol. I hereby certify that to the best of my knowledge the Parent(s)/Guardian(s) signing this consent form understands the nature, demands, risks and benefits involved when consenting to this study.

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Institutional Approval of Study and Consent Form

This research project/study and informed consent/assent form were reviewed and approved by the University of South Florida Institutional Review Board for the protection of human participants. This approval is valid until November 2003. The board may be contacted at #(813)-974-5638.
Appendix D

Field Notes

11/23/02 Bracketing interview
Since my colleague and I had a strong base of trust with each other and had previously discussed our Loss of Voice experiences, recounting them in more detail was fun and interesting. I was struck by the similarities in our experiences although they occurred in very different contexts and with different people.

12/19/02
The first three interviews. These girls were eager to talk – although one informed me that her mother warned her she would be “taken advantage of” if she took part in a research study. Her mother had not expressed this to me and I wondered if this girl was going to guard her words closely to avoid this. She seemed very open, however, and I feel good about two of the three interviews (including hers).

12/22/03
Fourth interview: Girls are reporting over and over how angry they feel about their experiences, and how helpless as well. They seem to think there is no right answer and they will lose no matter what they do. They would rather take the burden of loss on themselves personally. Self-sacrifice. I am learning that keeping girls on-track is hard work, and too much redirecting stunts the conversation. The girls seem to like giving lots of detail and contextual information. I will have to let these girls talk and ramble a bit and parse out what’s needed later in relation to Voice. This girl’s mother asked her daughter after the interview, now that she had talked about her Loss of Voice, if she was going to be “all uppity and start getting into trouble for talking too much.” Amazing how quickly expectations were reinforced by another female.

01/04/03
This was an interesting and powerful interview. This girl, for 13 years old, had quite a conception of the power structure in place at school and in society – she even used the terms “power structure” and “hierarchy”. She is convinced that, in adulthood, things will be better. She says she wanted to punch herself in the face for not answering a
question in class and that she had “no self-esteem, like none at all.” It was a shock for me to see such a bright girl – the “typical” picture of happiness, beauty, and health – feeling this way about herself. This was the first time I felt a really strong desire to “counsel” a co-researcher. It is hard to simply listen! I did talk with her after the interview about the concept of Voice and my interest in it, although I left the self-esteem issue alone. She said she was very relieved that she was not alone. Apparently, she had a hard time believing that I had experienced a Loss of Voice as well.

01/07/03

Fifth and sixth interviews. The first was a recount of a school experience but the other was of a girl finding out some very private family information and feeling she could not express herself because of her mother’s fragile emotional state. What a corner to be in! The sixth interview was another where it was difficult not to interrupt and counsel – or at least offer resources. I am getting better at getting girls to elaborate, our interviews are more like conversations now and are really flowing. Things aren’t as “serious” and the girls are able to laugh while they share, rather than just recount their experiences in a sad tone – I feel like their talking is giving them some real insights into the experience. Almost every girl has said that she felt “better” after talking.

01/12/03

I am starting to see patterns in the interviews, and hearing similar statements: “A tough position”, “I hated myself”, “I was gonna lose either way”.

I am starting to notice more and more silencing of girls around me when I am observing at schools and when I am just out places – even at friends’ houses.

01/17/03

These girls report feeling really powerless. The frustration is so evident in all of them with the same result, even through their anger and despair: silence.

02/17/03

Transcribing the tapes had been a chore! I think it has been good for me to hear them again and put them to paper myself. Patterns are emerging and re-emerging. My bracketing partner and fellow graduate students has reported that the interviews are powerful and sad.
Appendix E

Thematic Analysis

A. Read the transcription in its Entirety

B. Mark Off Tentative Thematic Units
   a. Identify “units of significant meaning” avoiding transition words <Bracket>

I. Chart Tentative Thematic Units
   a. Write units on a different piece of paper grouping them by “what fits together”

II. Clustering the Units
    a. Connect – chart the units by linking similar units together
    b. Check – check the chart against marked transcriptions for any missing units
    c. Group – group the themes that seem to “hold together”
    d. Number – number the themes on the chart and in the transcript as well
    e. Name – name the themes according to “sorting factors” – preserve the co-researchers’ words

III. Tally

IV. Summary
    a. Summarize the speaker’s experience

V. Determine Reliability
    a. Compute the percentage of total agreement between two thematizers
    (Polkinghorne noted that a measure of reliability is determined when the researcher “checks back” with the co-researchers to make sure their expressions were captured fairly and accurately).

VI. Consider Superordinate Structures
    a. A certain set of themes that occur across interviews
CURRICULUM VITA

October 28, 2002

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EDUCATION:

August 2004  Ph.D.  School Psychology
(anticipated) University of South Florida, Tampa*
GPA  4.0

July 2003   Ed.S.  School Psychology
University of South Florida, Tampa*

June 1994  M.A  School Psychology
University of South Florida, Tampa*
GPA 4.0 (Honors)

June 1993  B.A.  Psychology
Indiana University, Bloomington
Honors

*Accredited by the American Psychological Association and approved by the National Association of School Psychologists.
Areas of Interest: Teaching

Gender and Women’s Issues
Adolescents’ Learning and Development
Human Relations Skills in Counseling
Child Development
Pediatric Health Disorders
Neuropsychology

Areas of Interest: Research

Pediatric Health Disorders
Gender and Women’s Issues (voice, oral narrative)
Adolescent Learning and Development
Childhood Cancer and Sibling Adjustment
Cranial Irradiation and Learning
Educational Legislation and Reform

Professional Affiliations

American Psychological Association
National Association of School Psychologists
Florida Association of School Psychologists
Psi Chi National Honor Society
Phi Kappa Phi National Honor Society

Honors and Awards

Nominee, Outstanding Teaching Award, University of South Florida, 2003
Nominee, Outstanding Teaching Award, University of South Florida, 2002
Academic Achievement Award, Division of Arts and Sciences, 1993, Indiana University
Award of Superior Scholarship, Indiana University Women, 1993
Dean’s List, 1990-1993, Indiana University

Current Positions

2003-Present School Psychology Advanced Practicum, The Ophelia Project Tampa Bay, Tampa FL
Responsibilities include design of curriculum for adolescent girls on topics such as relational aggression, peer pressure, drug abuse, suicide,
support systems, values and beliefs, self-acceptance, decision making, leadership skills, and school drop-out prevention. Facilitated groups at Tampa Parks and Recreations with the Tampa Girls’ Club using the Owning Up and Girls’ Circle curriculum. Developed the “For Girls Only” seminar, a 2-hour seminar for girls going into middle school, also developed a peer mentor training program for middle and high school girls, and developed “Story Performing for Girls” workshop, teaching girls the art and value of oral narratives and helping them find their voices, identify their own values and life stories to empower themselves and teach other girls. Identify and write grants to secure funding for new projects, recruit girls for various workshops and discussion groups, Participated in the Speakers Bureau talking to groups of girls, parents, educators, and other adults about issues faced by adolescent girls in our culture.

2003-Present School Psychology Practicum, Dr. Don Kincaid, Division of Applied Research and Education Support, Department of Child and Family Studies, Louis de la Parte Florida Mental Health Institute, University of South Florida, Tampa FL
Responsibilities include working with individual students, teachers, and school personnel, completing Functional Behavior Analyses, creating Person-Centered Plans, and designing and helping implement classroom-level positive behavioral support (PBS) plans, conducting trainings for educators on school-wide PBS, and assisting in implementation of school-wide PBS systems. Also designing and implementing behavioral support plans for individual students with emotional and behavioral difficulties. Helped schools enter discipline data into a national database (SWIS-II).

2001-Present Graduate Teaching Assistant, Department of Psychological & Social Foundations, University of South Florida, Tampa, FL
Major responsibilities include teaching multiple sections of MHS 4052, Human Relations in Counseling and EDF 4131, Learning and the Developing Adolescent. Duties include: devising
syllabi, planning lectures and experiential learning activities, and grading students.

**Previous Professional Experience**

**2002-Present**  
**Evaluator, Florida Diagnostic and Learning Resources System (FDLRS).**  
Participated in monthly developmental screenings of preschoolers. Administered the Brigance Early Childhood Screener and answered parents’ questions regarding the development of their children.

**2001**  
**School Psychology Psychoeducational Evaluator, Pinellas County, Florida**  
Responsibilities included academic assessment and diagnosis of emotional disturbance, consultation (with teachers, parents, and administrators), individual and group counseling

**1995-1996**  
**School Psychology Intern, Pinellas County, Florida**  
Responsibilities included academic assessment and diagnosis of emotional disturbance, consultation (to teachers, parents, and administrators), individual and group counseling (anger management, loss and bereavement, social skills, self-esteem, and substance abuse), and in-service presentations. Served in two Chapter 1/Drop-out Prevention Schools with at-risk youth, a pre-Kindergarten Autism/Low Incidence Unit, and provided services to students in preschool, elementary, middle, high, and alternative school settings.

**1993-1995**  
**School Psychology Practicum, Polk County, Florida**  
Served in Project Achieve and Chapter 1 elementary schools. Responsible for administration of standardized tests and curriculum-based measurement probes, designed, implemented, and evaluated academic and behavioral interventions, conducted anger management and social skills training. Experiences include observing and working in various special education, general education, and
low-incidence classes and conducting home visits with county social workers.

1994  School Psychology Practicum, University of South Florida Children’s Center, USF, in conjunction with local private schools. Served in a private school, grades pre-K through 12, in conjunction with the Children’s Center at the University of South Florida. Completed a comprehensive case study with a kindergarten student with special needs at risk for retention.

1993-1994  School Psychology Practicum, Dover Elementary School, Dover, FL Responsibilities included administration of standardized tests and curriculum-based measurement probes and consultation with teachers and administrators. Experiences included observing and working in various special education, general education, and low-incidence classes and conducting home visits with county social workers and the school psychologist.

1992-1993  Court Appointed Special Advocate, Lake County, Indiana Served as an advocate in the county court system for children ages birth to 17 years. Responsibilities for each child included a review of case literature, meetings with the child and family, and appearances in court to represent the interests of the child.

Research Experience

1993-1995  Graduate Research Assistant, The Institute for At-Risk Infants, Children, Youth and their Families at the University of South Florida, Tampa, FL. Responsibilities included compilation and review of data collected from Florida’s 67 school districts regarding the need for health care services among the states most impoverished children and families.
1993-1995 Graduate Research Assistant, The Institute for Instructional Research and Practice, University of South Florida. Responsibilities included preparing and reviewing information on Florida’s Chapter 1 schools. Responsible for survey preparation, data collection and analysis, report editing, and attending local and state Department of Education conferences while organizing data collection procedures and instruments.

University Service

2001-Present Consultant, Banyan Family Center for Special Needs Adoptions, Florida Mental Health Institute, University of South Florida, Tampa. Served as a consultant in special needs adoption cases involving academic and behavioral difficulties at home and school.

October 2002 Guest Speaker, Educational Leadership Honors Seminar on Research. Presented both academic and personal perspectives on the discovery and development of research topics and questions including finding interesting and compelling questions in everyday life and determining both personal and social relevance of topics and questions in students’ fields of study.