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“Shaking It Off” and “Toughing It Out”

Socialization to Pain and Injury in Girls’ Softball

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Ignoring injuries and playing through pain are expected in organized sports. But how do novice athletes learn these social norms? Using participant-observation research focusing on adolescent girls who participated in recreational softball, this study reveals how the clash of norms between traditional femininity and the sport ethic sheds light on the socialization process. In addition to shaking off their own injuries, coaches ignored the girls’ complaints, made jokes when the girls experienced some pain, and told them directly to shake off their minor injuries. Even though many of the girls entered the activity with traditionally feminine attitudes toward pain, most conformed to the norms of the sport ethic and learned to deal with pain and injuries by “shaking them off” and “toughing them out.” Those girls who were more enthusiastic about playing softball and who displayed stronger commitments to the softball-player identity were more likely to display these norms.

Keywords: *socialization; injury; pain; sport; sport ethic; gender; athlete; adolescent; youth*

After fracturing his kneecap during the floor exercise at the 1976 Olympics, gymnast Shun Fujimoto went on to complete both the pommel and the rings to clinch a team gold medal for Japan. In 1985, NFL defender Ronnie Lott severely injured his finger while making a tackle. Surgery to save his finger would have meant an early end to his season, so Lott chose to

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have his finger amputated instead. During the 2004 World Series, Boston pitcher Curt Schilling's bloody sock was the center of attention. Surgery to repair Schilling's ruptured tendon sheath should have kept him off the mound, but team doctors used a local anesthetic and temporary stitches before every performance so that Schilling could pitch in the series. In the sporting world and beyond, stories such as these are offered up as motivational tools.¹ Athletes who show their gritty determination by playing through the pain are cultural heroes. But these heroes are not born; they are made. Their callous attitudes toward even extreme pain are the result of cultural messages that are reinforced throughout their sporting careers.

There is a relatively large and growing body of sociological research on pain and injury in sports. From Little League baseball to big-time college wrestling to professional rugby, pain and injuries in sports are normalized as athletes uphold the norms of the sport ethic (Albert 2004; Curry 1993; Curry and Strauss 1994; Fine 1987; Howe 2001; Hughes and Coakley 1991; Roderick, Waddington, and Parker 2000). While much is now known about athletes' attitudes toward pain and injury and how others within the sporting world, such as coaches and trainers and even the media, work to enforce the sport ethic and make it possible for athletes to play through the pain (Nixon 1992, 1994; Safai 2003; Walk 1997, 2004), most of this research focuses on male athletes, and that which looks at female athletes tends toward highly experienced, elite competitors. As a result, virtually all of the research on pain and injury in sports looks at athletes who have already internalized the sport ethic. The norm of shaking off injuries and playing with pain is one that is already shared by the participants. According to the research, this is simply what athletes do.

But athletes do not necessarily start out with this attitude. Many young athletes participating in recreational youth sports enter the sporting world unaware of the sport ethic, and only after they begin competing do they begin to learn the brazen approach to pain that it demands. In this article, I fill a gap in the literature by examining how young, female athletes participating in entry-level recreational sports are introduced to the sport ethic and gradually learn to shake off minor injuries and pain. Using participant-observation research, this study reveals how the clash of norms between traditional femininity and the sport ethic sheds light on the socialization process. In doing so, this study identifies a variety of strategies that were used by coaches (and occasionally by the girls themselves) to teach the traditional ballplayer attitude toward pain. Even though many of the girls in this study entered the activity with traditionally feminine attitudes toward pain, most conformed to the norms of the sport ethic and learned to deal with pain and minor injuries by "shaking them off" and "toughing them out."

Literature Review

Experiencing pain or suffering an injury is a normal part of sports participation. From the Little League baseball players who respond with “studied stoicism” to injuries (Fine 1987, 48) to the middle-aged recreational cyclists who show more concern for the condition of the bike than the well-being of its rider following a crash (Albert 1999, 2004), pain and the threat of injury are seen as a simple fact of sport. Nixon’s (1996) study involving 156 college athletes found that nearly all of them, on at least one occasion in their athletic careers, had continued to play sports in spite of a serious injury. That health professionals and medical equipment are part of the landscape at intercollegiate sporting events further testifies to the normalization of injury in sports (Curry and Strauss 1994; Walk 2004).

Playing with pain is a key principle of what sport sociologists have termed the “sport ethic,” a set of ideas that together comprise norms of traditional athleticism. Also included in the sport ethic are the beliefs that athletes make sacrifices for the game, that they always strive for distinction, and that they refuse to accept limits in the pursuit of their dreams (Hughes and Coakley 1991). Athletes who adhere to the sport ethic must focus both on proving themselves (through competition and performance) and on improving their abilities. Improvement comes through hard work, which, according to the sport ethic, necessitates enduring and even learning to welcome pain. For those athletes who are fully committed to the sport ethic, little distinction is made between minor body aches associated with rigorous physical exertion and more serious pain that signals the onset of a potentially debilitating injury.

Much of the research on pain and injuries in sports suggests that playing with pain is crucial for an individual to claim an athletic identity. Sometimes, the decision to continue playing despite an injury is driven simply by a desire to maintain one’s sense of self as an athlete (Pike and Maguire 2003; Pike 2004). However, it is clear that there is more at stake than just the athlete’s self-perception. Athletes who complain about pain and injuries risk negative sanctions that include being ignored by teammates and coaches, being ridiculed or otherwise stigmatized, and being dropped from the team (Charlesworth and Young 2004; Kotarba 2004; Roderick, Waddington, and Parker 2000; Ryan 1995; Singer 2004; Walk 1997; Young, White, and McTeer 1994). Conversely, athletes who play with injuries demonstrate their commitment to the sport, their teammates, and their training (Curry 1993; Pike 2004; Theberge 2003). As a result, they are rewarded with camaraderie, an elevated social status, and in some instances, financial incentives such as

professional sports contracts and sponsorships (Charlesworth and Young 2004; Donnelly 2004; Sabo 2004; Sabo and Panepinto 1990).

A significant amount of research is focused on the question of whether male and female athletes respond differently to pain and injuries. Sociologists have long recognized the strong connection between the sport ethic and traditional norms of masculinity (Frey, Preston, and Bernhard 2004; Hutchins and Mikosza 1998; Messner 1990; Nixon 1996). Singer's (2004) study of a youth corecreational basketball league found that while both the girls and the boys recognized that athletes needed to tolerate pain, the boys were more likely to hold themselves and their teammates to more restrictive standards of appropriate responses to injuries. Stoically playing with pain is one socially acceptable way to demonstrate masculinity, and for many male athletes, adolescent boys in particular, experiencing an injury and playing through pain are seen as a badge of manhood (Eder, Evans, and Parker 1995; Eder and Parker 1987; Fine 1987; Gard and Meyenn 2000; Nixon 1996; Sabo 1998; Young, White, and McTeer 1994). As Sabo and Panepinto (1990) explain, physically aggressive sports such as football serve as male initiation rites. Not only do participants in these sports view pain as inevitable, but they glorify pain and point to their shared experience of pain as a distinguishing feature that sets them apart from and above women as well as men who do not participate in the sport.

So how do female athletes respond to pain and injuries? Much of the evidence suggests that when it comes to playing through the pain, gender matters very little (Charlesworth and Young 2004; Nixon 1994; Pike and Maguire 2003; Sabo 2004; Young and White 1995). Just like their male counterparts, female athletes tolerate pain and continue to compete while injured to maintain their athletic identities, to avoid negative sanctions, and to win the respect of their teammates, coaches, and fans. Despite their similarities in behavior, there is some evidence that female athletes hold slightly different attitudes toward pain and injury. In his interviews with male and female former athletes, Sabo (2004) found that female athletes were more likely to discuss injuries with their teammates. Perhaps more significantly, Sabo's interviews also revealed that while the male athletes generally failed to recognize any connection between the norms of masculinity and the sporting world's glorification of pain and injuries, the female athletes expressed both awareness and criticism of this connection, even as they continued to play with pain.

Another difference can be found in society's reaction to athletes' injuries and risky behavior. In his examination of risk taking in sport, Donnelly (2004) discusses the case of Alison Hargreaves, an accomplished mountain climber and mother of two. Hargreaves died during a climb in 1995. Follow-

ing her death, she was roundly criticized in the media for irresponsibly orphaning her children, a reaction that is rarely seen when male mountaineers (many of them fathers) die in pursuit of their dreams. Similarly, the story of gymnast Kerri Strug provides yet another example of society's ambivalence when it comes to pain and injuries in women's sports. During the 1996 Olympics, with the gold medal on the line, Strug injured her ankle on her first vault attempt. Believing that she needed a solid score on her vault for the U.S. team to clinch the gold medal, Strug limped back to the apparatus, gritted her teeth, and completed her second vault. After landing with a grimace, Strug turned to the judges and flashed a quick smile while raising her arms to indicate that her jump was complete. Then she fell to the mat, sobbing and in extreme pain.

Much like Fujimoto, Lott, and Schilling in the previous anecdotes, Kerri Strug was immediately hailed as a heroine. She had placed her team above herself and won the gold medal for the United States. While Strug's courageous act illustrates elite female athletes' acceptance of the sport ethic, the aftermath of her pain-defying leap reveals society's double standard about women and pain. Even as her courage, competitive spirit, and dogged determination were celebrated, it was not long before Strug's decision to attempt the vault was questioned. Newspapers, magazines, and television reports suggested that perhaps she had not made the right choice, and individual Americans wrote letters to editors around the nation expressing their belief that a more courageous decision would have been for Strug to acknowledge her injury and decline her second attempt at the vault (*People Weekly* 1996; Posey 1996; Starr 1996; *New York Times* 1996; Zoglin 1996).²

How is it that experienced athletes like Kerri Strug embrace the norms of the sport ethic, even in the face of such societal ambivalence? Research reveals that numerous actors within the sporting community play important roles in helping athletes maintain their devotion to the norms of sport (Nixon 1992, 2004; Roderick 1998). Although parents may introduce young athletes to the sport ethic, coaches, trainers, physicians, sports commentators, teammates, and other athletes all serve to reinforce this ethic and its attitude toward pain and injury. They do this by overtly exerting pressure on athletes to play in spite of an injury (Curry 1993; Roderick, Waddington, and Parker 2000; Young, White, and McTeer 1994), by providing painkillers and temporary remedies (Curry and Strauss 1994; Nixon 1992; Roderick, Waddington, and Parker 2000; Safai 2003), by imposing sanctions on athletes who sit out a competition because of an injury (Nixon 1992; Noe 1973; Roderick, Waddington, and Parker 2000), and by glorifying the actions of athletes who play with pain (Nixon 1993). While a significant body of research is devoted to understanding how the sport ethic is maintained, most of this work focuses on rela-

tively elite athletes who have already internalized the norms of sport. But how did they get to this point? How do novice athletes learn the sport ethic?

A number of studies have come close to answering this question, yet a combination of inadequate methodologies and their focus on the wrong athletes—athletes of the wrong gender, wrong age, or wrong experience level—has kept them from being able to shed light on this learning process. For example, Curry's (1993) retrospective interviews with an elite amateur wrestler trace the athletic career of "Sam," starting with his first experiences with sports injuries in tee-ball. This research provides a valuable account of how an athlete's orientation toward pain and injuries shifts over the course of his sporting career. However, because the interviews are based on recollections rather than firsthand observations, Curry is unable to provide an in-depth look at the social interactions that form the core of the socialization process. Fine's (1987) ethnographic study of Little League baseball would seem to provide the perfect opportunity for illustrating this process. Yet it quickly becomes clear, from Fine's descriptions of the boys' reactions to injuries, that despite their young ages and relative inexperience with sport, they have already acquired the norms of the sport ethic. This is not surprising, given that socialization to masculinity and to the sport ethic tends to occur simultaneously and to be mutually reinforcing for boys. Because enduring pain is one socially acceptable way to demonstrate masculinity, it is not unusual for young boys to learn to discount pain and injuries outside of the sporting arena. Thus, any study of young male athletes' socialization to the sport ethic is complicated by the fact that the wider cultural expectations of males in American society tend to obscure young male athletes' socialization to the sport ethic.³

In contrast, girls who participate in sports are more likely to experience a collision of norms that sheds light on the socialization process. Yet the current literature on female athletes tends to overlook novice athletes in favor of more experienced and elite athletes who have already internalized the sport ethic. While Ryan's (1995) exposé of women's gymnastics and figure skating focuses on young athletes, the Olympic hopefuls featured in her work are anything but novices to the sporting world and its "no pain, no gain" belief system. The adolescent female recreational basketball players in Singer's (2004) research are closer to the target, but even they seem to have already embraced the sport ethic's ideas about playing with pain. Hunt's (1995) research on novice deep-sea divers discusses the ways that the newcomers are socialized into the diving subculture as they learn to expand their ideas about risk and potential injury. But even though the divers in Hunt's research are new to this particular sport, it is clear that they are experienced with the broader sporting world and its behavioral and attitudinal norms.

What the current literature lacks is an in-depth look at young female athletes at the beginning of their athletic careers who are just being introduced to the sport ethic's stoic attitude toward pain and injury. Because society's traditional norms of femininity collide with the norms of sport, an ethnographic study examining the experiences of novice female athletes is ideally suited to illustrate the process of socialization to the sport ethic. The research presented here focuses on the experiences of preadolescent and adolescent female softball players as they encounter cultural messages about how to deal with minor injuries and pain. This article describes the girls' socialization experiences and identifies a variety of strategies used by coaches to teach the traditional ballplayer attitude toward pain and injury. In doing so, this study shows that even though many of the girls initially feared pain and complained about minor injuries, their coaches and teammates encouraged them to shake off their pain and tough it out. While some of the girls resisted the message, many of them eventually adopted this attitude.

Method

This research is based on data collected for a broader participant-observation study investigating girls' reactions to the cultural contradiction of female athleticism. In this research, I focus on preadolescent and adolescent girls who participated in an organized, recreational, slow-pitch softball league. For three years, I acted as an assistant coach with Metropolitan Girls Softball, a nonprofit, community-based organization located in the center of a medium-sized southern city that sponsors softball for approximately 250 girls between the ages of four and sixteen.⁴ In 1996 and 1997, I assisted a team composed of eleven- and twelve-year-old girls. In 1998, I was an assistant coach for a team made up of girls ranging in age from thirteen to sixteen years. In all three of those years, I acted as a participant-observer, both coaching and taking detailed field notes of team practice sessions and league games.⁵ Of the thirty-five different girls who played on the teams that I coached during the three summers, only four played on the same team more than one summer and only one played all three summers.

The girls who participated in Metropolitan Girls Softball during the three years of this research were diverse in terms of both social class and race. They represented children from lower-class, working-class, and professional-class backgrounds. The league was evenly split between African American and white participants, with a few Latina participants. Because the league was heterogeneous in terms of both class and racial composition, it better reflected the diversity in youth sports than many of the previous stud-

ies of children's experiences in sporting activities (Chafetz and Kotarba 1995; Fine 1987; Ryan 1995), which were conducted in overwhelmingly white, middle- and upper-middle-class suburban areas.

This study relies on a sample of convenience. For the most part, the data included here reflect my observations of girls who played on the teams for which I acted as an assistant coach. While this sample reflects the league's diversity in terms of social class, it is not as racially diverse as the league itself. Although most of the teams in Metropolitan Girls Softball were racially mixed, they were not necessarily reflective of the league's overall composition of approximately 50 percent white and 50 percent African American participants. Instead, most teams tended to be either majority white or majority black, with the team's racial composition mirroring the racial composition of its coaching staff. As a white woman helping to coach a team led by a white man, it is not surprising that the teams with which I worked had a majority of white players. Thus, roughly three-quarters of the girls featured in this study were white, while approximately one-quarter were African American.

In many ways, an observational study of girls' youth sports is ideal for gaining insight into how athletes are socialized into the sport ethic and the traditional ballplayer attitude toward pain and injury. As mentioned previously, the conflict between traditional norms of femininity and the norms of the sport ethic creates a unique window for viewing the socialization process more clearly. In addition, observational research is particularly well suited for examining processes that unfold over time (Emerson, Fretz, and Shaw 1995). Novice athletes do not learn the sport ethic at one point in time. Rather, their socialization to the subculture of competitive sports is a dynamic, interactive process. Consequently, observational methods are better situated for capturing the more subtle, interactive aspects of this process than are other research methods such as interviews and survey instruments that collect data at discrete points in time. Finally, ethnographic research methods allow the researcher's own behavior and emotions to provide important information and insight into the setting (Bernard 2002; Emerson, Fretz, and Shaw 1995; Wieder 1983). In the case of this research, my role in the field and my own reactions to the girls' complaints of injuries were crucial in leading me to think more deeply about the ways that traditional norms of femininity were colliding with the sport ethic. As I began my observations, I had no intention of focusing on how the girls learned to react to injuries and pain. As an experienced athlete, I was familiar with the ideas of the sport ethic and had never thought about how or when I had learned these behavioral norms. However, as an assistant coach, I found that I was irritated by the girls' complaints about bumps and bruises, and a great deal of my energy was focused

on assessing the girls' minor injuries and teaching them the socially appropriate way to deal with them. It was only in my role as a participant-observer and analyst that I began to take a critical view of these norms and began to pay close attention to my own and others' reactions to the girls' experiences of injuries and pain.

It is important to note that the pain and injuries described in this study are very different than those dealt with in much of the previous research. Somewhat surprisingly, the sociological research focusing on the sport ethic and reactions to injuries rarely defines what constitutes an *injury*. When this term is defined, it is usually applied only to serious events that force athletes to miss a number of practices or games. In one study, *injury* is defined as "any trauma that requires medical attention or prevents or substantially modifies training or competition for at least 72 hours" (Taft 1991, 430). Without exception, the incidents described in this article would not be considered injuries according to the definition provided by Taft. In fact, the girls participating in Metropolitan Girls Softball rarely sustained injuries that required any medical attention whatsoever, and rather than sidelining them from competition for days, the typical injuries that are discussed in this article may have halted team practices or league games for a matter of minutes before all participants were ready to continue. Despite this difference in the severity of injuries, the norms for reacting to pain seem to be the same. That the young athletes described here are learning to deal with minor bumps and scratches only underscores the point that they are newcomers to the sport ethic and that their socialization to the subculture of competitive sports is ongoing.

Learning to Deal with Pain

During softball practices and games, coaches and others introduced the girls to the idea that an athlete should accept minor injuries and pain as a part of the game and should learn to shake off the pain and tough it out. Although some girls were resistant to this message and clearly preferred to call attention to their injuries and withdraw from the action when they were hurt, over the course of the season, many of the girls eventually adopted this traditional ballplayer attitude. They recognized that pain was a part of the game, and they learned to approach minor injuries with stoic courage.

Early in the season, many of the girls' actions suggested that they did not have a strong sense of the sport ethic and the traditional ballplayer's approach to pain and injury. Some of the girls, particularly those who were new to the game of softball, were reluctant to place themselves in the way of a thrown or batted ball out of fear that they might be hurt. As my field notes reveal, during

one team practice, Vanessa had particular trouble fielding the ball. This was not because she lacked the skill to make the play but rather because she lacked the courage. Once, when a ball was hit hard on the ground to her, she ran away. Another time, Vanessa recoiled, pulling her arms in close to her body so that she would not be struck by the ball. A third time, Vanessa let out a surprised and scared, "Whooooo!" as the ball whizzed past her. Other girls also had trouble gathering the courage to make the play, and it was not at all uncommon for them to step toward a ball to field it and then to step out of the way or to back away from it just as it approached them. At one point, the team's head coach turned to me and stated the obvious: "Becky is afraid to get under the ball."

Some of the girls, even those who were skilled players, used minor injuries as attention-getting devices. Katheryn was one of the better players on the 1996 team and was also selected to play on the league's traveling all-star team. Despite her greater athletic talent, she also was among the girls more likely to complain about being hurt. It became obvious to me that her complaints were geared toward attracting attention when she fielded a grounder at third base, threw the ball across the field to first base, and loudly said, "OUCH!" as she motioned toward her throwing arm and shoulder. Katheryn then looked around as if to gauge other people's reactions to her, and when she realized that no one was paying her any attention, she turned back to fielding her position without complaining anymore about her arm. On another occasion, Angela, Caitlin, and Trudy were practicing in the outfield. Angela, who was also an all-star player, seemed to be demonstrating the sport ethic when she caught a hard-hit line drive in the palm of her glove (where it is more likely to hurt) rather than in the webbing. Angela's eyes grew wide when she made the catch, and she immediately dropped her glove and shook her hand as if to shake away the sting, but Angela said nothing and made no complaint. However, this show of courage in the face of pain soon turned into a mischievous game that mocked the idea of shaking it off. On the very next play, the team's head coach, Joe Meadows, hit another fly ball to the outfield that Caitlin caught and then reacted as Angela had, dropping the ball and her glove and silently mouthing, "OUCH!" Caitlin did this a second time, Trudy joined in on her next attempt at catching the ball, and then Joe hit another ball back to Angela, who also mimed an injury. For these girls at this moment, having fun and calling attention to themselves were much more important than upholding the norms of the sport ethic and acting as though they were impervious to pain. What these and other examples from my observations show is that many of the softball players were afraid of being injured, did not take seriously the idea that athletes should downplay pain and injuries, and were willing to use minor injuries to place themselves at the

center of attention. As a whole, the girls who participated in Metropolitan Girls Softball did not enter the league already socialized to the norms of the sport ethic.

Strategies for Teaching and Reinforcing the Sport Ethic

Whether the girls' reactions were motivated by a genuine fear of injury or rather by a desire to elicit attention and sympathy from others, the above examples demonstrate that many of them, at least in the beginning, did not approach the game with a traditional ballplayer attitude toward pain and injury. However, the girls' initial complaints and concerns about minor injuries usually led to a period of negotiation in which the coaches, and occasionally their teammates, would begin to teach the girls that ballplayers ought to react to pain stoically, without complaining or excessive attention-seeking behavior. Coaches used several different strategies to introduce the traditional ballplayer approach to pain and minor injuries. Among these were simply ignoring the girls' complaints, making light of the girls' complaints through teasing and jokes, telling the girls directly that they should shake off the pain and not complain, and teaching the girls by example by downplaying and not complaining about their own experiences of pain.

A common indirect strategy coaches used was to downplay and sometimes ignore the girls' complaints. This strategy was often used early in the season with novice softball players, though it could be used at any time and with a girl who had several years of ballplaying experience. For example, I was acting as first-base coach during one game in 1996 when Trisha hit a single. As she stood on first base, Trisha complained to me that her finger hurt, and I did not respond to her. Instead, I consciously and deliberately ignored her complaint. In my mind, Trisha was not acting appropriately. I hoped that by ignoring her comment she would drop the subject and focus on the game. As a coach, I viewed the girls' complaints as distractions that interfered with the task of teaching softball skills and strategy, but I also came to realize that my irritation with the girls' "inappropriate" behavior signaled a larger conflict with the norms of the sport. If they wanted to be softball players, the girls needed to learn to tough it out, and as a coach, I did not want to reinforce their improper behavior by paying attention to their minor injuries.

When ignoring or redirecting attention away from the girls' minor injuries did not work and the girls continued to complain, coaches often turned toward teasing the girls and joking about their pain to convey to them the idea that ballplayers should accept pain and minor injuries as part of the game.

One common reaction was for coaches to suggest that pain was a pleasant or positive thing. On a chilly day early in the season, Mary hit the ball off the end of her bat, causing her hands to sting. When Mary quickly dropped the bat and held her hands together with a pained expression on her face, Joe said to her, "That feels good, doesn't it?" Joe made this same comment two years later when Brenda hurt her hand after catching a thrown ball in the heel of her glove. However, this time, Joe made the comment only after first ignoring Brenda's outburst. Joe kept his back turned as Brenda shrieked, jumped around, and shook her hand. Several seconds later, Joe turned toward Brenda, smiled, and said loud enough for all the girls to hear, "It feels good, doesn't it?" On another occasion, Katheryn was struck in the back by an errant throw, and she was given an ice bag to lessen the pain. As Katheryn leaned against the fence with the ice bag draped over her shoulder, Joe walked past and said, "When they say duck, you're supposed to scrunch down like this. Instead you just said QUACK!" Joe was not the only coach to take a joking attitude toward pain. After a hard-hit line drive that made it through the infield for an easy base hit, Laura stood on first base. As usual, I was in the first-base coaching box, and I congratulated her for her hit. Laura turned to me and reported that her hip was hurting, and she started rubbing and massaging her hip. Rather than asking how the injury had occurred or asking how badly it hurt, as I felt Laura wanted me to do, I responded by telling Laura in a teasing voice that she had been hitting the ball really well this game and that perhaps she should bat with a hurt hip more often.

A third strategy that coaches used was to tell the girls directly that the injury was not a big deal and that they should simply shake it off and continue to play the game. Often, these statements would send the message that the practice or game situation should be taken seriously. In the coach's mind, there was no reason for the complaints, and the girl should not waste time by fretting over a minor injury. In most cases, this type of reaction occurred only after other strategies had also been used and failed to change the girl's behavior. In addition, coaches who used this strategy seemed to do so when they had run out of patience. Often, their words were harsh and their body language indicated a heightened state of irritation and frustration. In one example, Becca was complaining that her hands hurt. I realized that Becca's pain was caused by the fact that she kept hitting the ball off the end of the bat, so I showed her which part of the bat should be striking the ball. However, part of the reason Becca was hitting the ball wrong was because she kept stepping away from home plate as she swung. Both Joe and I encouraged her to keep her feet still, but Becca continued to hit the ball off the end of the bat. When Becca again started to complain that her hands hurt, Joe said loudly and sternly, "I do NOT want to hear it. Do NOT want to hear it." Another time,

Angela was tagged out at third base to end a game. Angela appeared to be upset and hurt, and she was holding her side and acting as if it had been an especially hard tag. Coach Keith asked Angela if she was all right, but before she could respond, Coach Joe said bluntly, "Shake it off, Angela." That this was a strategy of last resort, used only when ignoring the girls' complaints and when teasing or joking about them failed to placate the young athletes, is not insignificant. Coaches who set aside practice time to teach simple rules of the game because they realize that the novice athletes do not understand these basic aspects of sport are often surprised, irritated, and even angered when the same athletes violate the norms for dealing with pain. When coaches finally tell the players to tough it out and ignore the pain, their words tend to be admonishing rather than instructive. It seems that the norms of the sport ethic are so closely held, so taken for granted, that the coaches who have internalized these norms forget that they are even learned.

While the girls' firsthand experiences with pain provided one avenue for teaching the sport ethic, another opportunity for teaching them how they ought to react to minor injuries arose when the coaches themselves were injured. It was not uncommon for a coach (and on a few occasions, the umpire) to be struck and injured by a thrown or batted ball during practices and games. Nearly every time this occurred, though, the coach (or umpire) attempted to hide the pain. He or she reacted stoically, pretended that the injury did not exist and did not hurt, and demonstrated to the girls that it was possible to continue to play through the pain. For example, Joe was often struck by hard-hit line drives while he was pitching batting practice. On one occasion when he was not able to move out of the way in time, a batted ball hit him on the foot with a loud *thwack*. Both the players on the field and the adult spectators let out a collective gasp, "Ooooooh!" Joe did not say anything, though he pointed down to his foot in a joking manner, and he did limp a little bit afterward.

During another practice session, I was covering first base while the girls were practicing fielding the ball and throwing it to me. Lydia, who was playing third base, fielded a ground ball and fired it wildly across the infield to me. I tried to scoop the ball out of the air before it hit the ground but missed, and the ball hit me squarely on the instep of my right foot. I was in a lot of pain, though I purposely tried not to show it. When the ball struck my foot several of the other girls yelled out, "Oooooohh!" in sympathy, and Lydia called to me, "Oh! I'm sorry!" Joe calmly told Lydia that she was trying to overthrow the ball. I retrieved the ball and threw it back in to Brenda, who was standing at home plate, took a few steps around the base to try to walk off the pain, and then continued to cover first base. There was no stop in the action. At the time, though I was not thinking about the ramifications of

showing pain, I was thankful that Joe had not showed any concern for me, and I was a bit self-conscious about having to limp around first base to ease the sting of my foot. In retrospect, I realize that had I displayed “weakness” by complaining or causing a stop in the action, it likely would have lessened my esteem as both a skilled ballplayer and a coach, if not for the girls, then certainly for Joe and for my own self-perception. On another occasion during a league game, one of the batters swung hard at a pitch and just barely nicked it, sending the foul ball directly back at the umpire, who was wearing very little protective gear. As the umpire turned sideways to absorb the impact of the ball, the fans seated in the bleachers on both sides of the field called out, “Ooooh!” The umpire, however, just turned back to the plate and acted as if nothing had happened. She did not even flinch, and the game progressed as usual.

When a coach was unable to hide the pain, he or she sometimes made a joke of it, encouraging the girls to laugh at the injury. Once again, this minimized the injury and conveyed the message that ballplayers are not really bothered by pain. Head Coach Joe Meadows was well known for laughing and joking on occasions when he must surely have been in real pain. During one practice session, Becca hit the ball hard straight up the middle. Joe, who had been pitching, was not able to move his glove in time to make the catch, and the ball struck him on the shin. Joe started laughing and hopping around on one leg. I turned to Becca and said, “Bull’s-eye! Nice shot!” Another time, Deirdre hit a foul ball straight back behind the plate where Joe had been standing to help her adjust her batting stance. The ball struck Joe in the chest. I gasped and remember thinking that I hoped Joe was not seriously hurt. Joe grabbed his chest and bent over a little bit, and Katheryn, Lydia, and Angela reacted to his injury by laughing out loud. After a few seconds, Joe seemed to recover and said in a serious, though somewhat mocking tone, “I don’t know what’s so funny about it!” Angela again laughed loudly, but Katheryn’s voice became serious, and she asked Joe if he was okay. Joe then laughed and assured the girls that he was all right, and then Joe and the three girls all laughed again. In this example, both the coach and some of the girls were laughing at a painful injury, though it was the more experienced girls (Angela was a perennial all-star who, in 1998, was in her eighth season of playing softball; Katheryn and Lydia were also veteran players) who were setting the example for their less experienced teammates.

In a similar vein, there were times when a coach actually invited pain. On more than one occasion, Joe challenged the girls to throw the ball to him hard enough so that it would hurt him. Often, he did this on occasions when he was not wearing a glove, so would have to catch their throws bare-handed. At first, many of the girls were reluctant to do this, but eventually, they fulfilled

Joe's wishes and threw the ball hard to him. For example, during one practice session, Joe was standing at home plate hitting ground balls to the infielders. They were instructed to throw the first ground ball to first base, then Joe would roll another ground ball to them, which they were to field and throw back to Joe at home plate. When Joe rolled the ball to Kim, she hesitated because she was not certain where she was to throw it. The fact that Joe was not wearing a glove seemed to confuse her even more. After Joe prodded her to throw the ball to him, Kim tossed it in to him softly. Joe then hit a ground ball to Liz, which she threw to first base, and then Joe rolled a grounder back to Liz and held up his bare hand to catch the ball from Liz. But Liz also hesitated, so Joe yelled to her, "Fire it home! Come on, throw it in here!" Liz threw the ball hard, and it landed in Joe's hand with a *smack*. With a smile on his face, Joe said loudly, "That's it! THAT HURT. Good throw!" When Joe caught their hard throws in his bare hand without flinching, he demonstrated his "toughness" as a ballplayer and modeled the sport ethic to the girls on the softball team.

The culmination of this learning process was that some of the girls eventually adopted the traditional ballplayer approach to injuries and pain. They demonstrated this "new" attitude in several different ways. The most obvious was through their reactions to potential injury-causing events. After being told by coaches and others both directly and indirectly to shake it off and play through the pain, many of the girls started to do this when they received minor injuries during practices and games. Once, after Lakesha was struck on the shoulder by a hard ground ball, she grimaced, turned away from the field, and rubbed her shoulder. When Joe called out to ask if she was all right, she turned back to the field, indicated that she was fine (even as she massaged her shoulder), and continued to play. Another time, the ball smacked Becky on the ankle when she failed to put her glove down on the ground in time. Becky hopped around some, and it was clear that she was hurt, but she never complained and never indicated that she wanted to stop or take a break. On still another occasion, a hard-hit ground ball bounced off Allison's leg. Allison calmly picked up the ball and threw it to first base without flinching. Olivia called out loudly to Allison, "You're TOUGH! I'd have been crying if that happened to me." Allison neither cried nor acknowledged Olivia's compliment, further demonstrating her adherence to the sport ethic. Finally, after Laura was struck on the shin by a long fly ball, she doubled over, turned away from the field, and clutched her leg. There was a loud *thwack* when the ball hit her, but Laura remained on her feet, and after only a very brief pause, she stood up, calmly turned back toward the field, and walked back to her position without saying a word. Laura acted as if nothing had happened, and she did not show any outward emotion or other reaction to the potential injury.

In addition to reacting to their own minor injuries stoically, a number of girls demonstrated that they had adopted the traditional ballplayer attitude toward injuries and pain by joining their coaches in introducing and reinforcing this attitude among their teammates. On several different occasions, girls who reacted to minor injuries by complaining were rebuked by their teammates. For example, when she was hit in the back by a wildly thrown ball, Becca yelled, "OUCH!" and then complained to the head coach, "Joe, I got hit by the ball!" Joe jokingly responded, "Which ball? Let me see that ball. Becca, you put a DENT in the ball!" Despite Joe's teasing, Becca continued to complain that she was hurt, and eventually, some of the other girls turned on Becca. Olivia said to Joe, "It just hit her lightly on the back—it barely hit her." Another of Becca's teammates told her to stop complaining, and Becca finally did stop. Another time, Angela was playing first base when Olivia accidentally stepped on her foot. Angela fell to the ground in obvious pain, showing a lot of discomfort and holding her foot. When Joe asked her why she was on the ground, Angela responded by saying, "She stepped on my foot!" Olivia then belittled Angela's pain, "Aw, I'm not even wearing cleats. You're acting like I stomped down on it!" The following year, Joe was hitting fly balls to the outfielders. Trudy was having trouble and missed several attempts in a row. When Joe started to hit balls to the other girls, Trudy sat down on the ground. Joe yelled to her to stand up, but Trudy complained to Joe that the last ball he hit to her struck her in the kneecap and hurt. Joe yelled back, "Then get up and walk around." Trudy remained seated on the ground and Katheryn announced loudly, "She just wants to be at home, sitting on the couch, eating popcorn and watching TV." Joe responded, "I'd like to do that, too," and both Joe and Katheryn laughed.

In all of the above examples, the girls who stopped the action to complain about minor aches and pains were negatively sanctioned by their teammates who thought the injured girls ought to continue playing despite their pain. Such criticism, coming from peers, clearly reinforced the coaches' teachings about the way a ballplayer ought to react to pain. It also increased the likelihood that other girls, both those who were the recipients of their teammates' criticisms and those who merely witnessed the exchanges between the complaining girls and their disapproving teammates, would adopt a traditional ballplayer attitude toward pain and minor injuries.

A final way that the girls demonstrated their adoption of the sport ethic as it relates to pain was through their discussions about and reflections on past injuries. This is similar to the "membership talk" that is described in research conducted by Albert (1999) in which athletes show that they belong by reminiscing fondly about serious injuries. Even if the girls' immediate reactions to the injuries had been marked by complaints and fears, many of them

looked back on past injuries with pride. They reveled in the telling and retelling of how they had been hurt. Often, they emphasized the way they coolly dealt with the pain, suggesting that no matter how others had interpreted their reactions, in retrospect, they thought of themselves as tough and stoic ballplayers. For example, during one practice, I was explaining to Becky the importance of keeping the ball in front of her. I said, "I don't care if you stop it with your glove or your ear or your elbow or with any other part of your body. As long as you stop it you've done a good job. I know it might hurt a little bit at first, but the hurt isn't going to last. It will go away." Becky responded eagerly, "I know! One time I stopped the ball with my chin!"

Upon hearing another girl's story about a past injury, many of the girls would try to outdo her, boasting that their own injury and pain had been far worse and, at the same time, suggesting that they were now stronger and better ballplayers as a result of their experience. On one occasion, I overheard several of the girls talking as they were throwing the ball to warm up. Brenda, who played catcher, started to list some of the places where she had been hit by a softball, saying, "I've been hit on the leg, and the arm, and here, and here. . . ." Angela interrupted, speaking excitedly, "One time I got hit on the throat!" Brenda quickly responded, "Yeah, I remember that! You went like this. . . ." Brenda acted out what Angela had done after being hit on the throat, grabbing her throat and doubling over in pain, nearly collapsing but remaining on her feet. Brenda continued, "And then all the people ran toward you." The girls were laughing and smiling as they shared these stories of past injuries. After they finished reminiscing about Angela's throat injury, Brenda added, "I've got hit in the stomach, chest, throat—one time the ball hit me in the face and it got stuck right there." Brenda held the ball in front of her nose about an inch or so away, and it became apparent that the ball did not actually strike her in the face but that Brenda had been playing catcher, was wearing the catcher's mask, and the ball had gotten stuck on the front of the mask in between the protective bars. From these examples, it is clear that reliving their own and others' injuries was an exciting and fun thing for the girls to do, especially when it allowed them to demonstrate how "tough" they were.

Socialization as Process

That acquiring a traditional ballplayer attitude toward pain and injury is a *process* learned over time is best demonstrated through a closer look at the experiences of individual girls as their softball careers progressed. As the only girl who played on each of the teams I observed for all three years of this study, Angela is a natural choice for this sort of in-depth examination.

Although not all of the girls who participated in Metropolitan Girls Softball adopted the sport ethic, a chronological analysis of Angela's reactions to injuries and potential injuries revealed that Angela did learn to shake off and tough out her pain over time. My notes show that Angela was much more likely to complain about an injury during the 1996 season than in either the 1997 or the 1998 season. In 1996, Angela complained about having suffered minor injuries on at least seven different occasions. At a team practice early in the 1996 season, she missed a fly ball, which hit her on the arm. Angela responded with tears and was noticeably more cautious on subsequent fielding attempts. Several weeks later, after making a couple of mistakes during a league game, Angela blamed her poor play on a stomachache. In another game later in the season, Angela became upset after being tagged out at third base. With a scowl on her face, Angela clutched her side where the opposing player had applied the tag. It seemed as though she was trying to emphasize a potential injury to deflect attention from the fact that she had been called out. In contrast to that first year, my field notes reveal that Angela complained about pain and injuries only once in the 1997 season and, again, only once in the 1998 season. Furthermore, according to my observations, the one time in 1998 when Angela complained about a minor injury, she did so in a teasing manner more as a joke meant to garner attention from her teammates rather than to seek sympathy for her suffering.

The cases of Laura and Katheryn, both of whom played on the teams I observed in 1996 and 1998, also serve to demonstrate that learning how ball-players are supposed to react to pain and injuries is a process that occurs over time. My 1996 observations of Laura reveal a girl who is reluctant to place herself in harm's way out of fear of being hurt but who is also eager to please her coaches, who urge her to sacrifice her body to make the play. An exchange I had with Laura during a practice early in the season is particularly telling. I was standing at first base while the girls fielded the ball and threw it to me. Although I dropped the ball several times, I always managed to knock it down and keep it in front of me. The first time I dropped the ball, Laura called over to me teasingly, "Catch the ball!" The third time I missed a throw, Laura yelled, "How many times has the ball hit your leg?!" I answered her by raising three fingers in the air and saying, "But I stop the ball every time, don't I?" Laura replied, "Yes, but doesn't it *hurt*?" To this, I said, "Nah, I just get bruised . . . but it doesn't hurt." Laura exclaimed, "*Bruised*?! I don't want bruises." Our exchange ended after I turned to her smiling and yelled, "Badges!" During this practice, I was filling what I perceived to be my natural role as a coach, and I was not attentive to the ways in which I was enforcing the sporting norms. It was only after reviewing my field notes from this early part of the season that I realized how ingrained the sport ethic was in my

own value system. Of course, my adherence to the sport ethic and my desire that the girls also uphold the ethic was not out of place at the softball field. Later in the season, Coach Joe had a similar encounter with Laura, who approached him before a game, asking, "What were you *thinking* when you put me in at second base last game? . . . I *hurt* my knee playing second base—stopping the ball the way you said!" Joe responded enthusiastically, "But you stopped it! I don't care if you stop it with your glove or your knee, or your arm, or your *tongue*." Even though Laura was open to the message that she learn to play with pain, and despite the fact that she claimed to Joe to have hurt her knee stopping a ball while playing second base, my 1996 field notes reveal several occasions when Laura complained about minor injuries and not a single instance when she overtly displayed a traditional, tough-it-out, ballplayer attitude toward pain. This changed during the 1998 season. Although Laura again complained about minor injuries on a few different occasions and was twice rebuked by a coach for her complaints, Laura's actions during this year did suggest that she had adopted a traditional ballplayer attitude. Four times during this season she either shook off her own minor injuries without calling undue attention to them or she expressed annoyance at others' complaints, an action that also served to encourage other girls to adopt the traditional ballplayer attitude. During one practice, I was hitting fly balls to a group of five girls in the outfield when one of the girls was struck by a pop up and crumpled to the ground. Three of her teammates rushed over to aid her, gathering around her with concerned looks on their faces. Laura was the only girl who did not check on her teammate. Instead, she sat on the ground with an irritated look on her face, waiting for the practice to resume. On another occasion, Laura approached Joe with a smile on her face, saying to him, "You tried to *kill* me yesterday! . . . I got hit here [points to her thigh] *and* down here [points to her ankle]. The one above my knee hurts the most, but now I have a bruise on my ankle!" Although Laura's words could suggest a complaint, her facial expressions and the tone of voice revealed that she was proud of her injuries and happy to show them off to her coach.

The case of Katheryn is a bit different in that she tended to complain more than the other girls even as she became a more experienced player. However, her behavior in response to pain does show a marked change from the 1996 season, when she complained about minor injuries at least ten different times, to the 1998 season, when I observed her complaining only four times. Perhaps more important, while there was one instance in 1996 when Katheryn downplayed an injury, my field notes indicate that during the 1998 season, Katheryn suffered four different minor injuries to which she responded without complaint, instead opting to tough it out and ignore the

pain. Throughout the 1996 season, Katheryn complained often of an arm injury, but she steadfastly refused to sit out of a practice or game. Although this might be interpreted as “playing through the pain,” in Katheryn’s case, it seemed instead to be a matter of calling attention to herself and attempting to gain sympathy from others. Even though she was not hurt badly enough to interfere with playing softball, Katheryn was sure to let everyone know that she was in pain. Just before the start of our first league game in 1996, Katheryn told me that her arm hurt. Upon further questioning, she assured me that she could still play. However, Katheryn immediately proceeded to again tell me that her arm hurt, she cradled her right shoulder with her left arm, and she gave me several anguished looks. On other occasions, Katheryn would pause to stretch her shoulder, grimacing loudly to ensure that others noticed her. In the middle of the season, Katheryn arrived at the field and announced loudly to no one in particular that she had iced her shoulder to prepare for the game. A few days later, she carried a bag of ice around with her as a visible reminder of her injury. In 1998, Katheryn continued to use a bag of ice to call attention to her injuries, but she was also more likely to criticize teammates who recoiled from pain, as she did when Trudy sat on the ground and refused to continue with fielding practice after being hit in the kneecap by a ball. Later that year, Katheryn demonstrated a more sophisticated understanding of the sport ethic when a sharply hit grounder bounced up and hit her in the stomach. Katheryn clutched her belly, grimaced, yelled out “Ugghhh!” and doubled over in pain. At the same instant as I realized that Katheryn’s dramatic reaction was over the top, she suddenly jumped into a ready position, losing any hint that she might have just been hurt, and yelled enthusiastically to Joe, “Hit me another one! Come on, I’m ready!!” By feigning an injury, then miraculously recovering and challenging Joe to hit the ball to her again, Katheryn demonstrated a keen awareness that the sport ethic demands athletes to be impervious to pain, while her playfulness interjected a hint of critical resistance to the norm of stoicism in the face of pain.

During the course of my observations, none of these girls became the next Kerri Strug, Ronnie Lott, or Curt Schilling. The extent to which they embraced the sport ethic and its norms relating to pain and injury does not begin to approach the levels that are found in elite sports. However, the experiences of Angela, Laura, and Katheryn as they encountered pain and injuries over the course of several years of playing recreational softball illustrate the process of socialization that each of the girls went through. Although each of these girls initially expressed fear and concern about the possibility of being injured and complained when minor injuries did occur, over time, they adopted the sport ethic and displayed what I have termed a “traditional ball-player approach” to pain and injuries.

Failed Socialization?

Of course, not all of the girls who participated in Metropolitan Girls Softball learned to play with pain and tough out their minor injuries. Becca, Missy, and Caitlin are noteworthy in this respect. Each of these girls had participated in the softball league at least one full year before I observed her, so the argument that these girls simply may not have had the time or experience needed to learn the traditional ballplayer attitude is less likely to apply. Becca played on my team in the 1996 season. This was her third year participating in Metropolitan Girls Softball. Despite being one of the more experienced girls on the 1996 team, Becca complained about minor injuries five times and never demonstrated a stoic, tough-it-out attitude toward pain. Among all the players, Becca had a reputation for faking injuries, and it became apparent that she was aware of this reputation when she approached Joe before a practice pointing to her right ankle and said, "I'm not lying. I hurt my ankle and I can't run on it. I mean it this time." Despite Becca's assertions of honesty, Joe noticed that as Becca slowly jogged to the outfield fence to warm up, she was favoring her left ankle instead of her right one. Joe teasingly called out to her, "I thought it was your other ankle!" Becca reacted by trying to favor both ankles, awkwardly hobbling toward the fence. In large part because of her propensity to complain about nonexistent injuries, Becca was more likely to be rebuked sharply by both coaches and teammates who were fed up with her behavior. As mentioned earlier, it was Becca who, after repeatedly complaining that her hands hurt, provoked Joe into loudly and sternly asserting, "I do NOT want to hear it. Do NOT want to hear it." Later in the season, after again making repeated complaints, Becca incurred the wrath of several teammates who at first watched silently as Becca lodged her complaints with Joe but who then stepped in when Becca's complaints about being hit by a thrown ball did not cease. Olivia stated matter-of-factly to Joe that "it just hit her lightly on the back. It *barely* hit her," and another girl turned to Becca and, with irritation in her voice, told Becca to stop complaining.

Missy was another girl who had a reputation for excessive complaining. Missy was in her second season with Metropolitan Girls Softball when she played on my 1997 team. During one of the very first team practices, Missy actually displayed a tough-it-out attitude after being struck in the head by a thrown ball, but that was the last time I observed her reacting stoically to pain. Later on in that same practice, Missy faked an injury to avoid running with the team, and as the season unfolded, Missy skipped several games, claiming alternately to have injured her thumb, finger, and foot, even though teammates reported that she was uninjured and had continued participating in other activities outside of softball.

Much like Missy had done, Caitlin consistently complained about minor injuries throughout the 1998 season, and she rarely displayed a traditional ballplayer attitude toward pain. Remarkably, Caitlin was in her eighth year of playing softball in 1998, yet her seeming enthusiasm for the game diminished whenever she experienced a bit of pain. Early in the season, Caitlin was struck on the back by a line drive, causing real pain. Although her initial reaction to the incident was within the bounds of acceptability, Caitlin continued to dwell on the pain as the practice progressed by asking teammates to check her back for bruising, and even several days later, she continued to talk about the injury. On other occasions, Caitlin's repeated complaints of pain were unrelated to her sport participation. For example, one time during a game, she complained that her ears hurt as a result of just having had them pierced. Because of this, Caitlin was unable to focus on the game. At other times, Caitlin complained of headaches that prevented her from playing. In each of these instances, the pain that Caitlin experienced was likely real, and her reactions were understandable. However, Caitlin tended to focus on the pain rather than ignore it and play through it, and rarely did she exhibit a stoic attitude toward pain or minor injuries.

In every instance, these girls were more likely to complain about minor injuries than they were to display the sport ethic by shaking off and playing through the pain. In addition, these three girls' reactions to pain did not vary depending on whether it was early or late in the season. The girls' complaints were relatively evenly spread throughout the course of the season, as were the coaches' lessons in how ballplayers are expected to react to minor injuries. Missy's lone instance of shaking off a minor injury without complaint occurred in the very beginning of the 1997 season, while one of Caitlin's rare tough-it-out responses to pain occurred at the beginning of the 1998 season, and the other occurred at the end of the season. Clearly, while none of these girls displayed the traditional ballplayer attitude when considering the season as a whole, neither did they acquire a more traditional ballplayer attitude toward injuries as their seasons progressed.

Neither Becca, Missy, nor Caitlin can be said to have adopted the sport ethic when it came to dealing with pain and minor injuries. One might argue that their socialization to the traditional ballplayer attitude failed. But this is only the case if you consider adoption of the sport ethic the only acceptable outcome of this socialization process. Seen instead as a process in which individuals develop their human potential and form their social identities (a definition that reflects traditional sociological ideas about socialization), then the socialization that these girls experienced was undoubtedly "successful." For various reasons, Becca, Missy, and Caitlin participated in recreational youth softball, yet they also chose not to adopt the sport ethic. They

were exposed to similar socialization experiences as were their teammates, many of whom did eventually embrace the traditional ballplayer attitude toward pain and injuries, but these three girls did not. What set Becca, Missy, and Caitlin apart from their teammates who did learn to shake off injuries and play through the pain?

The skill level of the girls suggests an easy answer to this question. For the most part, the more highly skilled players were also more likely to embrace the norm of shaking off pain, while the lesser skilled players were more likely to shun pain and coddle their minor injuries. Both Katheryn and Angela were named to the league's all-star team in 1996, and by the 1998 season, Katheryn ranked as an above-average player, while Angela was again recognized as a league all-star. In contrast, both Caitlin and Missy were below-average players. Yet skill level alone is not enough to explain why some girls adopt the sport ethic and others do not. Becca, who complained often about minor aches and pains, was an average ballplayer. Laura, who was rated as an average ballplayer in 1996, was a below-average ballplayer in 1998 when she displayed her tough-it-out approach to playing ball. One of Laura's 1996 teammates, Becky, was a dreadful ballplayer. Balls hit to Becky in right field nearly always got past her, and she often struck out when she was at bat. Both Coach Joe and I regularly told Becky not to worry about catching the ball so much as simply knocking it down so that it would not roll far away from her. We told her not to worry about bruises and that, as an outfielder, she was our last line of defense, so it was crucial that she stop the ball. Becky listened to us eagerly, and as ball after ball struck her body (rarely did it strike her glove!), she shrugged off the stinging pain and asked us to hit it to her again.

Despite the fact that they were not strong softball players, both Laura and Becky exhibited strong commitments to being ballplayers.⁶ Above all else, they were enthusiastic. They listened to their coaches and were eager to follow instructions. They often expressed joy and happiness during practices and games, and it was not unusual for them to express sorrow or disappointment when they had to be absent or when a practice or game was cancelled. They wanted to be softball players. The same level of enthusiasm was not exhibited by any of the girls who, week after week, season after season, complained of pain and minor injuries. It is likely that among these girls, few, if any, truly wished to embrace the identity of a softball player. It is possible that some of them were playing softball because their friends were playing or because their parents wanted them to rather than because they wanted to. Other girls may have started out with an interest in softball but then lost interest after having experienced the reality of practices and games. It is not at all surprising that these girls exhibited different levels of enthusiasm for the

game. The period of adolescence in particular is widely recognized as a time when children and young adults experiment with a number of social identities. Preadolescents and adolescents (as well as adults) may “try on” an identity, enact that identity for a period of time, and then discard it (Erikson 1956; Hey 1997; Marcia 1966). Coakley (1992) and Curry (1993) use the terms *development tunnels* and *identity tunnels*, respectively, to describe processes in which young athletes progressively devote more and more of their energy to becoming athletes, to the exclusion of other social identities. While their research focuses on adolescents who eventually develop exceptionally strong identities as athletes, it is clear that not all young athletes choose the same path.

Enthusiasm for the game and the individual’s commitment to the ballplayer identity go a long way toward explaining which girls were more likely to adopt the sport ethic and learn to shake off pain and tough out minor injuries. Yet further analysis shows that other social factors, including the girl’s age, social class, and race, play a role in shaping the strength of her commitment to the ballplayer identity and, concomitantly, to whether she adopted the sport ethic and upheld the norm that athletes should play with pain. Although the sample size of this study limits the extent to which any strong conclusions may be drawn, the relationship between a girl’s age and the strength of her ballplayer identity follows a predictable pattern in which the girls who were just entering adolescence (those who were twelve and thirteen years old) tended to have the weakest commitments to being ballplayers. As previous research has documented, by the time many girls reach adolescence, they begin to limit their sporting activities, and it is at this point that many girls lose interest and quit participating in sports (Butcher 1985; Gilbert 1997). Of the girls in this study, the eleven-year-olds were the most enthusiastic and exhibited the strongest commitments to being ballplayers (though they had not necessarily learned to shake off pain yet). It was the twelve- and thirteen-years-olds who exhibited the least enthusiasm and the weakest commitments to the ballplayer identity and who were the least likely to display the norms of the sport ethic when it came to playing with pain. In contrast, though there were relatively few fourteen-, fifteen-, and sixteen-year-olds participating in the league, it was these girls who, while not quite as enthusiastic as the eleven-year-olds, were the most likely to display the traditional ballplayer attitude toward pain.

My observations also point to a connection between a girl’s social class and her likelihood of embracing a ballplayer identity and upholding the norms of the sport ethic. Because of the difficulty in consistently and accurately determining children’s social class based on observational data, these results should be seen as speculative rather than conclusive. However, results

from this study suggest that having higher levels of material resources correlates with having stronger ballplayer identities and with being more likely to adopt the sport ethic. I was able to identify with certainty only nine individual girls as belonging to families with either higher or lower levels of material resources than the others. The remaining girls came from families either that I judged to have an average level of material resources or for which I was unable to make a judgment.⁷ Three of the four girls whose families were well off compared with the rest of the families in the league displayed a strong commitment to the ballplayer identity. In contrast, four of the five girls whose families were relatively poor displayed a weak commitment to the ballplayer identity. I strongly suspect that the material comfort afforded by those families with higher levels of material resources makes it easier for children to embrace interest- and activity-related identities such as an athlete or ballplayer identity, a musician identity, a scout identity, or any other similar social identities. Families with more resources are able to purchase equipment such as expensive bats and gloves, musical instruments, and camping gear, which might encourage children to become more interested and devoted to an identity than they might be otherwise. In addition, relatively well-to-do families are more likely to have reliable transportation and even second (or third) family cars to transport their children to team practices. Many of the children in this study whose families had lower-than-average levels of material resources did not have these luxuries, and it is not surprising that they were less likely than their teammates to develop strong commitments to the sport.

Finally, evidence also points to a race effect when it comes to developing strong ballplayer identities, with African American girls being more likely than their white counterparts to display strong commitments to being ballplayers. Eight of the eleven African American girls in this study (approximately 73 percent) displayed strong commitments to the ballplayer identity. This compares to seventeen out of thirty-one white girls (approximately 55 percent) who displayed strong commitments. This difference is most likely attributable to the recognized racial variations in socialization practices and cultural expectations related to gender identities. In part due to the historical legacy of slavery and oppression, African American women have traditionally been excluded from the dominant cultural images of ideal womanhood. As a result, black female athletes are less likely to be seen as violating norms of proper femininity, and their athleticism is more widely accepted, both within and outside the African American community (Gissendanner 1994; Williams 1994).

Conclusion

The sporting world is populated with athletes who have internalized the sport ethic and who sacrifice their bodies for sport, but little attention has been paid to understanding how these athletes learned to shake off minor injuries and to play with pain. By focusing on preadolescent and adolescent girls participating in entry-level recreational softball, this research takes advantage of a window of opportunity that is created when the norms of traditional femininity collide with the norms of sport. So long as athletes endure pain without complaint, the mechanisms that uphold and transmit the sport ethic are largely invisible. But when athletes violate the sport ethic, as happens often in girls' entry-level sports, those mechanisms become more apparent. Many of the girls in this study entered the sporting world with traditionally feminine attitudes toward pain that permitted and even encouraged them to react to minor injuries by emphasizing their frailty to win sympathy. However, during the course of their involvement in softball, they were exposed to a variety of socialization experiences in which coaches, teammates, and others disapproved of their traditionally feminine reactions to minor injuries and introduced them to the way athletes are expected to deal with pain.

Coaches and other league officials led by example, shaking off their own injuries and occasionally glorifying pain. When the girls complained about minor injuries, coaches tended either to ignore the complaints or to make light of them, teasing the girls and joking about their pain. Interestingly, when it came to responding to the girls' complaints, telling them plainly and directly to ignore the pain was the strategy of last resort. This was a strategy born of frustration, used only when the coach had run out of patience. It seems that norms of the sport ethic are so closely held, so taken for granted, that the coaches who have internalized these norms forget that they are even learned.

But these norms are learned. Most of the girls in this study gradually did adopt the sport ethic and learned to shake off their minor injuries. Some of the girls resisted this norm. Whether a girl embraced or resisted the sport ethic had a lot to do with the strength of her identity as a ballplayer. Girls with strong ballplayer identities learned to uphold the norms of the sport ethic, while those with weak ballplayer identities were more likely to persist in complaining about pain. Although skill as a softball player had a part in shaping the girls' identities, with higher-skilled players tending to be more committed to ballplayer identities, other factors such as enthusiasm for the sport were also important. Furthermore, the evidence suggests that social factors such as age, social class, and race played a role for both the younger and the

older girls, with the girls from higher-social-class families and the African American girls being more likely to exhibit strong commitments to the ballplayer identity and, thus, being more likely to embrace the sport ethic.

This research provides a preliminary look at ways that girls who are relatively new to the sporting world are introduced to the norms of the sport ethic. Future research could delve more deeply into this issue. Interviews with young girls at the beginning of their athletic careers would be useful in finding out more about the girls' attitudes and ideas related to pain and injury in sport. While previous research has collected retrospective accounts from experienced athletes as they recall their early years in sport, we have not actually heard from novice athletes themselves. Likewise, it would be instructive to hear from youth coaches. To what extent are their lessons about dealing with pain conscious and deliberate, and what do they think about the sport ethic as it applies to youth sports? While I believe that a continued emphasis on girls' sports is important, interviews with both girls and boys participating in recreational youth sports, as well as with their coaches, would be useful for discovering whether and how the sport ethic is applied differently to the two groups. Although current research has compared the role of the sport ethic in male and female sports at the college and elite levels, little attention has been given to youth recreational sports in this respect. While the stories of Shun Fujimoto, Ronnie Lott, Curt Schilling, and Kerri Strug are important, it is the stories found on society's sandlots that better reflect our everyday shared experiences.

Notes

1. In some cases, the stories are even exaggerated so as to make the athlete's feat that much more heroic. This is the case for Ronnie Lott, whose legendary story is sometimes recounted in such a way that we are led to believe that Lott performed the amputation himself in the locker room and returned to the game without missing a down.

2. This article is focused on the more "traditional" injuries such as bruises, sprains, and physical trauma that result from rigorous and repetitive physical activity. For these injuries, there does seem to be a societal double standard that views men as more capable of enduring pain and, therefore, more acceptable victims. It is important to keep in mind that athletic participation is also associated with other types of "injuries," such as eating disorders, that society associates more closely with female athletes. For a more in-depth discussion of this issue, see Johns (2004).

3. Observations made during the course of this research further support the notion that boys' ongoing and simultaneous socialization to masculine gender norms obscures their socialization to the sport ethic. Although many of the ten-, eleven-, and twelve-year-old girls who were the subjects of this study did not exhibit the traditional ballplayer's attitude toward pain, my field notes contain several instances where "Stephen," the six-year-old son of the head coach, was struck by errant softballs. Without fail, Stephen would hold back his tears, shake off the pain, and continue on as if nothing had happened.

4. The names of the league and individual participants have been changed to protect the identities of the research subjects.

5. The league president and the head coach whom I assisted were aware of and consented to my research activities. Although I did not announce my research agenda more widely, neither did I go out of my way to hide the fact that I was observing for research purposes. As a result, a number of the girls and their parents knew that my scholarly work focused on youth sports and that my observations might be useful in my career. All of my observations took place at public locations and were approved by my institution's review board.

6. As part of an earlier study, I developed a system for rating the strength of each of the girls' ballplayer identities. The final ratings assigned to each of the girls are useful here for understanding which girls are most likely to adopt the sport ethic as it relates to pain and injury. Previously, I categorized the strength of each girl's ballplayer identity on five criteria: the girl's skill level, her attendance at practices and games, her enthusiasm for the sport, whether she supplied her own softball equipment, and her awareness of the outside sporting world. In most cases, evidence supporting at least three of the five criteria resulted in the girl's being categorized as having a strong ballplayer identity, though there were times when the evidence related to one criterion was so overwhelming that it swayed questionable evidence in other areas. In general, skill level was the least important criterion and was used more to confirm the findings of the other criteria than to make the initial judgment. While attendance, ownership of equipment, and awareness of the larger sporting world were given approximately equal importance, a girl's enthusiasm level was the only measure that by itself, could sway her ballplayer identity rating in either direction.

7. I based my judgments on observations such as the clothing worn by the girls and their family members, the cars their parents drove, and the girls' references to things such as jobs that their parents held and vacations that their families had taken. It is important to note that each family's social-class ranking was judged relative to the families of the other girls participating in Metropolitan Girls Softball.

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