THE IMPACT OF SPORTS ON ADOLESCENT DEVELOPMENT: THE IMPORTANCE OF TITLE IX

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INTRODUCTION

Adolescence is a time of crisis for girls, a time when girls become psychologically vulnerable. While boys are at risk in childhood, girls undergo a sudden drop in resiliency at age 11 (Block, 1990). Not only girls with family problems, but a wide range of lively, outspoken, and intelligent girls face marked increases in depression, poor body images, eating disorders, and a fall in self-esteem significantly more often than do boys. Seligman (1991) finds that "girls, at least up to puberty, are more noticeably optimistic than boys, (p.125) and concludes that "whatever causes the huge difference in depression in adulthood, with women twice as vulnerable as men, it does not have its roots in childhood. Something must happen at or shortly after puberty that causes a flip-flop – and hits girls very hard indeed" (149-150).

What happens to girls at adolescence to cause this vulnerability? Most psychological theory says that separation, or self-other differentiation is the core feature of adolescent development. Theorists consider that adolescence is a critical time of separation from early relationships that keep individuals stuck in dependence, and often see separation as necessary to consolidate identity. In fact, identify formation – that sense of oneself as unique – has been considered the second key task of adolescent development. Missing from these theories is the critical importance of relationships and the effect on girls of cultural expectations about feminine behavior in their relationships. From the relational perspective, theorists such as Gilligan (1982), the Stone Center (Jordan et al., 1991), and others, the key task at adolescence is an increase in capacity to be oneself in relationship while remaining connected and intimate with important others. Development proceeds best when a girl's relationships allow and acknowledge her changes, while still maintaining closeness. Relationships are arenas of growth and learning themselves, not simply supports to individual development. As Janet Surrey says, "The word 'connection' has replaced 'self' as the core element or the locus of creative energy of development." In fact, the crisis of adolescent development is a crisis of connection, not a crisis of separation with girls unable to separate or become autonomous. Research finds that girls and women have a sense of self that is organized around relationships, and that their sense of self is threatened when relationships are full of conflict or when they are severed (Brown & Gilligan, 1991). Girls often fear that they can not bring all of who they are into relationship, and that they have to silence large parts of themselves in order to be loved by others. They also begin to notice that the culture does not value traditionally feminine characteristics.

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SOCIAL FACTORS AFFECTING GIRLS' DEVELOPMENT IN THE US

At adolescence, girls step into cultural expectations for feminine behaviors in heterosexual relationships. They encounter a culture that both idealizes and exploits the sexuality of young women while devaluing their femininity. Rape and other physical violence severely affect the lives of girls all across the country; reports of boys sexually harassing girls in schools are common. Girls get the message that they are not worthy of respect, and that appropriate behavior for boys includes exerting power over girls. The contributions and experiences of girls and women are still marginalized or ignored in many of the textbooks used in schools. Girls internalize the culture's standards that only thin, muscular bodies are "beautiful"; dieting starts as early as third grade and works as a pathway into eating disorders. Girls are sexualized by the media at younger and younger ages; they learn early that they are supposed to attract male attention, primarily through their looks. They also learn strong conventions about feminine "goodness" and acceptability that are tied to subordination and loss of voice. They learn to send aggression underground and to express anger and control indirectly (Brown, 1999); they learn to silence themselves – their true feelings – and to develop an outwardly acceptable facade in order to be acceptable.

THE BENEFIT OF PARTICIPATION INORGANIZED SPORTS

In general, females who participate in school sports have higher self-esteem, more positive body image, and perceive themselves as psychologically more masculine than their non-athletic peers. For example, a study by Elissa Novick (1999) examined self-esteem, gender-role orientation, and body image in a sample of 103 female undergraduates, and inquired about their participations in sports and extra-curricular activities during high school. Results indicated that adolescent female athletes had significantly higher self-esteem and body esteem and perceived themselves as psychologically more masculine and less feminine than their non-athletic counterparts. Among the athletes themselves, those who perceived themselves as psychologically more masculine and less feminine had significantly higher self-esteem and body esteem as compared with other athletes. Novick goes on to argue that high school curricula should be amended to require participation in sports, maintaining that such participation is invaluable for girls in terms of increasing self-esteem and promoting more positive body images. It's important to note that numerous previous studies have found that women who have masculine gender role orientations have higher self-esteem and more positive body image self-concepts. This is often attributed to the restrictive, stereotyped behaviors that are called for by the feminine gender role orientation, and also to the fact that the attributes called for by the feminine gender role orientation are not valued by the wider culture.

Erin Richman and David Shaffer (2000) tested a model specifying that girls' precollege participation in sports would foster positive body images,

enhanced perceptions of physical competence, and more flexible gender identities, which, in turn, would predict higher college self-esteem. A sample of 220 college females (ages 18-24, ethnicity unidentified) provided retrospective reports of their precollege sport involvement and current assessments of body image, perceived physical competencies, gender identity, global self-esteem, and other psychosocial variables. Consistent with other studies, greater precollege sport participation predicted higher self-esteem in the female sample. The model's intervening variables totally mediated the sport participation/self-esteem relationship. The patterning of these data implies that participating in sports promotes females' self-worth by fostering physical competencies, favorable body images, and gender flexibility. In the absence of any such psychosocial benefits, participation in sports has little effect on and can even undermine self-esteem.

Interested in the issue of what mediates the effect of sports on selfesteem, Erin Richman (2002) explored the effect of sport participation on selfesteem when sport is mediated by three factors: body image, perceptions of competence, and support. The sample consisted of 345 females (mean age = 19.3 years) who gave retrospective reports of sport participation and contemporaneous reports of body image, physical competence, academic competence, parental and peer support for sport participation, and self-esteem. The results revealed that girls' early sport participation predicted later selfesteem, but that relation was mediated by physicality, indicated by physical competence and feelings about physical condition. These results indicate that sports participation by itself may not be enough to affect self-esteem positively, and that early participation in sports does not have a general positive effect. That is, sports do not make girls feel sexier, more attractive, or smarter later in life. Rather, effects are much more specific: early participation in sports fosters an increased sense of physical competence and more favorable feelings about body condition that, in turn, benefit overall self-evaluation.

Very few studies have considered the effects of sports on large samples of minority adolescents. Sumru Erkut and Allison Tracy (2002) examined data from the in-school survey of the National Longitudinal Study of Adolescent Health on girls and boys who claim a Mexican, Puerto Rican, or Cuban heritage to test two hypotheses: 1) Participating in a school-based sport is associated with self-esteem, and 2) School attachment and a sense of physical well-being mediate this relationship. The first hypothesis was partially confirmed in that participation in school sports was associated with self-esteem among Mexican American adolescent girls (n = 1,552) and boys (n = 1,459), Puerto Rican girls (n = 426), and Cuban American boys (n = 389), but not among Cuban American girls (n = 411) nor Puerto Rican boys (n = 405). The second hypothesis was confirmed in that, where there was a significant relationship between participating in a school sport and self-esteem, school attachment and physical well-being mediated this relationship. The results underscore the need to study psychosocial processes separately among Latino subgroups and to examine gender within each subgroup.

Finally, in a study designed to use sports as an intervention to offset the lowering of self-esteem that so often occurs for adolescent girls, Kathleen Hoganbruen (1999) studied the effects of an innovative four-week sports camp experience on a diverse group of 10-12 year old girls. Sixty-one campers and 49 matched, no-treatment control participants completed a pre-and post-test questionnaire comprised of a variety of scales to assess psychological wellbeing prior and after camp. Additionally, the campers completed a pre-and post-qualitative evaluation to assess their self-reported experiences at camp. It was expected that campers would show improvements relative to control participants in the following areas: self-esteem, depression, self-confidence, ethnic group orientation, body image, and sports self-efficacy. Hoganbruen found significant differences between the groups on a measure of how participants felt about their behavior conduct, fitness evaluation (a body image measure of how fit one evaluates oneself to be), and as well as a trend toward significance on depression. Qualitative analyses reveal that campers overall enjoyed camp, learned a variety of sports and "life lessons" developed friendships, and improved how they feel about themselves.

In summary, sports participation is one avenue proven helpful to offset the drop in self-esteem that commonly occurs for adolescent girls. However, sports participation in and of itself is not enough. Critical factors mediating the relationship between sports participation and positive self-esteem, including positive body image, appear to be a psychological orientation toward a masculine gender role, sports' effects on a sense of one's physical competencies, support from parents and peers, and a positive attachment to one's school.

THE RISKS OF SPECIFIC SPORTS FOR HEALTHY FEMALE ADOLESCENT DEVELOPMENT

Participation in sports is not always beneficial to girls. Specific sports, particularly those emphasizing "leanness" and individual competition versus team cooperation are known increase the dangers of eating disorders in adolescent females. The "female athlete triad" is a syndrome occurring in physically active girls and women. Its components are disordered eating, amenorrhea, and osteoporosis. Pressure placed on adolescents or young women to achieve or maintain unrealistically low body weight underlies development of the triad. Adolescents training in sports in which low body weight is emphasized for athletic activity or appearance are at greatest risk. Girls with one component of the triad often also have the others. Alone or in combination, female athlete triad disorders can not only decrease physical performance, they can cause illness and death. Based on the existing evidence of the magnitude and the seriousness of the problems associated with the female athlete triad, the American College of Sports Medicine has strongly advised that specific strategies be developed to prevent, recognize, and treat this syndrome (Otis et al., 1997).

In a study of 5,174 female 7th, 9th, and 11th grade public school students from 61 schools, Sherwood et al (2002) found that girls in weight-related sports were more likely to report disordered eating behavior compared with girls not in weight-related sports, confirming prior research on smaller samples. (A weight-related sport is one in which one feels pressure to maintain a specified body shape or weight.) However, it is important to note that other variables, such as age, coach's influence, and family factors may also mediate this relationship (Shelby, 2000).

Data from 34 previous studies examining the relationship between eating problems and athletic participation revealed that athletes appeared to be somewhat more at risk for eating problems than nonathletes (Smolak et al., 2000). This was especially true of dancers, but significant effects did not emerge for gymnasts. Elite athletes, especially those in sports emphasizing thinness, were at risk, while nonelite athletes, especially in high school, had reduced risk of eating problems. Body dissatisfaction was also lower in athletes than nonathletes.

As the level of competition goes up, so, too, appears does the risk of eating disorders. In a small study of 38 NCAA Division 1 female collegiate athletes, 40 NCAA Division III athletes, and 31 non-athlete controls, Picard (1999) found that athletes at higher levels of competition showed more signs of pathological eating and were at an increased risk for the development of eating disorders. Athletes in sports emphasizing a lean physique and in weight-restricting sports were also more vulnerable than athletes in other types of sports and non-athlete controls.

Searching further for the factors that appear to protect adolescent athletes from eating disorders, Zucker et al. (1999) examined three groups of college athletes: nonathletic students (n=62), student athletes participating in refereed sports (n=33), and student athletes participating in judged sports (n=37). Comparison of eating disorder diagnoses between groups found a trend toward a higher rate of diagnoses among judged sport athletes as compared to both refereed sports and nonathletic students of 13%, 3%, and 3% respectively. Competing within a group or team setting may lead to less body scrutiny and self-consciousness than competing individually and being judged on the basis on one's own performance.

Most studies of girls participating in sports rarely consider the relationship between family environment and eating disorders among student-athletes, probably because of the variety of variables that need to be considered. But in one study of 79 student-athletes from 13 different sports, matched with controls who were not involved in sports, Cervio (1998) found that low family cohesion and high family conflict are associated with increases in eating disordered thoughts and behaviors. Those students in at-risk sports .(defined as gymnastics, cross-country, and swimming and diving) demonstrated more eating disordered symptomatology than students in non at-risk sports (defined as basketball, crew, fencing, golf, lacrosse, soccer, softball, field hockey, track

& field, and tennis). Persons of color in the sample and who were not student athletes were more preoccupied with their weight and body shape.

In summary, most studies agree that the risk of eating disorders for adolescent girls rises when

- the sport emphasizes "leanness"
- the sport requires individual versus team competition, and performance is individually judged versus refereed
- the level of competition rises
- family conflict is high and family cohesion is low
- the coach is critical of weight gain.

THE IMPACT OF TITLE IX

Though the evidence from studies may sound as if sports participation may be risky for girls' development, in my opinion, the known benefits far outweigh the risks. These benefits include not only enhanced self-esteem, but a learned sense of one's body as competent, strong and healthy. It also includes learning to work and compete with others in cooperation. And it includes the additional factors that were previously described. The risks for girls' development come when the sport magnifies cultural pressures for thinness or sets the girl apart for judgment of her individual performance, thus magnifying her self-scrutiny.

Title IX's impact on adolescent girls' participation in sports has been enormous and positive. Many women testify that their sports participation before 1972 was minimal or none at all. The signal that women's sports are as important as boys, revealed through equal spending on equipment, coaches and uniforms, offsets the inequality that girls still experience in the classroom. Fortunately, the Commission on Athletic Opportunity that met in 2003 to recommend changes in Title IX ultimately preserved the forward progress that female athletes have enjoyed these past 30 years. The collective sigh of relief was heard throughout the country by all those supportive of women's equality. and by all those who want our daughters to have the same sports opportunities as our sons. We are only now in a time in history when young girls can look ahead to professional opportunities for team sports for women, and to role models of women in sports presented by the media. Only now do we have grade school, high school and college coaches that are female. In my opinion, after another generation of girls' participation in sports, we will see even more positive effects on girls' development.

REFERENCES

- Brown, L.M. (1999). *Raising their voices: The politics of girls' anger*. Cambridge, MA: Harvard University Press.
- Brown, L.M. & Gilligan, C. (1991). *Meeting at the crossroads: Women's psychology and girls' development*. Cambridge, MA: Harvard University Press.
- Ciervo, R. L. (1998). Relationship between family environment and eating Disorders among female student-athletes. *Dissertation Abstracts International*. Vol 59, (6-A).., p.1901.
- Erkut, Sumru & Tracy, Allison J. (2002). Predicting adolescent self-esteem from participation in school sports among Latino subgroups. *Hispanic Journal of Behavioral Sciences*, 24, pp. 409-429.
- Gilligan, C. (1982/1993). *In a different voice: Psychological theory and women's development.* Cambridge, MA: Harvard University Press.
- Jordan, J.; Kaplan, A.; Miller, J.B.; Stiver, I.; & Surrey, J. (1991). Women's growth in connection. New York: Guilford.
- Novick, Elissa R. (1999). A comparison of self-esteem, gender role orientation, and body image in adolescent female athletes and nonathletes. *Dissertation Abstracts International*. Vol 59(9-B), p.5150.
- Otis, C.L.; Drinkwater, B.; Johnson, M.; Loucks, A., & Wilmore, J.(1997). The female athlete triad. *Medicine & Science in Sports & Exercise*, 29, i-ix.
- Picard, C.L. (1999). The level of competition as a factor for the development of eating disorders in female collegiate athletes. *Journal of Youth & Adolescence*, 28, pp.583-594.
- Richman, Erin L. (2002). Girls' self-construction: Influence of early sport participation on self-esteem in late adolescence. *Dissertation Abstracts International*. Vol 62(9-B). p.4256.
- Sherwood, N. E.,; Neumark-Sztainer, D.; Story, M.; Beuhring, T.; & Resnick, M.D. (2002). Weight-related sports involvement in girls: Who is at risk for disordered eating? *American Journal of Health Promotion*, 16, 341-344.
- Shelby, S.R. (2000). Athletes' risk of developing eating disorders: A metaanalysis. *Dissertation Abstracts International*. Vol 61(6-B).,p3292.
- Smolak, L.; Murnen, S.K., & Ruble, A.E. (2000). Female athletes and eating problems: A meta-analysis. *International Journal of Eating Disorders*, 27, pp.371-380.
- Zucker, N.L.; Womble, L. G.; Williamson, D. A.; & Perrin, L.A. (1999).

 Protective factors for eating disorders in female college athletes. *Eating Disorders: The Journal of Treatment & Prevention*, 7, pp.207-218.