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**The First Thursday Girls' Club:
A Narrative Study of Health and Social Support in a Working-Class Community**

**by
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**Dissertation submitted in partial fulfillment of the requirements for the degree of
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ABSTRACT

On the basis of in-depth interviews with members of the First Thursday Girls' Club -- seven women friends from McKees Rocks, Pennsylvania, who have met once a month for over 40 years -- the relationship between health and social support was investigated using narrative methods. Oral testimony from the Girls' Club members was subjected to a holistic-content analysis, and the narrators' experiences of the health effects of their long-time supportive friendship system were described in their own words.

In contrast to the ahistorical methods of the health sciences, findings suggested that history, class, culture, and regional conditions shaped the meaning the narrators attributed to health. They expressed a "functional-relational" view of health that diverged from (a) the medical model's assumptions about health as an individual responsibility, (b) the wellness model's assumptions about health as a peak individual experience, and (c) Western society's middle-class preoccupation with the perfectibility of personal health. Further findings indicated that class and cultural contexts influenced how the narrators defined social support. The narrators showed a preference for family or friend helpers over professional providers of psychological services, which they reserved for dire circumstances, and they prioritized loyalty to the group and group cohesiveness over emotional expressiveness and absolute honesty.

The central argument of this study is that narrative methods advance our understanding of the health effects of social support beyond the narrow disciplinary

boundaries of the biomedical and health sciences. First, evidence from this study showed that narratives uncovered presumably culture-free, but actually mainstream-oriented, Western meanings for concepts like “health,” “social support,” and “therapy.” Second, these narratives provided an alternative explanation of cause for the health effects of social support using storied coherence rather than empirical outcomes as the standard of proof. And finally, diverging from the health sciences’ emphasis on disease and deficiency, this research revealed the indigenous practices that the narrators successfully used to collectively protect and enhance each other’s health and well-being. This narrative study recommended a “health-in-society” perspective as a necessary counterpoint to the biomedical individualism that dominates the health sciences.

ACKNOWLEDGMENTS

I dedicate this study to the First Thursday Girls' Club -- Anna, Betty, Carole, Dolores, Donna, Joanne, and Patti -- who told me their stories, and who, through those stories, taught me to open my eyes to the nurturing and empowering parts of my own heritage. Thank you. I acknowledge your spirit of survival, your strength, and your enormous capacity for loyal friendship.

I also wish to dedicate this study to the six immigrant strikers who were killed on August 22, 1909 by the Iron and Coal Police outside the Pressed Steel Car Company as they protested unfair wages and dangerous working conditions and fought for the security of union representation. There are no monuments to these people in McKees Rocks, nothing to commemorate their labor or their struggles. I acknowledge them here so that they, and what they died for, may be remembered.

Finally, I dedicate this work to my father, Joseph Anthony Fabiano, who was, in my sister's words, "a different kind of immigrant." I acknowledge his years of uncomplaining labor on behalf of his family and his capacity to hope for a better life. Although I did not always understand the legacy he left me, I thank him for what he used to call my "hard head" -- my singular sense of determination and purpose regardless of the obstacles.

Many persons have helped me produce this work. Chief among them are the members of my Doctoral Committee: Minnie Bruce Pratt, Susan Amussen, Linda Shopes, Kathryn Anderson, Richard Keeling, Florence "Dollie" Kelly, and Sherry

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Social connectedness is so basic and vital to human health that it affects blood pressure, the incidence of heart disease, and the intimate workings of the immune system. Because it is so important it makes sense to ask, how are we doing as a society in fostering this factor vital to the health of the public? Not well.

Robert Ornstein and David Sobel (1987)
The Healing Brain, p. 191

I suspect that when modern Americans ask “what is sacred?” they are really asking “what place is mine? what community do I belong to?”. . . . We are seeking anything with strong communal values and traditions. But all too often we’re trying to do it on our own, as individuals. That is the tradition of middle-class America; a belief in individual accomplishment so strong that it favors exploitation over stewardship, mobility over stability. . . . We pay a high price for applying upward mobility to the life of the spirit, denying roots, and turning a blind eye to that which might nurture us in our own heritage.

Kathleen Norris (1993)
Dakota: A Spiritual Geography, p.129

There really aren’t words that you can describe that kind of support. It’s as though somebody just, like the Almighty puts their arms around you and comforts you. . . It’s a feeling all around you that they’re there for you. And it’s just very difficult to put into words, but it’s a peaceful feeling. The only way I can explain it is that it’s like someone were just putting their arms *all round* me, like *all* of them were putting their arms all around me, and I feel a little bit more secure or a little more stronger when I need the strength -- at those times when I need to be able to dig real down deep and to find the strength just to go on.

Dolores Bordas Kosko, November 30, 1995
Member, First Thursday Girls’ Club

CHAPTER 1: INTRODUCTION TO A NARRATIVE STUDY OF HEALTH AND SOCIAL SUPPORT

1.1 Introduction

The connection between social support and health is the subject of my dissertation. Within this broad social dimension of health, I intend to examine (a) how social support influences health, (b) how we in health education communicate with the public regarding the significance of the social context of health, and (c) how I found a new way to understand the relationship between health and social support by uncovering what author Kathleen Norris (1993) suggests “might nurture me in my own heritage” (p. 129).

My supporting research is a narrative study I conducted with an established group of working-class women in the community of McKees Rocks¹ near Pittsburgh. I share a cultural, class, regional and personal history with these members of “The First Thursday Girls’ Club.”² The three areas examined in light of this research -- the relationship between social support and health, the way health educators present this relationship, and what I learned about this relationship through returning to the town and the people where I grew up -- represent the convergence of my current research interests, my 20-year history as a public health educator, and my autobiography as a working-class scholar. By bringing all of these elements to bear, I propose to produce research that has greater authenticity than what I have found in the existing biomedical and social sciences literature. I argue that there is a connection between (a) the lack of authenticity in the existing research on social support and health and (b) public health educators’ trained

incapacity to see the social, political, and economic contexts of people's lives as part of either the cause or the solution of their social and health problems.

My goal in this research is to situate my investigation of health and social support in a specific group of people whose lives unfold in a particular social, cultural, and economic context, and therefore, to gain perspectives broader than the individualized biomedical view of health and the psychotherapeutic view of social support that characterize the literature. By uncovering the social, cultural, and economic determinants of health and social support, I hope to catalyze praxis among public health educators, that is, in bell hooks' (1994) words, "action and reflection upon the world in order to change it" (p. 14). I want this work to be intellectually challenging, *and* I want it to move my colleagues in public health education to action regarding the social and economic changes necessary to advance the health of *all* people who constitute "the public."

I began this study by tracing the existing research on the influence of social support on health. The hypothesis that multiple ties to family, friends, and community are beneficial to health has attracted the interest of physicians, nurses, psychologists, anthropologists, sociologists, and public health educators for over two decades. Seldom has such a multidisciplinary group of social and health scientists agreed for so long on the importance of a single factor in promoting health and well-being.

Since the early 1970s, a vast literature has established a theoretical basis and empirical evidence for a strong correlational relationship between social support and health (House, Landis, & Umberson, 1988). Studies show that social support can affect mortality, psychological and physical function, how individuals and their families manage

disease and illness, how they perceive their health, and many other intermediate health outcomes (Patrick & Wickizer, 1995). In talking about the impact of social ties on health, Dr. Kenneth Pelletier (1994) of the Stanford Center for Research in Disease Prevention has said that “a sense of belonging and connection to other people appears to be a basic human need -- as basic as food and shelter. In fact, social support may be one of the critical elements distinguishing those who remain healthy from those who become ill” (pp. 137-138).

Despite this sustained research interest in health and social support, the centrality of the influence of social support on health has not penetrated into public awareness beyond the general concept that “friends can be good medicine”³ -- a concept that emphasizes the individual and personal benefits of giving and receiving support among friends and family. Neither the public nor public health educators have asked the larger political and economic question that researchers Robert Ornstein and David Sobel (1987) challenge us to think about in the first quote that introduces this chapter, that is, “How are we doing *as a society* to foster this vital factor in the public health?” (p. 191).

Like Ornstein and Sobel, I suggest that we have done little as a society to foster the positive effects of social support on health because we have been limited (a) by individualized and medicalized perspectives on health, (b) by a psychotherapeutic view of social support, and (c) by research paradigms in the health and social sciences that have failed to explain the causal pathways between supportive social contexts and well-being. In this study I propose that a thorough consideration of the historical, cultural, and economic determinants of health and social support, as well as the use of a narrative

research design, may generate a more complex and authentic framework than methods that focus on individual biomedical health status alone for understanding how social support influences health and how the collective support of small, community-based groups can be health-enhancing.

First, I argue for a vision of social support that takes into account the social, economic, historical, and cultural conditions under which social support is received and given. The addition of historical, economic, and cultural perspectives may shift attention from individual problems and psychotherapeutic solutions to the structural and historical causes of social and health problems, as well as to the collective resources and capacities of groups for solving their own problems.

Second, I advance a definition of health as a social and economic issue, as well as an issue of individual choice and personal responsibility. The public's awareness about the connection between social context and health has not been ignited because health-care professionals, health insurance companies, the popular media, and even wellness⁴ practitioners continue to define health problems at the level of individual responsibility, in spite of what we know and what research tells us about the negative health impact of economic inequality and social exclusion.⁵ The belief systems underlying the "individual responsibility" biomedical approach to health are fundamentally in conflict with the notion of socially supportive, collectively-based systems of care.

Third, I contend that we have not fostered the notion of social support for health as a society because the objective methods of the social and health sciences have not rendered the connection between health and social support understandable as a social

issue, as well as an individual issue. Most conceptualizations of social support, such as the functional or structural perspectives, are focused at an individual level and deal with the attributions individuals make about supportive people and events. They are de-contextualized, that is, they do not reveal the contexts in which social support takes place; they do not explain the relational processes that produce social support; and they do not demonstrate how people's supportive interactions are shaped, enhanced, or constrained by the historical or structural conditions of their lives. Thus, while previous scientific research has produced much *information* about social support, there is still little *understanding* of how social relationships connect to human health.

My research presents the results of a different approach, a narrative investigation of the relationship between social context and health. This approach diverges from the methods in which I have been trained as a health educator who assists people to consciously change health behaviors. Narrative strategies allow me to penetrate more deeply into the significance of the social, historical, and economic pathways to well-being, and thereby to discover less well-known, culturally specific mechanisms of social influence on health. Additionally, the restoration of my own family and class history, that is, my personal narrative, inspired my thinking about the damage wrought by the individualizing view of health and the psychotherapeutic view of social support that reigns in, reflects, and serves our market-driven capitalist society.

I conclude with a broader consideration of the ways an emphasis on the social, historical, and economic determinants of health and the use of narrative methods may catalyze a different way to think about the problems involved in the reform of health care.

Everyone recognizes intuitively, to some extent, that the social and economic aspects of life affect our own and everyone's health. However, this knowledge has not entered into the national or state debates on health-care reform -- debates weakened by their almost exclusive focus on medical costs and access-to-care issues. My definition of health as a social and economic issue, as well as an issue of individual choice and personal responsibility, has implications for health-care reform, such as the need to revivify community-based systems of social care and to infuse the political economics of health care into the training of health-care professionals. The concrete concerns, possibilities, limitations, and obstacles of daily living that are an inherent part of people's narratives may direct public health educators to consider in respectful ways how health is shaped, enhanced, or constrained by social, cultural, and economic conditions, and consequently, may redirect our will and our resources to changing those conditions, as well as to changing individual behavior.

1.2 Research Proposal and Questions

I conducted a narrative study of the relationship between health and social support in the lives of seven women from McKees Rocks, a working-class community in southwestern Pennsylvania. These seven women have been friends for over 40 years, and they have met regularly every month in a group they call the First Thursday Girls' Club.

I used oral interviewing procedures to collect narrative data from the seven women of the Girls' Club. The interview process incorporated a brief life history review together with a focused topical interview on the Club and its impact as a social support system in

the women's lives. After transcribing the interviews, I conducted a holistic-content analysis of the interviews, that is, I took into account content from all the stories told to me and viewed the Club as the unit of analysis and interpretation.

In undertaking this investigation, I brought the knowledge I gained from the oral interviews with the "girls"⁶ together with a substantial body of previous research on the influence of social support on health. In keeping with the research traditions preceding this study, I addressed questions commonly found in studies of health and social support, such as the following:

1. What is the structure and function of the Girls' Club as a social support system?
2. What kinds of physical, emotional, and social health outcomes do Club members attribute to their support system?
3. How do the Club members measure and describe those health outcomes?

However, I also conducted this study using a perspective and methodology that are unconventional in previous research designs on health and social support. First, I brought historical, class, and cultural perspectives into an area of health and social science research where little previous work has been grounded in these contexts. Second, I used in-depth oral interviews to collect the data, and conducted a narrative analysis to interpret it. My use of these qualitative narrative methods stands in contrast to the methods of most existing studies on health and social support, where the trend has been toward increasingly sophisticated experimental and quasi-experimental research methods.

Because the use of such qualitative methods is still not orthodox practice in health education research, I examined the contribution my alternative approach may make to the existing literature on health and social support, focusing on these additional questions:

1. How does the addition of historical, cultural, class, and regional contexts in this study contribute to the research on health and social support?
2. How does the use of narrative methods in this study contribute to our understanding of the relationship between health and social support?

Implicit in my decision to integrate the socioeconomic and historical contexts of health and social support into this study and to use a narrative methodology is a critique of previous mainstream Western scientific approaches. Both my critique of previous designs and the alternatives I suggest to them emerge from my theoretical perspectives on (a) what is needed to advance knowledge about the social context of health and (b) how to stimulate social action in public health education. I turn now to a description of the overarching theoretical framework I brought to this study and to an examination of each perspective that contributed to this overall design.

1.3 Research Perspectives and Their Significance

Having reviewed over 20 years of health and social science literature on the relationship between health and social support (Cassel, 1976; Cohen, 1988; Uchino, Cacioppo & Kiecolt-Glaser, 1996), I found that the existing research is largely grounded in the positivist approach of much of Western science. This perspective has been well documented (Cassidy, 1994, pp. 8-10; Guba & Lincoln, 1994, pp. 105-117; Gharajedaghi & Ackoff, 1985, pp. 21-27) to encapsulate a world view with assumptions that include:

1. Knowledge of the “way things are” is both time- and context-free. The meanings of words and the implications of concepts are accepted as “universal” and unproblematic.
2. Knowledge is apprehendable by breaking “reality” into parts and then studying the parts separately. Once separated into parts and categorized, things seem to exist independently, that is, the connections between them may become relatively inapparent.
3. The investigator and the investigated “object” are assumed to be independent entities. Investigators assume that they are capable of looking through a one-way mirror; that is, they assume they can control and eliminate their influence on the research outcomes, which they conclude to be “true.”
4. Investigators subject research questions to empirical tests using experimental or quasi-experimental methods, most often stating findings quantitatively in terms of cause-and-effect laws, which then can be generalized to other settings similar to the one in which the study occurred.

This worldview and the methods of inquiry it inspired has figured prominently in the health and social support research since the 1970s, and as a result, it has contributed significantly to our understanding of the mechanisms by which social support variables correlate with health outcomes. Applying the assumptions of this worldview, health and social scientists have demonstrated that strong social support systems are related in a positive manner to immunity from stress and disease onset (Cassel, 1976; Cobb, 1976; Cohen & Wills, 1985; Uchino, Cacioppo, & Kiecolt-Glaser, 1996) and to longer life

(Berkman & Syme, 1979; House, Robbins, & Metzner, 1982; Orth-Gomer & Johnston, 1986). Conversely, they have determined that social isolation and exclusion are related to decreased resistance to disease and often lead to illness (LaGaipa, 1990; Pagel, Erdly, & Becker, 1987; Revenson, Schiaffino, Majerovitz, & Gibofsky, 1991; Rook, 1984; Rook & Pietromonaco, 1987).

However, the scientific investigation of the influence of social support on health is also limited. These limitations include the following *incorrect* assumptions:

1. Social support and health are universal concepts exempt from specific cultural, historical, or class-mediated experiences or meanings.
2. Social support and health relationships exist in economic, political, and cultural environments, but are not shaped or influenced by them.
3. Social support systems and health are best understood through analysis -- breaking them down into parts and examining how the parts of social support “work” to influence parts of health.
4. The influence of social support on health is most accurately measured by quantifiable biological, psychological, sociological, or epidemiological data.

Most prominently, the prevailing Western scientific approach to the study of health and social support is limited because the question of causality remains unanswered. A succession of increasingly sophisticated scientific methods have not clarified the actual connection -- the link -- between social support and health. Striking support exists in the scientific community for the hypothesis that social ties protect people against a variety of diseases and enhance health, but the mechanisms, processes, and pathways by which

social relationships influence health remain obscure. In effect, the scientific method may have reached the limits of its usefulness in the search for understanding the effects of social relations on health.

My thesis in this research is that the yet unidentified links between social relations and health are nonlinear, complex phenomena that occur *within* human beings and *between* human beings and their social, cultural, and economic environments. I argue that more effective methodologies may restore the “parts” of health and social support to the contextual backgrounds of history, economics, and culture where the authentic links between social relations and well-being may once again become visible. I further suggest that narrative research methods -- methods that essentially rely on stories -- may be more sensitive to “putting together” that which the objective paradigm of Western science has “taken apart” in our understanding of the connection between social relations and health.

Because of the level of abstraction that characterizes this general theoretical framework, the multiple perspectives within this design and the contribution each perspective brings to this study of health and social support require further examination.

Historical, Cultural, and Regional Perspectives

First, I assumed that the health and social support relationship in the Girls’ Club did not take place in a vacuum, but rather in a culturally specific context. While I am not an historian, anthropologist, or economist, I brought to bear historical, cultural, class, and regional consciousness to an intellectual discipline -- health education -- that has largely exempted itself from such influences.

The overlapping contexts of history, economics, culture, gender, and geographic region are fundamental building blocks from which my narrators constructed meaning in their lives. What I mean by this is that (a) the history of their immigrant parents, (b) the culture of their ethnic neighborhoods, (c) the industrial economy of McKees Rocks, (d) the stable relationships that characterized working-class life in the Pittsburgh region during the first half of the twentieth century, and (e) the social construction of women and families in the 1950s -- that all of these factors shaped, to some extent, how the Club women view their health and their social support systems. Conversely, the Club women's unique experiences of health and social support reflected a picture of the socioeconomic structures and culture in which they have lived. Therefore, I considered these overlapping contexts as constituents of meaning and integral parts of my analysis, not extraneous factors whose influence I needed to control or eliminate.

This perspective is significant because it breaks from the reigning paradigm of personal health achieved through individual responsibility in an immaterial world detached from social and economic realities. I view my narrators' overall well-being from what I call a "health-in-society" perspective, which I contrast with the "health-in-isolation" perspective that characterizes both the strict biomedical approach and the wellness approach to health. Theoretically, practitioners in both medicine and the wellness movement recognize the importance of social context, but in practice their approaches too often address only individual responsibility. The concept of "health-in-society" encompasses both historical and current features of the social and economic determinants of health, as well as individual health status.

Feminist Perspective

Through feminism, I was able to overcome the intellectual traditions I inherited that have historically put men at the center of the universe as “knowers” and elevated their experiences to “knowledge” -- what scholar Elizabeth Minnich (1990) has called the “fundamental conceptual error” of mainline Western thought (p. 2). My feminist perspective was at the heart of my choice to center this research in the experiences of working-class women -- not as they are often cast in scholarly work, that is, as the objects of study, but as subjects capable of generating knowledge on health and social support.

The significance of this perspective made itself visible in three areas: (a) in the standpoint of working-class women, (b) in the link between gender, class, and ethnicity, and (c) in the challenge to assumptions of “giving voice.”

First, the Club women provided a view of health and social support from the standpoint of working-class women -- a perspective that has not been well-represented in the existing social and health sciences research. I contend that the narrators in this study may have specific knowledge that originates in their cultural and class positions. Agreeing with Patricia Hill Collins’ (1992) description of marginalized local knowledge, the Club women’s knowledge may “counteract the hegemonic tendencies of objectified knowledge” that dominate the positivist approach to understanding the connection between health and social support (p. 7).

Second, I assumed that my narrators’ world was “gendered.” By that I mean that their experiences of class and ethnicity were different from those of the men in their

families and communities. Their stories do not isolate the experience of gender from ethnicity, class, or historical constraints. Therefore, I examined the Club women's experiences from the perspective of "ethnic gender" (diLeonardo, 1984, pp. 218-229) and from the perspective of class and gender.

The third feminist perspective that shaped this work is "giving voice" to women's lives. While the emphasis on recognizing the agency in women's lives and restoring "voice" to silenced histories is of enormous importance to women's studies, I contend that giving voice is not enough. By this I mean that research on women's lives must give voice *and* must illuminate the larger structures of power that may temper or silence women's voices, because as feminist author Sherry Gorelick (1996) has pointed out, the very nature of oppressive social and economic structures may seem "normal" to those who live within them (p. 26-27). I hold to three levels of accountability: (a) to respectfully listen to the experiences of my narrators, (b) to elicit my narrators' own interpretations of why things are the way they are, and (c) to render my own understanding of the underlying conditions in their lives -- hidden or otherwise.

Here I note a productive tension in conducting a feminist study of women's narratives such as mine. Like sociologist Dorothy Smith's (1987), I consider the everyday world of women's lives as "problematic"; that is, their world, as Smith observed, "is organized by social relations not fully apparent in it nor contained in it" (p. 92). However, my narrators are also reliable witnesses of their own experiences. They often speak in reflective and analytic modes that embody their working-class experiences and larger social consciousness. I see my narrators as providing both the narrative data

for this study *and* a level of interpretation of that material.⁷ I do not decline my own interpretive authority in this work; rather I share it with narrators whose capacity for reflection and interpretation I respect.

Meaning-Centered Perspective

As the investigator in a phenomenological study, I focused on “what people experience, how it is that they experience what they experience. . . and how they interpret the world” (Patton, 1990, pp. 70-71). I was seeking the Club women’s inside perspective on health and social support -- what anthropologists commonly refer to as the “emic perspective” (Fetterman, 1989, p. 30).

The clearest example of the centrality of the emic perspective in this study emerges in a consideration of the concept of “health.” In the second chapter, I trace the history of health as a “construct” -- an idea that is shaped by a particular culture, circumstances, and time. Suffice it to say here that my perspective on health, and subsequently, the way I use the word in this study, differs from the biomedical view. I did not ask the narrators for any external measurements of health status, for example, laboratory tests, psychological inventories, surveys of health behaviors. While the value of objective indicators like these is formidable in the prevention, diagnosis, and treatment of *disease*, I contend that they have limited value for understanding *health*.

From a phenomenological perspective, I argue that health may be as much an experience of meaning-making as it is of objective health status. This concept of “health as a meaning-making activity” privileges subjective experience, and at the same time, is compatible with a health-in-society perspective. From a meaning-making perspective, the

subjective experience of health is directly related to a person's capacities and material resources (a) to reasonably meet daily social and economic challenges in a fast-paced, market-driven, mobile society; (b) to solve common dilemmas and to make sense out of our daily experiences; (c) to contribute care to and receive care from sustainable social relationships; (d) to have work or to fulfill a role that is meaningful and pays or provides a living wage; (e) to feel hope for changing oppressive conditions through collective action; and (f) to live with reasonable expectations for safety, respect, and dignity.

Although I consider this meaning-centered definition of health a substantial improvement over limited biomedical markers, several dangers emerge in emphasizing a meaning dimension to health. The first is blaming the victim or suggesting that any given sick person may be sick because of some personal flaw, for example, getting throat cancer from an inability to speak up or breast cancer from being excessively nurturing. The second is the sentimentalization of illness. While many courageous people may find meaning in living with HIV or a some other chronic disease, there is no intrinsic value to being ill. Ill health is a physical and material burden. Third, there is danger in attributing all disease solely to a person's attitudes or beliefs. A meaning-centered view of health does not mean that people can wish their medical fate nor achieve excellent health by believing it so. But none of this is what I am saying or applying as a perspective in this study. My emphasis here is on (a) how people construct coherent explanations of their health status, including instances of illness, and (b) how those explanations contribute to the experience of life as predictable, manageable, and perhaps meaningful.

Narrative Perspective

Consideration of health and social support from the perspectives of culture, history, class, gender, and individual meaning-making, required a “thickening”⁸ of my understanding, which in turn required exploration of alternative methodological avenues. I chose a narrative method because stories may have the capacity to “thicken” or multiply the number and angles of perspectives with which to understand health and social support.

Ultimately, I contend that narrative analysis may remediate one of the central liabilities of the positivist approach to the study of health and social support, that is, the production of “thin” data -- data that simply reports facts, independent of intentions or circumstances. In contrast, narratives produce thick descriptions that give the context of an experience, state the intentions and meanings that organize the experience, and reveal the experience as a process. Qualitative researcher Norman Denzin (1994) has commented, “Out of this process arises a text’s claims for truth, or its verisimilitude” (p. 505). Traditional studies, according to Denzin (1994) are devoid of the “verisimilitude” necessary to understand the human world and its complex processes. Therefore, while these methods may generate more knowledge, they fail to enhance understanding on how to take action to transform structures and practices for the better.

A narrative perspective is crucial to this study because, in addition to being scholarly and intellectual, I want this work to have practical and liberatory application in changing what I believe has been largely an inauthentic debate over health-care reform. I want this work to move off the page into the consciousness of public health educators so

that we encounter an alternative way to view health as health-in-society, which I contend may be the necessary first step toward authentic reformation of health care.

A Praxis Perspective

I brought the perspectives of a researcher and a practitioner to this study. I hold this research accountable to an intellectual standard of rigor *and* to a social standard of contributing to the solution of health and social problems. Concurring with narrative researcher Donald Polkinghorne's (1988, p. ix) complaint about the failure of social science research to deliver on its promise of improving the human or social condition, I suggest that there is a relationship between the "thinness" of data that authentically connects health and its social contexts and the public's inability to discern and to take collective action regarding the social and economic determinants of health.

If research in health education continues to promulgate the ideas that health is largely biomedical, that health is largely an individual act of responsibility, that health exists "inside" of us rather than in the interaction between us and society, we in public health education may fail in our mission to improve the health of all segments of our society. One of the reasons we have not seen the kind of collective political will that would authentically reform health care is that our research efforts have failed to connect individual health to the collective society, to economics, and to culture. As long as we continue to define the crisis in health that exists in this country as a "health-care" crisis, the further we are from its solution. The crisis in health that I refer to focuses on the enormous disparities that exist in health status between those at the top of the social and

economic hierarchy and those at the bottom. The crisis that I address exists in the social and economic determinants of health.

Given these assumptions that thought and practice should be united, what then might be the new criteria for evaluating the outcomes of research on health and social support, including this study? From the perspective of praxis, I suggest these evaluative questions:

1. Does the research expand the common definition of health beyond the biomedical, in order to help the public achieve a better understanding of the subjective experience of health-in-society?
2. Does the research promote an understanding of the subjective experience of health and illness grounded specifically in the contexts of (a) culturally sensitive meaning-making systems, (b) economic equality, (c) social justice, and (d) gender consciousness?⁹
3. Does the research show the public that the contexts of their lives (the economy, the culture, gender relations, social status, etc.), as well as access to and use of medical care, can enhance their lives or make them sick?
4. Does the research suggest public policies for strengthening the social and economic health of communities as well as on reducing individuals' biological or psychological risk for illness or injury?

I hold myself accountable to answering these questions. I intend to utilize the specific strengths of my qualitative design -- narrative methods and contextual

perspectives -- to create authentic research that has the persuasiveness to broaden our view of health from the personal to the political and economic.

Class Perspective

I occupy a complicated position in this study. I am a researcher and health-education practitioner; I am also a sister, a cousin, and friend to the women of the Girls' Club. Qualitative research theory acknowledges that the position I occupy in this study is essential to an understanding of the meaning that emerges from the data of the inquiry, rather than a complication to be cleansed from the study. I am particularly galvanized by the thoughts of researcher Patricia Carini, who encourages the qualitative researcher to consider her point of view as "one moment of the datum and as such the fabric of her thought is inextricably woven into the datum as she is assumed to be a constituent of its meaning" (Carini as cited in Patton, 1990, pp. 271-272).

When I read these comments, I had already come to realize that my point of view as a person with a working-class consciousness was a "constituent of the meaning" in this study. But Carini's theoretical perspective provided a doorway into thinking about my class consciousness, not merely as a perspective or viewpoint, but as *part* of the data.

In the section that follows -- the last of the specific theoretical perspectives I took in this study -- I describe the connection between the reclamation of my working-class consciousness and the integration of that consciousness into my professional understanding of health and social support. As I describe the connection between my working-class heritage and this research on health and social support, I enter an intermediate space of "both-and" that anthropologist Ruth Behar (1996) defines as "a

borderland between passion and intellect, analysis and subjectivity, ethnography and autobiography, art and life” (p. 174).

My goal in exposing my position in this work is not to satisfy the requirements of new conventions in scholarship. Rather my intention is to show that the working-class perspective I carried with me from McKees Rocks is a part of the way I interpret meaning and discover knowledge about health and social support within the Girls’ Club narratives. Further, my intention is to show the impact of this research (a) on my understandings of myself, (b) how I came to see the world the way I do, and (c) how I discovered the ways my working-class heritage continued to feed me, even when I was disconnected from it.

Working-class consciousness and my research. This narrative *study* of how social support and friendship contribute to the physical and emotional well-being of the women of the First Thursday Girls’ Club is also a *story* -- a story in which I am a player because one member of the group is my older sister. The roots of my life and the lives of the seven women who are the subjects of this study -- the characters in this story -- are connected.

When I began this work, I saw myself as a bridge between this story of women’s friendship and the field of community health. I interviewed the women of my sister’s Club, and I listened to the lessons on support and health they had learned over their 40-year friendship. I wanted to carry those lessons to health education professionals interested in the connections between individual well-being and community support systems. I believed those lessons, embedded in layers and layers of stories, would

provide an alternative to the research methods in the social and health sciences that separate the experience of social support from the context of peoples' lives.

I felt uniquely empowered to be this bridge because of my dual perspective as both an *insider* and an *outsider*. I write from the *outside* position of my formal education and over 20 years of experience as a health educator. I also write from the *inside* perspective of knowing the women of this group all my life. We grew up in the same neighborhoods, went to the same schools and churches, and could tell you what factories each of our fathers worked in. We have always been in the background of each other's lives.

As both insider and outsider, I saw myself positioned to write their private, untold story, making public what they know about friendship and support, informed by what I know as a health professional. I felt prepared to be this bridge because I was both an expert in the health education field and family to this group of friends.

What I was not prepared for, however, was that this work would also be a bridge for me between my current professional passion and my past personal experiences growing up in McKees Rocks. My research project required that I go home to McKees Rocks to conduct between four and six hours of interviews with each member of the Girls' Club. As a result of the on-site research, I visited and spent more time in McKees Rocks than I had in the 30 years since I left to go to graduate school.

During my visits, I walked around McKees Rocks taking pictures of streets, houses, bridges that had faded from my memory since I left in 1966. I felt like an amnesiac waking up to a once familiar landscape. Long ago as a child, before I had even

known what McKees Rocks stood for, I had heeded some invisible mandate from the dominant culture which said “dispose of it,” “get rid of it,” and “get on with it.” Walking through the old neighborhoods, I realized that I needed to recover more than my individual memories of McKees Rocks. I needed to recover the collective memory -- the history -- of this working-class community, a history that in many ways I had never been allowed to know.

I tried to “see” what had happened in McKees Rocks as a place in history -- a place with a collective past. I wanted to know what had taken place in McKees Rocks between 1892, when it was incorporated, the 1940s, when industry boomed, and today, when it stands boarded up, rusting, and filled with old people. I realized that I had no historical understanding of the industrial community where I grew up or the changes that had taken place there. Beyond fourth grade lessons on how Alexander McKee built a trading post at Chartiers Creek before the Revolutionary War, I had no knowledge of the collective past of my hometown.

I set out to correct the suppression of knowledge about my community’s history. In order to understand the social and economic circumstances in which the “girls” of the Club grew up, I studied the industrial history of McKees Rocks and the immigrant families who lived and worked there between the mid-nineteenth century to the present. As I gained more knowledge about the histories of the Club women’s families, I learned more about my own. It was like coming across a lost family photograph. I recognized that the little girl sitting cross-legged in the front row was me. I belonged in the picture.

But I could not remember ever being there. I knew that my connection to these people and McKees Rocks was severed, but I could not summon up what had happened.

Prior to starting this work, I did not know anything about the immigrant or working-class history of my hometown. I found that information about McKees Rocks' ethnic and industrial history is still not easily accessible. A few brief references to McKees Rocks appear in scholarly texts.¹⁰ Several out-of-print public histories of the town associated with church anniversaries and the 1992 borough centennial celebration are also available.¹¹ I pieced together an historical perspective on McKees Rocks from these sources and from broader histories of industrial communities in Pittsburgh. With the addition of that history, I see everything in McKees Rocks in realignment. From where I stand now, nothing looks the same.

During one of my research visits to McKees Rocks, I walked across the foot bridge from Island Avenue to the "village" of Presston. Named for the Pressed Steel Car Company, Presston was home to hundreds of the plant's workers from the early part of the twentieth century to the early 1950s. The Pressed Steel Car Company, later the Wheel and Axle Division of Carnegie Steel Company, and then U. S. Steel, was one of the largest industrial employers in McKees Rocks. It is no accident that the "girls" mention "Wheel and Axle" many times in their narratives on family work life. Pressed Steel touched the lives of thousands of McKees Rocks workers and their families in its nearly 50 years of operation.

The same row houses that the company once provided to workers still line the streets of this river bottom section of McKees Rocks. The houses remain in remarkably

sturdy condition. Their tidy postage-stamp front yards display the same white hydrangeas, tomato plants, and carefully painted silver metal fences I used to see all over McKees Rocks when I was young.

As I returned, I walked up and down the streets between the Ohio River and the foot bridge. I tried to imagine what those same streets had looked like during the strike of 1909 when unskilled immigrant workers allied with the International Workers of the World (I.W.W.) for fairer wages at the plant (Bodnar, 1985, pp. 102-103). I wondered, as I still do, how it could be that I knew nothing about a strike so large and bloody that six strikers, two of their sympathizers, two strikebreakers, and one police were killed in gun battles. This strike must have terrified the plant's owners. Accounts reveal that the Iron and Coal Police, who were the company's own security force, were ordered to conduct a house-to-house search to root out the radical labor organizers from the homes of their militant immigrant sympathizers -- a search that took place near the O'Donovan Bridge on Island Avenue in the very neighborhood where I later grew up.¹²

I grew up knowing nothing of this event as part of either the formal history of my town or the informal memory of its people. I was especially puzzled about how I, the daughter of a union factory worker, who grew up in the heart of the industrialized Ohio River Valley, knew nothing about this strike. There are no monuments to the strikers in Presston to acknowledge what happened there. What power could erase a tragic event of these proportions from the collective memory of my hometown, especially given the widespread knowledge of the Homestead Strike of 1892? Why was there silence on what happened in Presston -- in McKees Rocks in 1909?

What I later learned about the strike was that it represented a successful combined effort (a) between unskilled immigrant labor at the Pressed Steel Car Company and the radical I.W.W and (b) between skilled and unskilled labor. While the strike produced severe violence against the strikers and deaths, the company eventually capitulated to immigrant militancy and made concessions that ended the strike. The company saw that, even with only a minimum of union encouragement, the immigrants could be militant and that the I.W.W. had potential immigrant support. I speculated that the nationwide newspaper coverage of Andrew Carnegie's brutal defeat of the union movement in Homestead in 1892 (Krause, 1992 pp. 13-43), where the striking workers and their unions were portrayed as barbarians and failures, as well as some of the historical accounts that followed, were a reflection of a preferred view of industrial history over this untold story of successful immigrant organizing in Presston in 1909, especially when those organizing efforts were the result of immigrants working together with the I.W.W.

From Presston, I continued my walking tour of the old neighborhoods heading down Island Avenue -- or what is left of it -- between the bottom of Norwood Hill and the McKees Rocks Bridge. Hall's Cafe at the corner of Island Avenue and Adrian Streets was dark and dilapidated, but the stuttering neon sign said it was open for business.

Most of the businesses that lined Island Avenue in the 1950s and 1960s were gone. I walked this way to school every day with my girlfriends. I could still see the stores I passed up and down Island Avenue. Al Mancini's Grocery Store, where we bought lunch meat, fruit, and fresh Italian twist bread "on the book" and paid once a week, was no longer there. Neither was Tony Mancini's Bar and Grille, where you used

to be able to get the best and biggest fish sandwiches in McKees Rocks. Prosko's Funeral Home was gone. In its place was a tattoo parlor. Saint Cyril and Methodius Church and School buildings were still there, used now as warehouses. A Stop N' Go Convenience Store and gas station now occupied the corner where the Blaine School used to be. But Jenny Lee Bakery, a local landmark, halfway down Island Avenue, was still there where the grandsons of "Mike the Baker," make the cakes, strudels, and New Year's pretzels that people drive from all over Pittsburgh to buy. Pacienza's Heating and Cooling -- where my dad bought our first gas furnace -- now housed a beer distributor's warehouse. At the end of Island Avenue where it met Chartiers Avenue, rusting metal remnants of Duquesne Light Company's switching station stood like unearthed fossils.

McKees Rocks has been going downhill since the mid-1950s. Part of coming home for me was waking up to the history behind the downturn in the town's fortunes. As I prepared for this study, I learned about the complex events that explained why this place where I grew up was now largely boarded up. I learned about the closing of the mills that no steelworkers thought would happen. I read the conflicting explanations of why the mills left. I heard stories about people who were forced into early retirement and people who watched their friends get depressed, divorced, and sick. I listened to how lives changed as families adjusted to the economic realities that the mills were closing.

This historical perspective has been invaluable to the way I see my hometown, what happened there, and its effect on the women in the Girls' Club. It laid the foundation I needed to see the "girls" in context. But my historical research on McKees Rocks triggered an even more personal awareness in me.

Immersion in the history of McKees Rocks restored an unexpected sense of wholeness to the way I now look at my personal past. I do not mean to imply that I have led an unexamined life. To the contrary, I have spent a good deal of time trying to understand where I came from and how I survived as a smart, verbal kid in a working-class, Italian American family that did not value education beyond its instrumental ability to get you a good job for life, to make money, something you could count on.

But what I came to realize in the course of doing this work was that, as an adult, I have been taught to rely almost exclusively on a psychotherapeutic perspective to deal with my anger and frustration about the constraints I grew up in. This psychotherapeutic model works by framing family backgrounds like mine into the category of *dysfunctional*, a problem to be overcome. The model interprets my dogged determination to do anything I want if I just work hard enough as a *personal addiction*. Throughout my life, this psychotherapeutic lens has kept me focused either on personal or interpersonal family dynamics -- of which there were plenty -- or on how those old dynamics have been replayed as current patterns of behavior.

What this model has never allowed me to see, however, is how my life and the lives of people in my family and community are connected to a larger social and economic history. In particular, I never learned to identify, let alone understand, the meaning of my working-class origins. Psychotherapy gave me a language to talk about the disjuncture I felt between myself and the halls of academia, where I have spent most of my working life, but it was language focused on overcoming individual and family problems in order to fit in and get ahead. It did not expand my consciousness of class or class struggle. It did

not promote my understanding of what I and other working-class people have been able to do, and not do, within the constraints of larger social and economic systems. Soothed by the effect of the psychotherapeutic emphasis on *individual healing*, I have imbibed the cultural myth of classlessness for most of my adult life. I became numb to what it means to be a woman of working-class origins.

Consciously connecting with my working-class background through this project has been redemptive for me. The shift from analyzing my individual personal past to thinking historically and politically allows me to consider my personal history from inside the larger collective history of European-ethnic, working-class people in urban, industrial settings like Pittsburgh. Contrary to de-personalizing the puzzle of how I came to be who I am, this shift in perspective moves me to identify compassionately with my family and my community in a way that the individualized, psychological approach never elicited. Engaging in this historical research with the First Thursday Girls' Club has privileged me with a new perspective on myself, them, the families we came from, and the town and the times in which we grew up. We were people positioned in a particular time and place, all doing the best we could with what we had.

I grew up on Island Avenue in McKees Rocks, Pennsylvania, watching endless lines of cars filled with workers going to and from the plants on Neville Island.¹³ I knew that there was a difference between those of us who lived in this old industrial town on the Ohio River west of Pittsburgh, and those who lived up in the hilltop suburbs of Mt. Lebanon south of Pittsburgh. But I did not have the words then for what I knew. I saw,

smelled, heard the differences between McKees Rocks and Mt. Lebanon, yet I had no useful way to think about those differences, nor language with which to talk about them.

When Mt. Lebanon High School came to McKees Rocks to play football, we relished grinding their gold and white uniforms into the dirt of our field. The games had a physical intensity that went beyond rivalries with other local mill towns like Aliquippa or Ambridge. It was important to send Mt. Lebanon home with their bodies remembering where they had been. But going away to play a game at Mt. Lebanon was a different story. Our school could afford to have our band uniforms cleaned only twice-a-season. We were drab and dirty as we stood next to them in their pressed white gabardines with gold epaulets on their shoulders. Their team looked bigger and more formidable spilling out of the doorway of the white granite high school, where we had heard that students could study Spanish, French, German, *and* Latin, not just Spanish like at ours.

What I knew, without the words to explain it to myself, was that class divided McKees Rocks and Mt. Lebanon. Living in Mt. Lebanon automatically signaled that your father worked as a manager, that your house was large and you had your own bedroom, and that you were a teenager with access to the resources that guaranteed a quality education, high expectations, and hope. Most of all, you got the chance to *believe* that you were entitled to all that opportunity, as though it were your right, like breathing. In McKees Rocks it was tough to *believe* that you could have the same kind of opportunities or the same kind of life.

It was that unconscious air of belief and hope that I felt most jealous of, most angry about. Those of us who grew up in the geographical and social location of a place

like McKees Rocks did not have access to the resources that made life appear so cushy for the Mt. Lebanon kids. Our access to quality education, high expectations, and hope was either nonexistent, or limited to second- or third-class versions like six-week business schools or “going to the service,” which in the Rox meant joining up with any one of the armed forces. Even having “made it” into college as a freshman at Pitt,¹⁴ when I sat in classes with students from all over the Pittsburgh area, including Mt. Lebanon, I wondered how I ever got there and whether I could “act” as smart as everyone else seemed. At the time, I had no tools to deal with this, and certainly no way to question the basis for my fear.

Now, over 30 years later, in the midst of doing the research for my long postponed doctoral degree, I feel my words and consciousness fuse so I can talk about my experiences of class. I get glimpses of why I am *writing* about the women of the Club rather than *being* one of them. I understand why I have this opportunity to produce a scholarly work that brings the knowledge of women from working-class backgrounds like my own to a public forum where our perspectives can be valued and of use.

As far as I can tell, I am now waking up to my consciousness of class both because of and in spite of my education. First, I would not be doing this research or working on a doctorate had I not been able to take advantage of low-cost, federally subsidized, quality education that was available in the 1960s. I was smart, white, and the beneficiary of the attention and support of a couple of key high school teachers -- themselves second-generation children of immigrants who had gone to college.

Second, I was a young college student at the time of the Civil Rights Movement, the Women's Liberation Movement, and the protest over the war in Vietnam. These urgent political movements stimulated a national debate about who was equal, who was free, and who had the power to make social changes. I was not directly involved in any social change movements as a young undergraduate at Pitt, but I heard the sound of the voices of protest all around me on the television and in the newspapers. Some of the younger sociology and political science professors at the university talked about the social protest movements in class. These political voices were distant sounds at the time. But because they existed, they had the power to exhort me to search for ways to assert myself and engage in work that could make the world a more just place. The political activity that took place all around me added volume to the small voice in my head telling me that my life and the work I would do mattered.

It was this self-determination, combined with a good college education, that galvanized me to leave the family-centered, industrial community where I was born. My mother always used to say to me, "When you started Pitt, you left us." Then I understood her to mean the amount of time I put into my studies rather than family life, but I hear her words differently now. My college education fanned the sparks of belief I had in myself as an "individual." I wielded that belief like a knife, using it to cut away from the gendered, ethnic, class-based destinies that women in my family and town -- including the women in my sister's Club -- were expected to fulfill. I "worked" at my education and it paid off in raising me up and out of where I had come from.

My formal education supported my intellectual development. I threw my heart and soul into academia and re-created myself in its image. I have succeeded as a teacher, a researcher, a health educator, and a professional. My work has been acknowledged within higher education and applauded by external funders and professional associations. I feel passionate about the work I do with students, especially those who are the first in their families to attend college.

But my identity as an Italian-American woman from an immigrant, working-class background has remained invisible in my life as a student and a worker in higher education. As a student, I learned that my professors and many of my classmates assumed I led lives just like theirs. They assumed that everyone's family read, talked about current events, and had shelves lined with books. There were probably a lot of us at Pitt at that time from bookless homes who were the first in our families to go to college, but no one talked about the mistaken assumptions or objected to them.

Later on in my working life in the academy, I learned that my communication style was considered emotional and "Italian." When I questioned expectations of overwork or suggested the collective power of unions as a way to fight the "academic speed up," I was considered "unprofessional." From my working-class perspective, I could see the politics of higher education as an example of another hierarchical system where exploited groups are set up to fight it out for a place at the bottom. And I identified with my colleagues of other races and ethnicities, who claimed that the university erased their identities. I could see there was little to no room in the

university's formal commitment to "diversity" and "multiculturalism" for working-class people who wanted to bring our consciousness to scholarly work.

It is sobering for me to recognize the absence of class perspective in my educational and work experiences in universities. But I find equally grim the poverty of class consciousness I can now see in my early experiences in the Women's Movement as a graduate student in the 1960s. Despite the important work the Women's Movement accomplished, I was not challenged to recognize or use what I had learned growing up in McKees Rocks -- important knowledge about economic inequality and social injustice.

Looking back, I can see how confusing the rhetoric of the Women's Movement was. First, class was named in the now familiar litany of "race, gender, ethnicity, sexuality, disability, *and class*." But then class was ignored. It was the least addressed of the issues that demanded work and attention. And we never talked about our class backgrounds. Further, as a feminist who was working in institutions of higher education, I was encouraged to analyze the structural power of gender, *but not in relation to being from a working-class background*. As a white woman, I was told it was imperative to understand and take responsibility for the power and privilege that a racialized system confers on me and withholds from others, *but not in relation to my class background*. Neither my formal university education nor my involvement in the Women's Movement nor feminist politics gave me the tools I needed to scrutinize the socioeconomic realities of class in my life.

When I began my doctoral work, I did not consciously set out to investigate my working-class background. However, I did make a conscious choice to go beyond the

boundaries of the social and health sciences in which I have been formally trained. Most importantly, I added an historical, cultural, and class analysis to the study of social support and health in the Club. With the addition of class consciousness, I began to hear the women of the Girls' Club differently. I noted a tone that was both descriptive and didactic, emotional and authoritative.

Their stories were indeed poignant. Several of them are excellent storytellers who know how to connect the events of the past using memorable personal details and images. But it was clear to me almost from the beginning of the interviews that the narrators were not just describing their friendship. They were also reflecting on the Club's meaning for them and others who might listen to their story and benefit from their collective struggle for health and wholeness.

I realized that the work I was doing with the "girls" was different from the idea I had started with. I was no longer just recording their story or "giving them voice," rejecting a stance which historian Michael Frisch (1990) has described as the "deeply-rooted, class based ideology that sees ordinary people as sources of data, rather than as shapers and interpreters of their own experience" (p. 160). I began to understand that I -- a woman from working-class origins -- am collaborating with other women from the working-class in order to articulate an innovative and alternative way of thinking and theorizing about social support and health.

Nothing in the background of the Club women suggests, at least to health "experts," that they also would be expert sources of knowledge or theory about health and social support. While the "stories" of working-class people may be acknowledged in

research circles for their emotional impact, knowledge produced by working-class people is rarely recognized, never mind theorized, in academic institutions.¹⁵

But I believe the place at which I stand empowers me to receive their working-class knowledge and to theorize about the Girls' Club as the embodiment of a radical alternative to the individualistic view of health that currently commands the attention of the health education profession. With the addition of my own class consciousness to this research, I can recognize the experiences of these women as specific knowledge about health in community -- knowledge absent in the academic literature.

Much of what I heard in the Club women's narratives presented a counterpoint to the dominant social construction of "health." First, they focus on the "meaning" of health and well-being as it relates to the overall quality of their lives rather than on absolute technological measures that are the common way to assess health. The way in which the "girls" might feel "well" even when they are ill challenges the contemporary American obsession with "objective" biomedical and psychometric tests as the preeminent measures of health.

Second, their dedication to the *collective* well-being of their group stands in opposition to individualistic notion of "self-responsibility" -- one of the central tenets of contemporary health education. The collective story the "girls" tell may be a counternarrative to the largely white, middle-class American preoccupation with health as a private experience and individual responsibility.

It was this same individualistic, inner-directed perspective that severed me from answers about my identity and purpose as a person with working-class roots. I believe

my yearning for health and wholeness drew me back to McKees Rocks and the community history I never knew. There I regained consciousness about my working-class background as a shaping force in my life, work, and health. There I also came to understand the Club women's perspective on health and social support as knowledge specifically informed by their cultural and working-class experiences.

Based on these understandings, I propose that the unseen connections between health and social support may become visible against the contextual background of community-based, collective, informal systems of friends like the Girls' Club. Further, I propose that the connection between health and social support that exists within these complex systems is highly sensitive to the external conditions of history, politics, culture, economics, and social relations.

Now, as I present to you this study and story of the First Thursday Girls' Club, I see myself not so much as a bridge *from* the world the "girls" and I grew up in, *to* the professional world of my peers in health education. Instead, I feel more an inhabitant in *both*. I am not a scholar on a bridge with one foot going "back" to the people I have left in order to collect raw material and touching stories, and one foot going "forward" toward my profession with my academic analyses of those stories. There is indeed a bridge but it is one being built as the Girls' Club and I work together with "shared authority."¹⁶

These women and I -- we who share a common working-class history -- are on a parallel journey of asserting ourselves publicly. The women of the Girls' Club want what they know about friendship to become part of public knowledge. They think they have something to say. I want what I know about the connection of social support to health to

become part of public knowledge. I also have something to say. Our common purpose is to bring to light new knowledge about the relationship between health and friendship. We collaborate on this project that is a *story*, telling the tale of the Girls' Club, and that is also a *study* interpreting the meaning and social relevance *they and I* find in that story.

1.4 Looking Ahead

In the chapters that follow, I describe the knowledge I gained about the relationship between health and social support from the oral narratives of the Girls' Club. I also discuss the implications of this knowledge for the field of public health education. Additionally, I identify how narrative methods may contribute to the advancement of research on health and social relations.

In Chapter 2, I discuss the broad interdisciplinary research that informs the four major concepts involved in this study: health, social support, narratives, and context. My goal in this chapter is to develop a contextual background against which to read and interpret the oral interviews I conducted with the members of the Girls' Club.

In Chapter 3, I describe in detail the narrative methods I used to conduct this research. I outline the logistics of the project which include (a) preparing for the study, (b) processing the transcripts and the tapes, and (c) analyzing the narrative data.

Chapter 4 contains a presentation of the narrative data. Using materials that I selected, edited, and organized from the original transcripts, I present each narrator's brief life story together with her "topical oral history"¹⁷ on the Club. I develop "narrative bridges" which tie parts of the story together and connect those parts back to larger ideas, and to concepts from the review of literature.

In Chapter 5, I present my analysis and summary of the data through five interpretive essays. The essays contain my interpretation of the meaning of health and social support in the Girls' Club. Additionally, I discuss the contribution narrative methods make to the study of health and social support.

In Chapter 6, I discuss the implications for public health education and research that emerge from the content and the methods of this study. I suggest connections between this work and the way we in health education think about health-in-society, the way we train health professionals, and the way we educate the public about the care of health. Additionally, my goal in this final chapter is to demonstrate how my research results may relate to a more authentic and enlivened debate regarding health-care reform.

1.5 Chapter 1 End Notes

¹ McKees Rocks, Pennsylvania, often called “the Rox,” is located four miles west of Pittsburgh, Pennsylvania. Its location on the Ohio River and wide flat river bottom land expanses made it an ideal location for industrial development and railroads in the early part of the twentieth century. A thriving industrial and railroad center up through the mid-1950s, the Rox today suffers from a combination of industrial and generational flight, as well as a history of political corruption, racketeering, and gambling. As a result, McKees Rocks’ population has eroded to about 8,000 – less than half of what it was 60 years ago. There is little left in McKees Rocks that memorializes its proud immigrant and industrial past. For more information see Hopey, D. (1989, Nov. 18). The Rox: Up against the odds. *The Pittsburgh Press*, pp. 14-21 and (b) Presutti, D. H. (1992). *McKees Rocks Borough Centennial History, 1892-1992*. McKees Rocks, PA: McKees Rocks Centennial Celebration Committee.

² Throughout this paper, I use the terms *First Thursday Girls’ Club*, *Girls’ Club*, and *Club* interchangeably, as the members themselves do. Although the Club has met since 1958, the formal group name did not emerge until the 1970s. I discuss the history of the group’s name in Chapter 5. Suffice it to say that the members find humor and delight in calling themselves “girls,” and they enjoy the fact that the group’s name reflects their history as friends from “girls” to adults.

³ “Friends can be good medicine” was the motto of California’s Department of Mental Health campaign in 1981 to promote social support as a health enhancing factor in people’s lives. This health education effort was designed to make the public aware of their needs for friends and other supportive relationships in order to promote “physical well-being . . . and emotional health.” See California Department of Mental Health. (1981). *Friends can be good medicine*. Sacramento, CA: Publications Unit, California Department of Mental Health. The theme of “friends as medicine” appears often in health and wellness newsletters and in popular magazines. For examples see (a) Friends Can Be Good Medicine (1998), *Mind/Body Health Newsletter* 8(1), 3-6 and (b) Stowe, R., Rosenblatt, R., & Foster, R. (1997, Sept./Oct.). Friends. *Modern Maturity* 40W(5), 39-45].

⁴ “Wellness” refers to a dimension of health education that promotes the idea that there is more to health than the absence of disease or disability. Wellness practitioners encourage the reduction of behavioral risk factors in individuals and the adoption of health-enhancing behaviors such as increasing fitness level, improving the quality of diet, and modifying stress. The central tenet of the wellness movement is that, to a large extent, individuals are responsible for their own health. See Ardell, D. (1985/1999). *14 days to wellness: The easy, effective, and fun way to optimum health*. New York: New World Library.

⁵ Since 1995, for example, the prestigious public health periodical, *American Journal of Public Health*, has devoted at least one entire volume to social class, socioeconomic factors, and health each year. See *American Journal of Public Health* (a) July, 1995, 85(7); (b) April, 1996, 86(4); (c) September, 1997, 87(9); and (d) September, 1998, 88(9).

⁶ Occasionally, I refer to the women of the Club as they most often refer to themselves, that is, as “girls.” When I use this term to refer to the Club women, I do so using quotation marks.

⁷ I discuss the methods I used to involve my narrators’ in the interpretative phase of this project in Chapter 3. Here I simply want to emphasize the point that a researcher must be able to *see* narrators as capable of interpretation in order to ask interpretive questions, and that the ability to hear authority in the narrators’ responses, especially in the case of working-class or other marginalized narrators, reflects the interviewer’s own standpoint.

⁸ Clifford Geertz explained that “thick description” is “what the ethnographer is faced with – except when (as, of course, he must do) he is pursuing the more automated routines of data collection – is a multiplicity of complex, conceptual structures, many of them superimposed upon or knotted into one another, which are at once strange, irregular, and inexplicit, and which he must contrive somehow first to grasp and then to render” (p. 10). See Geertz, C. (1973). Thick description: Toward an interpretive theory of culture. In C. Geertz, *The interpretation of cultures*. New York: Basic Books, pp. 3-30.

⁹ The context of gender consciousness that I refer to is not a bifurcated view of gender. In viewing gender as one of the contexts in which the meaning of health and well-being is constructed, I favor a less dichotomous approach to gender relationships for one that highlights the dynamic quality of the structure of gender and allows for the possibility of permeable boundaries. I therefore view gender-based experiences in this study in complex interaction with social, economic, and cultural factors. Like researchers Gerson and Peiss (1985) I consider gender an on-going interactional process between men and women, and also among women and among men. See Gerson, J. & Peiss, K. (1985). Boundaries, negotiation, consciousness: Reconceptualizing gender relations, *Social Problems*, 32, 317-331).

¹⁰ See pp. 102-103 & p. 105 in Bodnar, J. (1985). *The transplanted: A history of immigrants in urban America*. Bloomington, IN: Indiana University Press.

¹¹ I consulted two useful locally-produced public histories: (a) Condeluci, S. (1989). *An historic portrait of McKees Rocks and Stowe Township*. McKees Rocks, PA: Unpublished manuscript, and (b) Presutti, D. H. (1992) *McKees Rocks Centennial History, 1892-1992*. McKees Rocks, PA: McKees Rocks Centennial Celebration Committee.

¹² I have found two differing accounts of the strike. Historian John Bodnar says that six strikers were killed and that the house-to-house search was conducted by state troopers. See Bodnar, 1985, p. 103. Local McKees Rocks historian Sinbad Condeluci, quoting from an August 26, 1909 issue of the *McKees Rocks Gazette* article, says that six strikers and two police were killed and the search was conducted by the "dreaded Coal and Iron Police." See Condeluci, S. (1989). *An historic portrait of McKees Rocks and Stowe Township*. McKees Rocks, PA: Unpublished manuscript, pp. 18-20.

¹³ Neville Island is a five-mile strip of land that sits in the Ohio River about five miles west of Pittsburgh. It used to be all farms. As late as 1926, the old Waldorf-Astoria Hotel in New York featured Neville Island asparagus on its menu. The Island experienced frantic industrial growth during World War II, when the Dravo Corporation launched hundreds of landing craft from its shipyards there. By the 1970s, there were more than 50 different heavy industrial plants on the Island. Today, these factories are either vacant or being used as warehouses. The only thing left that represents the old days are the blast furnaces of Shenango Incorporated. See Toker, F. (1986/1994). *Pittsburgh: An urban portrait*. Pittsburgh: University of Pittsburgh Press. p. 294

¹⁴ Pitt refers to the University of Pittsburgh where I entered college in August 1962, and graduated with a Bachelor of Arts degree in May 1966.

¹⁵ Janet Zandy and Joanna Kadi discuss how working-class experience is "used" by middle- and upper-middle class academics to develop theories about the working-class. Kadi offers a particularly striking analogy. She compares the way the capitalist system uses the labor of working-class people to transform raw materials into products to the way the academic system uses the feelings and experiences of working-class people to derive theory. See (a) Zandy, J. (Ed.). (1994). *Liberating memory: Our work and our working-class consciousness*. New Brunswick, NJ: Rutgers University Press, pp. 1-15, and (b) Kadi, J. (1996). Stupidity deconstructed. In J. Kadi, *Thinking class: Sketches from a cultural worker*. Boston: South End Press, pp. 39-57.

¹⁶ I discuss the concept of shared authority in detail in Chapter 3. See Frisch, M. (1990). Oral history and the presentation of class consciousness: *The New York Times v. The Buffalo Unemployed*. In M. Frisch (Ed.), *A shared authority: Essays on the craft and meaning of oral and public history*. Albany: State of University of New York Press, pp. 59-80.

¹⁷ Rubin and Rubin contrast topical oral histories with life histories. The former is done on culturally important concerns and the narratives are focused. The latter focuses more on the experiences of individuals and what they felt as they passed through the different stages of life (p. 27). My work with the Girls' Club consists of both. See Rubin, H. J. & Rubin, I. S. (1995). *Qualitative interviewing: The art of hearing data*. Thousand Oaks, CA: Sage Publications.

CHAPTER 2: A REVIEW OF THE INTERDISCIPLINARY LITERATURE

2.1 Introduction

Four major concepts -- health, social support, narrative, and context -- undergird the structure of this interdisciplinary study. These are all complex notions. Each has been defined in a number of ways by different disciplines, and no single definition is uncontested. While I provided broad, theoretical perspectives on these concepts in the first chapter, here I turn to a more in-depth review of how these ideas are represented in the scholarly literature. Because each of these four concepts has a vast, interdisciplinary literature associated with it, my goal was not to exhaust the research. Rather, my intent was to conduct a selected review of previous research to assist me in understanding

1. current knowledge regarding the health and social support connection in the health and social sciences,
2. the strengths of narrative research and its “fit” in an investigation of the health effects of social relations, and
3. the historical, cultural, economic, and regional contexts of my narrators’ lives.

My interdisciplinary journey through several literatures was challenging. I drew on selected resources from familiar disciplines -- health education, psychology, and sociology -- to establish a knowledge base on the way social context influences health. However, I also traveled to new disciplinary areas -- history, anthropology, women’s studies, narrative studies -- in order to develop a different way to investigate health and social support in the Girls’ Club.

In my zeal to create a distinct integrative way to study the connection between health and social support, I borrowed methods, concepts, and theories from previously unconnected disciplines. In doing so, I may also have borrowed some of the common problems in interdisciplinary research, such as lack of sufficient depth in a given discipline, misunderstanding of borrowed material, and use of concepts out of context (Klein, 1990, p. 88). While remaining vigilant to common problems like these, I approached the diverse perspectives with a desire to weave into fabric the many unquestioned and uncombined, and therefore invisible, links between knowledge in different disciplines about social support and its effect on health.

2.2 The Making of Health

Human beings have been trying to account for the origins of health and illness since the beginning of recorded history. Indeed, the attempt to account for disease permeates the development of the many of world's great spiritual traditions and religions. The concept of of balance -- balance that exists *within* the individual on the one hand and *between* the individual and the environment on the other -- is repeated in traditional healing modalities worldwide, although it is put into practice differently in different cultures. For example, according to cross-cultural health educator, Collins Airhihenbuwa, (1995), African traditional medicine seeks to secure and maintain a balance among the individual, elements of nature, and heavenly bodies. Within the individual, "a balance is maintained among organic disorders, physiological disorders, and social conflicts" (p. 51).

The notion that health was a balanced order and a rational interplay of the basic elements between physical bodies and the natural and social world also characterized the

Greek worldview. For Greek philosophers, people were healthy when they were integrated into the harmony of the totality of their world (Illich, 1996, p. 22). Author and physician James Gordon (1996) notes this integrated perspective in the work of Hippocrates, who observed “a wonderful balance between respectful observation of, and experimentation on, nature and a deep appreciation for its mysteries” (p. 23).

However, the concept of health in European modernity -- the concept in which Western practices are rooted -- represents a break with this tradition of harmony between people and their environments. According to Gordon (1996), Hippocrates’ works were lost during the European Middle Ages, and with them the experimental method and expansive spirit that appreciated the social and ecological context in which illness occurs.

By the early seventeenth century, European philosophers were developing an “objective” worldview and a method that would foster the disciplines still considered basic to biomedical practice and education: anatomy, pharmacology, bacteriology, and physiology (Gordon, 1996, p. 24). For the next three centuries, scientific enterprise and the medical research it inspired were ruled by the descendants of Francis Bacon, who was convinced that modern scientists would gain knowledge and power by aggressive experimentation, and by Rene Descartes, who asserted that there was a separation between the mind, spirit, and body (Cassidy, 1994, pp. 5-31).

Since the seventeenth century, the attempt to master nature has displaced cosmic harmony as the basis for health. The idea that individuals can engineer their health took its place. “Health as a possession” has gained acceptance since the last quarter of the eighteenth century, when as Ivan Illich (1996) has pointed out, it became commonplace to

speak of “my body” and “my health” (p. 22). With the addition of advances in the treatment of disease, made possible by discoveries in bacteriology, immunology, antibiotics, anesthesia, genetics, and surgical techniques, biomedicine moves forward today with even greater engineering power and range in its ability to diagnose pathological processes and to identify the precise interventions needed to remedy them.

During this last century, the average life expectancy for citizens of industrial countries has increased from approximately 45 to 75 years, a gain assumed by many to be largely the results of these advances and discoveries in the technology of medical care (Bunker, Frazier, Mosteller, 1995, p. 305). But this assumption has been called into question by a number of observers who now speculate that the most important cause of the decreases in illnesses in industrialized countries was social reform that led to improved nutrition and sanitation, including better storage and treatment of food and water, and more effective disposal of sewage (Dubos, 1959; Illich, 1976/1982; McKeown, 1979; McKnight, 1995; Samuels & Samuels, 1988). Others have based their argument for the beneficial effect of medical technology mostly on the fact of increased longevity (Anderson & Morrison, 1989; Beeson, 1980; Levine, Feldman, & Elinson, 1983; McDermott, 1978). However, today, most observers of modern health care agree that the causes of increased longevity include, in addition to medical care, improvements in nutrition, housing, sanitation, occupational safety, and lifestyle. But most importantly, some researchers have called into question the very criteria we use to evaluate “health,” that is, the quantitative approach to numbers of years lived, and instead, they place at

least equal importance on the quality of life and well-being (Remen, 1980, pp. 32-33; Renwick, Brown, & Nagler, 1996).

The advances in modern medical care have prolonged life and relieve the suffering of millions of people. Even medicine's most vociferous critics do not dispute that point. But critics point to modern medicine's roots in an exclusively mechanistic and materialistic view of the body as one of the reasons that middle- and upper-class people in the United States have become "obsessed with personal health" and "addicted to medicine" while "outside, the whole of society is coming undone" (McKnight, 1995). The practice of Western medicine in the United States in the second half of the twentieth century has simultaneously achieved (a) the most sophisticated and "miraculous" technological treatment of individuals and (b) the greatest disparities in health status related to social and economic inequalities. As a researcher of the "making of health" as a cultural construct, I ask myself how did we arrive here, that is, how did the scientific revolution in medicine both fulfill its promise to improve the quantity and quality of "individual health" and disconnect us from the spirit of "public health" -- the notion of shared health outcomes determined in the body politic, if manifested in individual bodies (Krieger & Birn, 1998, pp. 1603-1606).

Modern medicine grew up in the twice-darkened shadow of (a) the Industrial Revolution in which the entire universe, including the human body, was viewed as a machine (Dossey, 1991, p. 111), and (b) Western capitalism with its interconnected concepts of property, privacy, and individualism (Brittan, 1977, p. 47). The mechanical view of the body and the privatized view of health may have served an economic system

like industrial capitalism that demanded the fragmenting social division of labor and the private accumulation of wealth for consumption, but these views of the body and health were not harmless. They are at the foundation of dangerous misconceptions about the body, health, and how humans function such as these:

1. the belief in the individual perfectibility of the “self” and individual “ownership” of health,
2. the view of health as isolated from its environments and illness as a breakdown “within” the individual,
3. the disavowal of social commitment among those who can afford health care to those who cannot (Specht & Courtney, 1994, pp. 130-133),
4. the pervasive acceptance as “normal” of socially and economically structured patterns of disadvantage and inequality, and its consequent disparities in health status (Williams, Popay, & Bissell, 1995, pp. 127-129), and
5. the belief that measures to improve the public’s health can progress without efforts to ensure social and economic justice (Krieger & Birn, 1998, p. 1603).

Such ideas as these, which began in seventeenth-century Europe and continue to evolve in the Western industrialized world, dominate the way we think about health even today in the most current medical and public health practices, as well as in the contemporary wellness movement. For example, some have interpreted (a) the aggressive screening practices required by health maintenance organizations, in which we are taught to conceptualize our health as the elimination of the possibility of disease (Gabe, 1995), and (b) genetic diagnostic techniques, in which we make risk predictions regarding those

who are “possibly, potentially diseased” (Kenea, 1994), as the newest versions of the machine concept of the body. Social scientists have observed that the scientific ability to make predictions about the “potential” for future illness based upon knowledge of genetic makeup or “risk” (a) blurs the boundary between health and illness, (b) introduces the possibilities of “fixing” what is not yet known to be “broken,” and (c) stigmatizes the “potentially sick” (Radley, Lupton, & Ritter, 1997, pp. 5-21).

Similarly, the wellness movement’s focus on the capacity of the “mind” to bring about health and well-being represents the quintessence of individual control of the body dressed up in the language of advanced consciousness (Antonovsky, 1994, pp. 6-12). And finally, at a time when virtually every industrialized nation is questioning the role of the state in fostering human welfare and when the very notion of public health as a social good is being challenged by profit-driven agendas (Calman, 1998; Krieger & Birm, 1998; Navarro, 1994), the field of public health education, with its emphasis on self-surveillance and personal behavior (Scott & Freeman, 1995, p. 161), continues to be a major way in which responsibility for health is handed off from the level of the social to the individual.

Health As a Cultural Construct

I start with this sweeping perspective on health to make one point: Health is a complicated cultural and biological construct; its meanings are inextricably linked to particular times, places, cultures, worldviews, and socioeconomic conditions, as well as to individual biomedical status. Health is not a universal concept; every cultural group has a system of beliefs and practices that reflects its general worldview, including how that culture relates specifically to health and illness (Johnson & Sargent, 1990). Additionally,

every group lives within a set of social and economic conditions that affect health (Miller, 1995, pp. 342-358).

How then have those of us who have inherited the Western worldview learned to see health? Despite what we know from medical sociology and anthropology about the cultural complexity of health, a strikingly orthodox view continues to dominate Western biomedicine and research in health education. The hegemony of the Western scientific perspective is central to my study because it contains the assumptions found in much of the research I reviewed on health and social support. The observations that follow about the Western construction of health are partial; they do not represent the *entire* Western perspective. However, these comments suggest a general picture of how the concept health is constructed in the mainstream Western worldview:

1. The materiality of the physical body is the focus of health care. Dysfunctions of the body are considered more real than dysfunctions of the mind.
2. Health and disease are commonly presented as opposites, with diseased states being replaced by health when treatment is successful. Disease is thought of as a “problem,” something to be gotten rid of as soon as possible
3. Disease causation is mostly external and mechanical. The body has been invaded or “breaks down” as with old age. The practitioner has the job of repairing the body, and the patient is generally expected to accept the practitioner’s authority.
4. Health is an individual achievement, engineered through self-care, nutrition, exercise, stress management, reducing health risks, “thinking healthy and

making healthy choices,”¹ and appropriate use of medical care. It is measured by the absence of illness in the body and by external biological or psychological markers like weight, cholesterol readings, screening and diagnostic tests, or inventories of symptoms.

5. A healthy state is assumed to be the result (a) of the individual taking responsibility for her or himself and (b) of the individual having access to quality of medical care.²

Together with technology-based medicine, these assumptions drive the dominant view of health, and subsequently health research. (Schlitz, Taylor, & Lewis, 1998, pp. 47-52). From this Western perspective, the only valid experience of health is physical -- in the body. Human subjectivity is seen as an inexplicable side effect of biological processes, an epiphenomenon. However, in the mid-1970s, two authors unconnected to the medical world, Norman Cousins and Susan Sontag, shifted at least the public’s view of health and illness from a strict biomedical to a “meaning-based” perspective.

A Meaning-Centered View of Health

Author Norman Cousins (1979), in *Anatomy of an Illness*, a chronicle of his journey back to health using alternatives to medical treatment, was among the first to call attention to the possibility that a meaning-based perspective on health might prove fruitful. At about the same time, literary essayist Susan Sontag’s (1978) book, *Illness As Metaphor*, contributed significantly to a view of illness as socially comprehended, as well as biologically determined. Both Cousins and Sontag broke ground in popularizing the idea of a nonbiological meaning-basis to health. Their contribution was significant and

innovative, but they too seemed unaware of the economic and social positions they held in society, and how, in fact, those positions had power and a significant role in facilitating their access to alternative treatments and their will to live.

Today, after almost 20 years of commentary on health as a social construction and its cultural, nonbiological meaning-basis,³ most Western biomedical practitioners still consider anything but objective biomedical indicators peripheral to our “real” health status. As physician and author Larry Dossey pointed out, it is still considered “bad science” to believe that the meaning patients attribute to their health could possibly affect the “objective” course of disease or well-being (Dossey, 1991, p. 9).

However, recent research from inside the biomedical community has begun to show that, far from being peripheral, meaning may be central to our well-being and health. This research has shown that people are reporting that they are well on health surveys, although they, in fact, have disease, disability, or some other kind of disorder. They do not deny that something is wrong with their bodies, but they perceive themselves to be healthy and well at a deeper layer than the physical (Justice, 1998, pp. 61-68).

Specifically, a series of epidemiological studies published in the respected *Journal of Epidemiology* and the *American Journal of Public Health* have reported that the meaning we give our health status may predict mortality above and beyond the contribution to prediction made by indices based on the presence of health problems, physical disability, and biological or life-style risk factors (Idler & Angel, 1990; Idler & Kasl, 1991; Idler, Kasl, & Lemke, 1990; Kaplan, Barell, & Lusky, 1988; Mossey & Shapiro, 1982). One study showed that the subjective meaning persons attribute to their

health status more powerfully predicted their survival over a six- to nine-year period than did clinical assessments based on examinations by physicians and laboratory tests (Idler & Kasl, 1991). Perhaps even more striking, people who described themselves as healthy, though they were ill by medical standards, lived longer than their medically expected survival (Idler & Angel, 1990). What is becoming apparent to clinical investigators is that when people rate their own health, they are telling us not only how they feel about their lives, but also about how they feel whole beyond the physical self (Barsky, Cleary, & Klerman, 1992; Idler, 1995; Kaplan, 1995; Patrick & Erickson, 1993).

What is relevant to my study is that I found alternative research existing *inside* Western science⁴ itself that challenges the dominant biomedical view of health and suggests that meaning rivaled objective health status. In this alternative worldview, health is a subjective state. Health becomes defined as something we experience -- a quality we perceive and assess -- rather than only the objective assessment of the physical body. This definition is consistent with the original meaning of the word "health," which comes from the Old English and early Germanic term "hal"⁵ for a sense or state of being whole (Christopher Berry, personal communication, November, 14, 1998).

Meaning-centered perspectives do not deny or trivialize the material reality of illness. Rather they restore illness to the context of a person's whole life, and they imbue the person as capable of making meaning even of illness (Cohen & Mount, 1992). A meaning-centered view of health does not equate with simplistic notions of "controlling" health outcomes by controlling health habits, health thoughts, or health beliefs, nor does it necessarily mean a healed state. It is more about how people construct explanations

about their health status in terms of the deeper meanings in their lives. Because a meaning-centered view of health is rooted in a core sense of well-being that people derive from their everyday lives, family, work, and community, it is a profoundly social rather than individual viewpoint.

Additionally, the field of rehabilitation sciences, where there is a call for “good practice in gaining subjective views of the meaning of health in the lives of individuals or groups with disabilities” (Felce & Perry, 1996, p. 61), endorses a meaning-centered approach to health assessment. Researchers in this field suggest that individuals’ overall ratings of satisfaction with the quality of their lives were more dependent on the meaning they attributed to their disability than on objective clinical evaluations of their disabilities (Day & Jankey, 1996, p. 49).

This research confirms what many of us know from everyday experiences with the ways we and others deal with health status. Many of us are aware of people who live fully with their physical or emotional limitations and who make major contributions to their family, communities, or society. Yet health professionals and others are equally familiar with the person with minor disease whose life is effectively crippled by it. This research, as well as our own experiences with people who are ill, suggests that something other than objective physical findings and laboratory assessments plays a role in how we experience health. As one researcher summarized, the meaning people attribute to health is “grounded in culture, shaped by history, framed by context, and reinterpreted by individuals to articulate their own experiences” (Corin, 1995, p. 300).

Before I turn to using the results of this research to construct a definition of health for my study, I want to clarify my position on what a meaning-centered approach to health can *not* accomplish. I contend that the greatest danger in emphasizing a meaning-centered approach is the possibility of its being used as a “feel-good” substitute for narrowing the economic inequalities that lie beneath the huge disparities in health status among people in the United States and the world. While I advocate for a shift in perspective from the strictly defined biomedical definition of health status, I am not suggesting that a meaning-centered view of health supplant political action needed to change the underlying social and economic determinants of health.

Health-In-Society

For this study, I suggest the concept of “health-in-society.” I define health-in-society first borrowing from the World Health Organization’s (1948) definition: “Health is a complete state of physical, mental, and social well-being and not merely the absence of disease or infirmity.” Although the World Health Organization’s definition has been criticized as too broad to be practical, it has merit because it suggests (a) that health has dimensions other than the physical, (b) that the presence of health goes beyond the absence of disease, and (c) perhaps, most important to my study, that the experience of health exists within the context of the social world.

In order to amplify the World Health Organization’s definition, I suggest two additional factors -- social justice and economic equality -- factors not often thought of as constituents of health. These factors are necessary to expand the World Health Organization’s definition beyond its focus on the individual. Social justice and economic

equality are the foundations from which individuals derive the resources and capacities to seek and maintain physical, emotional, social, and spiritual well-being (Krieger & Birn, 1998, pp. 1603-1606; Miller, 1995, pp. 342-358).

While research has long acknowledged the connection between economic inequality and health, recognition of social justice as a factor in human health has been slower to develop. Associations between poor health and low socioeconomic status have been recognized for centuries. More than 150 years ago, Rudolph Virchow, one of the founders of contemporary medicine, observed that improvements of medicine would eventually prolong human life, but improvements of social conditions could achieve this result more rapidly and more successfully (Pincus & Callahan, 1995, pp. 4-36). Although researchers in the United States have been slow to identify the relative contribution of specific socioeconomic factors to morbidity and mortality (Hurowitz, 1993, pp. 130-133), a large number of studies document the inverse relationship between socioeconomic status and health involving many different diseases in many different countries. These studies point to limitations in the capacity of the biomedical model's physical reductionism to explain the development and outcomes of diseases, only a small fraction of which can in fact be accounted for by extensively publicized biomedical risk factors (Pincus & Callahan, 1994, pp. 355-361).

For example, low socioeconomic status has been reported to be associated with negative health outcomes in many types of disease, including the following:

1. cardiovascular diseases (Antonovsky, 1968; Case, Moss, Case, McDermott, & Eberly, 1992; Marmot, Kogevinas, & Elston, 1987; Ruberman, Weinblatt,

- Goldman, & Chaudhary, 1983; Williams, et al., 1992);
2. lung diseases (Greenberg, et al., 1988; Leibowitz, 1977; Margolis, et al., 1992);
 3. arthritic diseases (Engle, Callahan, Pincus, & Hochberg, 1990; Hannan, Anderson, Pincus, & Felson, 1992);
 4. cancer (Farley & Flannery, 1989; Zapka, Stoddard, Costanza, & Greene, 1989);
 5. psychiatric diseases (Evans, et al., 1993; Liu, LaCroiz, White, Kittner, & Wolf, 1990).

Thus, while the association between socioeconomic status and health is well established in public health research, it is reprehensible that definitions of health in the health education literature continue to ignore the connection between individual health and the problems of our larger social and economic conditions. Instead, most researchers' definitions of health remain resolutely focused on personal behavior and individual risk factors. I agree with researcher and physician Howard Waitzkin (1978), who observed that until fundamental changes in the broad social and economic order occur, our society's definition of health will remain individually focused.

By advocating a health-in-society perspective, I maintain that economic equality and freedom from oppression are equally, if not more, necessary to health than the reduction of individual risk factors. Research from the United Kingdom has long supported my contention that universal access to medical care, with all other social and economic factors remaining the same, does not improve the health status of the poor (Black, Morris, Smith & Townsend, 1980; Black, Morris, Smith, Townsend, &

Whitehead, 1988). In these studies, workers at all socioeconomic levels had equal access to medical care through the National Health Service. Yet great disparities in rates of disease and premature death continued among those at the lowest socioeconomic status. More recent research conducted in the United States (Adler, Boyce, Chesney, Folkman, & Syme, 1993; Lantz, House, Lepkowski, Williams, Mero, & Chen, 1998) has similarly found that material conditions account for social inequality in health, when access was not an issue. This research suggests that, contrary to the main thrust of current health-care reform, merely equalizing access to health care does not level the playing field of health status for poor or oppressed people.

For an increasing number of public health scientists, disease and risk factors are little more than the epiphenomena of structural position in society (McKinlay & Marceau, 1999; Link & Phelan, 1996; Link & Phelan, 1995). These researchers claim that the “endless discovery of new risk factors” that characterizes conventional public health diverts professional talent and resources away from the more fundamental causes of illness, death, and disability to what may be termed “epiphenomena,” such as risk factors (McKinlay & Marceau, 1999). They call to our attention studies like the one that focuses on the rediscovery of cockroaches in the environment as a risk factor for asthma among inner city children (Rosenstreich, Eggleston & Katton, 1997) rather than on the underclass environments that breed cockroach infestations (McKinlay & Marceau, 1999).

Taken as a whole, research on health-in-society underscores materialist or structural explanations for health status; it emphasizes hazards to which some people have no choice but to be exposed given the present distribution of income and

opportunity. I suggest that the thesis of this research can be interpreted more broadly to apply not simply to material conditions but also to hazardous psychosocial effects inherent in one's position in society. Perhaps access to hope, justice, and equality in *all* parts of our lives may be as relevant to our health as access to health care.

While definitions of health have been slow to reflect the connection of socioeconomic status to health status, definitions of health that indicate its relationship to social justice and human dignity are virtually unknown. Many of us in the field of health education have known intuitively for a long time that oppression and attacks on human dignity can be as pathogenic as viruses and bacteria. However, a pioneering study that documented the existence of a verifiable biological link between one such virulent "social pathogen" and compromised health status recently appeared in the *Journal of American Public Health* (1996, October). The study showed that experiences of racism and unfair treatment may be injurious to somatic health, by establishing a link between elevated blood pressure among the Black participants and specific experiences of racial discrimination. Furthermore, the differences in elevated blood pressure were higher among the working-class Black participants as compared to professional classes, and highest among "working-class Black women who accepted unfair treatment as a fact of life and kept it to themselves" (Krieger & Sidney, 1996, pp. 1370-1378).

Social justice and economic equality are key factors in my definition of health-in-society. In this study with the Girls' Club, I use the word "health" to signify the narrators' (a) subjective experience of physical and emotional health status, (b) their assessment of the viability of significant social relationships, (c) their assumptions about

the safety and well-being of their families, (d) their perceptions of physical and economic security, including the “fairness” of their economic status, and (e) their attributions of meaning and purpose to the events of daily living.

2.3 Health and Social Support

A Health- and Social-Science Perspective

A review of a voluminous research base confirmed the common sense assumptions about the relationship between social support and health with which I began this study. The research studies I looked at,⁶ which were conducted between 1976 and 1997, showed overwhelming interdisciplinary enthusiasm for the hypothesis that social and community ties protect persons against a wide variety of specific disease outcomes (Cassel, 1976; Cohen, Doyle, Skoner, Rabin, & Gwaltney 1997; Cohen & Syme, 1985; Cutrona & Suhr, 1992; House & Kahn, 1985). Additionally, strong correlational evidence supported the conclusion that social support enhanced general health outcomes and reduced mortality (Berkman & Syme, 1979; Gottlieb, 1988; House, Robbins, & Metzner, 1982). Conversely, some studies showed how poor social relationships prolonged and contributed to physical and emotional dysfunction (Revenson, Schiaffino, Majerovitz, & Gibofsky, 1991; Rook, 1984; Rook & Pietromonaco, 1987).

Overall, the correlational evidence produced by the objective methods of the health and social sciences has demonstrated the relationship of social support to (a) decreased stress and disease, (b) increased physical and emotional hardiness, and (c) increased life span. However, the processes and pathways by which social relationships influenced health have remained startlingly unclear. Each discipline used a

signature method of describing the connection between the social world and health, for example, experimental studies, epidemiological studies, surveys or questionnaires. But no single discipline shed light on the complex *way* this relationship occurred.

A comparison of two “landmark” studies served to show how nearly 20 years of health and social science research has not moved the field forward. In 1997, a “new” article entitled “Social Ties and Susceptibility to the Common Cold” appeared in the prestigious *Journal of the American Medical Association*. Veteran social support researcher Sheldon Cohen and his associates (1997) designed the study as a quasi-experiment with control and treatment groups made up of adults from Pittsburgh, Pennsylvania. He demonstrated an irrefutable relationship between network diversity, which is a classical measurement of social support, and host resistance to disease, which he measured as immunity.

Because of its emphases on (a) diversity as a positive feature of support networks and (b) the nemesis of the common cold, the article generated considerable public attention. It was picked up by the syndicated news services, broadcast on National Public Radio, and published in popular presses all over the country. I read the article with great anticipation, only to be surprised and disappointed.

I was struck by the similarity between Cohen’s concluding statement and that of another “landmark study” on social support and health that had been written nearly two decades before in 1979. A comparison of the concluding statements in both studies bears closer attention. Cohen closed his 1997 study with this qualifying statement:

Unfortunately, without a better understanding of the underlying mechanism linking network diversity to colds, we cannot say whether our data have implications for host resistance to other infectious agents that may cause or contribute to mortality (Cohen, Doyle, Skoner, Rabin, & Gwaltney, 1997, p. 1944).

Almost twenty years earlier, Lisa Berkman and Leonard Syme ended their study of social network, host resistance, and overall mortality among adults in Alameda County, California with this qualifying statement:

Although the hypothesis has been supported that social and community ties may be protective against a wide variety of disease outcomes, the mechanism by which networks influence health status remain unclear (Berkman & Syme, 1979, p. 202).

These two studies represent endpoints of a nearly 20-year continuum of significant research on social support and health. Cohen is praised for his experimental approach using verifiable disease indicators like the presence of a virus as an outcome measure, and the Alameda County study is considered a pioneering effort on the health effects of social integration. Yet both studies lacked conceptual clarity in explicating a link between health and social support systems.

However, while objective scientific approaches have not explained the link between the social context and health, they have provided sets of tools with which to describe support systems and to classify the kind of help support systems give. For example, those who investigated the health and support connection from the “structural” perspective succeeded at developing detailed “social network” classification systems using concepts like density, homogeneity, symmetry, reciprocity, diversity (Hall & Wellman, 1985; Pearlin, 1985). From the “functional” perspective, scientists analyzed

support systems based on the role they played in people's lives, such as nurturant or instrumental (Antonucci & Depner, 1982; Cohen & McKay, 1984; House, 1981; Wills, 1983). Much of the research on the functional measures of social support clearly favored a psychological perspective, that is, it emphasized verbal expressions of caring, concern, empathy, and sympathy among members of support systems over a more material or instrumental view of support (Cohen, 1988; Cohen & Wills, 1985; Cutrona & Suhr, 1992; Wills, 1985).

But I suggest that both the functional and structural perspectives reflected a conceptual error: they assumed stasis in the human systems that they described. Whether based on structure or function, these social support classification systems did not take into account power dynamics; the inequalities of gender, race, and class; and the ability of people to adapt and change that characterize the real-life contexts in which social support functions. They presented a "universalized" picture of social support that unconsciously reflected white middle-class values. I suggest that these classifications systems, which allegedly described generic "healthy support systems," are analogous to the now-discredited personality classification systems that describe a "healthy human" in terms that are unabashedly "male-centered."

Carol Stack's (1974), *All Our Kin*, an ethnographic study of "The Flats," a poor section of a Black community in a midwestern city, was an exception to this generalization. Stack argued that economic deficiencies among poor Blacks militated against the establishment and maintenance of nuclear households. Her research revealed elaborate exchange networks through which extended family members shared resources,

household tasks, and lodging in a system characterized by mutual obligation. Her anthropological methods called attention to the perceptual limits with which previous social scientists had analyzed Black families. By reclaiming the term “family” from the assumptions of white, middle-class researchers, Stack was able to show a different kind of family (Stack, 1974, pp. 57-61). Where others had seen dysfunction and disorganization, Stack’s methods and perspectives allowed her to see capacity, flexibility, and adaptive social networks based on interdependence and cooperation.

I found Stack’s critique of traditional sociological methods particularly useful in thinking about my work with the Girls’ Club. Stack cautioned leading scholars of Black family life to put aside their own worldview so that they could see the whole underlying cultural pattern of life in The Flats and the economic context that supported those cultural patterns. Similarly, I argue that in order to “see” the culturally specific ways that social relations support health in a working-class group like the Girls’ Club, I will need to put aside the individualized way I have been trained to look at health, and I will need to look beyond middle-class perspectives on social support as a therapeutic interaction, a perspective that dominates the literature. Stack’s work instructed me to carefully attend to (a) what the narrators themselves in my study say about health and social support, (b) what health and social support mean to them, and (c) how the socioeconomic contexts of their lives give rise to unique perspectives.

My review of 20 years of traditional literature in the field of health and social support gave me classification systems with which to describe social support, but it did not lead (a) to deeper understandings of the dynamic interrelatedness between health and

the social context, or (b) to clarify about how larger structural and cultural forces shape social support systems, with the exception of Carol Stack's study. I realized that I needed a different way to think about social support and health among the narrators in my study -- a way that did not seem available in the health and social science research that I reviewed. I turned to the literature on friendships as support systems to investigate the perspectives and the methods suggested by social psychologists.

A Women's Friendships Perspective

I expected that research on women's friendships would offer exemplary ways to study social support within the larger contexts of gender, class, race, and ethnicity because so many aspects of women's lives have been subjected to social, cultural, and political analysis. However, the research tended to focus predominantly on the personal and private aspects of women's friendships; it emphasized the association between "having women friends" and various indicators of emotional well-being like stress level, self-esteem, or depression (Brown & Harris, 1978; Fleming & Baum, 1986; Hobfall & Stokes, 1988). Sociopolitical analysis of the environment in which women's friendships existed was often thin or absent.

With a few notable exceptions largely by historians⁷ and writers of fiction,⁸ I noted a lack of scholarly attention to the way social structures shape and are shaped by women's friendships in the social psychology literature and women's studies literature. Much of the work on women friends assumed that friendship served, in part, to fulfill internal and fundamental needs for the healthy functioning of the individual, including needs for love and attachment (Bowlby, 1969), needs for association, belonging, and self-

actualization (Maslow, 1968), and needs for growth through relationship (Gilligan, 1982). These studies, variously preoccupied with personal needs, motives, and cognitions, kept their gaze steadily on internal, individual processes, as though women were not interacting with dynamic social and economic contexts.

At a time when contemporary scholarship has considered almost every area of women's personal relationships to be a reflection of the political, social, and economic conditions women lived in, women's friendships remained exempt from larger analysis in this research (O'Connor, 1992). Little work highlighted the wider structural, social, economic, and culture factors which shape women's friendship, and much of the friendship literature portrayed women as so essentially caring and connected that they seemed in danger of becoming idealized,⁹ or as one researcher observed, portrayed through "the language of make believe" (Brittan, 1977, p. 75)

However, Pat O'Connor (1992), critiqued women's studies, psychology, and sociology for exempting women's friendships from an analysis of power, class, race, and gender. O'Connor (1992) attributed the invisibility of the ways in which friendship can maintain oppressive social structures to the common idealized portrayal of women's friendships (p.27). O'Connor recommended specific strategies for dismantling the "conspiracy of good cheer" (Gouldner & Symons Strong, 1987, p. 145). These included urging future research on women's friendships to

1. Consider that women's friendships should not automatically be equated with supportive, positive content.

2. Focus attention on the material and emotional costs of creating and maintaining relationships.
3. Look at how women's friendships act as conservatizing forces as well as supportive ones in women's lives.
4. Document how the social reality of women's friendships can act to maintain class structures and support conditions of inequity in women's lives (O'Connor, 1992, pp. 173-192).

By taking a research perspective that no longer allowed women's friendships to remain outside the pale of structural or cultural analyses, O'Connor demonstrated how women's friendships can perpetuate power imbalances that may already exist in marriages and family relationships. O'Connor's work supported me in my intention of examining the Girls' Club friendships within the social, political, and economic conditions surrounding my narrators' lives.

A Social Psychology Perspective

Steven Duck, long-time researcher in the field of friendship and social relations, challenged his social psychology colleagues to develop new theoretical and methodological approaches to studying friendship if "we are not to look back on the 1990s as a time of disappointment and retrenched analysis of individual cognition's contribution to relationships as if that were all there is to relating" (Duck, 1990, p. 25). Duck urged social psychologists to change their theories and methods if the field was not to become irrelevant, awash in a sea of measuring, counting, and categorizing the human dimension out of relationship studies.

Duck's central argument, in an article he titled "Relationships as Unfinished Business -- Out of the Frying Pan and into the 1990s," was that human friendship is essentially dialogic, continuous, somewhat uncertain, and always in a state of flux. Duck argued that relationship researchers were treating the "motion picture" of human friendship as though it were a "still photograph." As a result of a methodology that turned continuous transitions into discrete points in time, Duck worried that traditional social science research was portraying human relationships "in convenient but dangerously misleading ways that provide distorted simplifications of unimaginable complexity" (Duck, 1990, p. 18).

Duck further recommended a shift to a phenomenological view of friendship. Research that focused on the subjective meaning of friendship would avoid what Duck saw as another grave perceptual error -- the error of judging one partner's perception of a relationship as "accurate," while another's as "inaccurate." Duck (1990) specifically suggested that relationship researchers adopt methods of studying talk and daily activity between friends as way to capture the fluid and protean nature of relationships (p. 19).

After considering Duck's recommendations to analyze talk, to think dialogically, to see relationships in continuous transitions, and to study the activity of daily life, I concluded that, without using the concepts of narrative analysis, he had proposed a narrative approach to the study of human friendship. When Duck arrived at the inescapable conclusion that the current theories and methods used to study friendship no longer moved the field forward, he shifted toward thinking of relationships with what I would characterize as a "narrative consciousness."

While Duck's perspective inspired me methodologically, his suggestions did not go so far as to instruct social psychologists to include the larger social, cultural, or economic structures of people's lives in analyses of friendship. Like much research in this field, Duck did not acknowledge the contextual influences of neighborhood, economy, culture, and politics on the experience of friendship.

2.4 The Possibility of Narrative Truth

In my search for different methods to study health and social support, I discovered that the use of narratives in social science research has grown tremendously in the last 15 years. Narrative studies are flourishing as a means of understanding the personal identity, lifestyle, culture, and contemporary world the narrators in the fields of psychology, anthropology, sociology, education, gender studies, and history.

Psychologist Amia Lieblich and associates (1998) reported that in the field of psychology alone, one on-line bibliographical review of scholarly works,¹⁰ using the keywords "narrative, life histories, or storytelling," found an 89 percent increase in the number of citations from 42 in 1985 to 371 in 1995 (pp. 3-4).

However, research in the health sciences, including studies on the relationship between social support and health, did not follow the narrative trend. The assumptions and practices of the natural sciences, or those branches of the social sciences that have adopted the natural sciences research model, were the foundation for most of the research on the relationship between social support and health. It was not unusual to find "interviewing" included in some experimental and quasi-experimental research protocols, but in these cases interviewing referred to highly structured questionnaires, administered

in a formal, sequential style not unlike a medical history. Sociologist Arthur Frank (1995), writing about answering the lock-step questions of a medical interviewer during his bout with cancer, described the experience as a “narrative surrender” -- marking the central moment when the story of a person’s illness (and life) become secondary to the meaning imposed by the medical expert (pp. 1-7).

I wanted to use in-depth interviewing as my principle method of gathering data on health and social support in the Club because (a) I wanted to understand my narrators’ subjective experiences, (b) I wanted to put their social support experiences within the larger social and economic circumstances of their lives, and (c) most of all, I wanted to avoid the objectifying experience of asking research subjects to “surrender their narratives.” The point of this research was to hear the knowledge of my narrators, to hear their “health stories,” not to privilege my voice as an expert.

The application of narrative methods to my research is based on the assumption that the connection between social support and health may be as much a storied, meaning-making interaction between people and the circumstances they live in, as it may be biological or psychological. The research I conducted on narrative methods supported my contention that stories can produce knowledge that is different and complementary to science (Bruner, 1986, pp. 11-13).

Narratives As Meaning-Making Structures

What power in stories enables them to link the “outside” world of culture, politics, and economics and the “inside” world of health and well-being? I found a clue in the work of systems thinker Donella Meadows (1982) who writes about how narratives

create bridges of understanding between dissimilar events or experiences. In an article entitled “Whole Earth Models and Systems,” Meadows (1982) cites this ancient Sufi adage: “You think because you understand *one* that you must understand *two* because one and one makes two. But you must also understand *and*” (p. 101). The “and” introduces the landscape of connections, the territory that stories take you into, the background against which dynamic processes, like the health and social support connection, can be examined without reducing them to simple cause-and-effect events.

Until now, scientific inquiry has studied only what it could measure, thereby eliminating the “and”-- the complex, relational, and often subjective processes that occur within and between human beings and between human beings and their environments. Narratives have the power to illuminate the *and*; they are the fundamental scheme, according to narrative researcher Donald Polkinghorne (1988), for linking “individual human actions and events into interrelated aspects of an understandable composite” (p. 13). Polkinghorne clarified the way stories use time and sequencing to create connective tissue between what, under different conditions, would be disconnected facts:

The action of a narrative scheme joins the two separate events “the son cried” and “the father died” into a single episode, “the son cried when his father died.” Seeing the events as connected increases our understanding of them both -- the son cares for his father, and the father’s death pains the son. Narrative displays the significance that events have for one another (Polkinghorne, 1988, p. 13).

In this example, when the two events are connected, a coherent story emerges. Moreover, by connecting the events, the story succeeds at creating more meaning than a consideration of either event separately. As listeners, we are more than informed; we are moved by a son mourning the death of his father.

I found that researchers in sociology and psychology, without using the concepts of “storytelling as meaning-making,” have commented on human storytelling ability as a health-enhancing activity. For example, Aaron Antonovsky, a prominent twentieth-century medical sociologist, related the ability to “construct coherence” to people’s capacity to feel “healthy.” Antonovsky (1987) described how a “sense of coherence” -- or the ability to explain the events of life to ourselves in such a way as to make life seem “manageable, comprehensible, and meaningful” -- was the single most important factor in predicting health (pp. 15-32). Similar studies by psychologist Albert Bandura (1977) underscored the importance of people developing a meaningful explanation of their own ability to cope with a stressful event -- a concept he called “self-efficacy” -- as a correlate of healthy outcomes (pp. 191-215). Suzanne Kobasa (1982), another psychologist, found in her studies on “hardiness” that people who believed and acted as if they could influence the events taking place around them through what they imagined, said, and did, experienced less stress under difficult situations than those who could not. In all of these studies, the key element is the human capacity to organize experience and to construct meaning through what a person says to themselves or others -- namely, through narrating.

Further, the health-enhancing power of narratives arose as a major theme in “narrative therapy.”¹¹ In their book, *Narrative Means to Therapeutic Ends*, Michael White and David Epston (1990) identified their explicit therapeutic goal as the depathologizing of life stories (pp. 1-37). The development of a coherent life story or a “self-narrative,” defined as “the individual’s account of the relationship among self-relevant events across time in order to establish coherent connections among life events,”

was a major strategy of these narrative-based therapies (Gergen & Gergen, 1983, pp. 254-273). The therapist and the client sought to construct more adequate and vitalizing stories about the self -- stories that freed persons from incoherent or inadequate narrative accounts of their lives. Professional psychotherapist Dan McAdams (1991), who works within the narrative framework, stated that psychological problems and a great deal of human suffering stem from “failures to make sense of our lives through stories” and that health resides in revising the stories, and hence in restoring the coherence to events. (McAdams, 1991, pp. 32-35).

Medical Narratives

Within the medical humanities, some health-care professionals are advocating for narratives to take their place alongside the biological study of matter as a way to understand health and illness. Interest in narratives is evident within several different health-care specialties.

First, communication between patients and their care-givers was a focus of considerable narrative research, much of it originating from physicians and nurses. For example, physicians Jack Clark and Elliot Mishler (1992) wrote about the conflict between the “voice of medicine” expressed in technical, biomedical terms and the “voice of the lifeworld,” expressed through the patient (pp. 344-372). Rita Charon (1993), another physician, conceptualized the patient-doctor encounter as a story, in which the patient was the writer or teller and the doctor was the reader or listener (pp. 79-97). Some physicians went as far as to suggest the application of formal literary theory to clinical medicine, where the patient became analogous to a literary text which was then

interpreted by the physician (Charon, 1989; Daniel, 1986; Gogel & Terry, 1987; Mattingly, 1991).

Similarly, researchers in the field of nursing have turned their attention to narrative knowing as way out of the contradiction nurses face between “caring in its emergent sense and science as it is usually understood” (Dunlop, 1994, p. 34). Although the nursing studies I consulted all acknowledged the importance of positivist science in nursing practice, they heralded narrative accounts as a needed development for human refinement in nursing research and projects. For example, Margarete Sandelowski (1991) stated that narrative research returned nurses to their ethical base in caring -- the “phenomenological mission of nursing inquiry” -- which meant the understanding of lives in health, illness, and transition (p. 164).

Studies examining the stories patients told about specific illnesses constituted another branch of research activity in medical narratives (Sandelowski & Jones, 1996; Ventres, 1994). Some of these studies merely used narratives as another objective tool in the treatment of disease. For example, Matthews, Lannin, and Mitchell (1994) described a study that analyzed Black women’s narratives about coming to terms with advanced breast cancer as a way to “use” stories to find themes that would promote early detection and treatment in this population (pp. 789-800). Another group of researchers showed how the narratives from “elderly hip fracture patients” could be used as a psychosocial prognostic indicator for the speed and effectiveness of rehabilitation (Borkan, Quirk, & Sullivan, 1991, pp. 947-957). I learned that medical specialties can use any method, including qualitative oral interviewing, as a source of more data.

Medical ethicists, on the other hand, saw narratives as a way to produce a profoundly different kind of information. For these researchers, narratives had the power to shift the clinical gaze from the illness in isolation to the “wholeness” of the person with the illness. Rita Charon (1994) suggested, for example, that the study of narratives could sensitize care-givers “to recognize the narrative coherence, however obscured, of the patient’s life” (p. 261).

The most moving account I found of a professional care-giver’s recognition of a patient’s experience of life within illness was Oliver Sacks’ (1970) description of a young woman patient, Rebecca, who was born with many physical and neurological defects. After extensive involvement in this woman’s treatment, Sacks encountered her one day outside, far from the clinical environment where he was accustomed to seeing her. He experienced her as a person, instead of a patient, and he described her in this way:

Our tests, our approaches, I thought, as I watched her on the bench -- enjoying not just a simple but a sacred view of nature -- our approach, our “evaluations,” are ridiculously inadequate. They only show us deficits, they do not show us powers; they only show us puzzles and schemata, when we need to see music, narrative, play, a being conducting itself spontaneously in its own natural way. . . . Rebecca, I felt, was complete and intact as a “narrative” being, in conditions which allowed her to organize herself in a narrative way; and this was something very important to know for it allowed one to see her, and her potential, in a quite different fashion from that imposed by the schematic mode (Sacks, 1970, pp. 172-173).

Sacks’ description of Rebecca speaks eloquently of all that is lost to the medical practitioner who neglects the context -- the entire story of people’s lives. Sacks pointed out the importance of narrative understanding without disregarding the importance of the effectiveness of empirical inquiry.

Echoing these sentiments, psychiatrist Robert Coles (1990) described the way professionals reduced the stories people tell about themselves into abstract diagnoses that exercise explanatory power over the person and create the illusion that the professional has no problems. In an article tracing his own clinical shift from formulaic diagnostician to hearer of tales, Coles described an encounter with a patient who was accustomed to explaining her illness to doctors. It occurred to Coles to inquire into the rest of his patient's life -- the life she had outside of her psychiatric diagnosis; in essence, he asked to hear his patient's story. I quote him at length because this passage traces his transition from an objectifying stance to a narrative perspective. Here he describes his desire to take in the whole life of his patient, not just the problematized parts:

Eventually I heard myself one morning, to my own surprise, tell my phobic patient, in a moment of frustration. . . that I wanted to hear more about *her*, not about the "symptoms" she had learned so well to describe to me and to the nurses social workers, occupational therapists, physical therapists, ward secretary, group therapists, and other patients. What did I mean? I wasn't sure how to answer her question, which she quite predictably put to me. But now that she asked, I found myself prepared to spell out answers rather vigorously. I said that we had spent a good deal of time discussing her various fears and how she tried to come to terms with them; now it would be a good idea for us to pay sustained attention to her *life*, to its course, over a span of some thirty-five years. . . . I explained that we all had accumulated stories in our lives, that each of us had a history of such stories, that no one's stories are quite like anyone else's, and that we could, after a fashion, become our own appreciative and comprehending critics by learning to put together the various incidents in our lives in such a way that they do, in fact, become an old-fashioned story (Coles, 1990, pp. 10-11).

While I found several currents within medical humanities were arguing for the addition of narrative perspectives to improve communication between patient and care-giver, I felt most encouraged by writing like that of Sacks and Coles, which emphasized the power of narratives to restore wholeness to the care-giver's view of the patient. This

research, originating from inside the medical profession itself, demonstrated a growing understanding that the medicalized view of ill people does not tell their whole story.

While I was inspired by research from the medical humanities, I also noticed that the vast majority of narratives cited were “illness narratives.” I found only one book that I would classify as a “health narrative”: *The Book of Wellness: A Secular Approach to Spirituality, Meaning, and Purpose* by the popular wellness speaker, Donald Ardell (1996). Ardell interviewed 400 wellness and health educators about what he called the “great questions of life,” such as “How do we find meaning and purpose?” While not ignoring the subject of illness, Ardell provided a rare collection of narratives documenting what people found healthy and meaningful in their lives.

A Narrative Standard of Truth

I agree with Polkinghorne’s (1988) recommendation that researchers turn to narrative methods in order to access the “primary form through which humans construct the dimension of their life’s meaningfulness and understand it as significant” (p. 155). Narrative knowledge may be a more “appropriate knowledge tool” than knowledge from objective scientific studies with which to understand the complex effects of social support on health (Polkinghorne, 1988, p. 155).

First, although narrative studies do not produce “evidence” of the health and social support relationship in the traditional sense of “objective” data, research supported my contention that narrative studies can explain the connection between health and social support using a narrative standard of “truth.” Psychoanalyst Donald Spence (1982) distinguished “narrative truth” from more factual “historical truth” by its emphasis on

life-like, intelligible, and plausible stories that have coherence, consistency with the past, and aesthetic finality (p. 31). Narrators in a “remembering moment” (Spence, 1982, p. 32) strive to create the most internally consistent interpretation of the past-in-the-present, the experienced present, and the anticipated-in-the-present future. According to psychologist Jerome Bruner (1986), the narrative mode, in contrast to the “logico-scientific” mode, leads to

good stories, gripping drama, believable (although not necessarily “true”) historical accounts. It deals in human or human-like intention and action and the vicissitudes and consequences that mark their course. It strives to put its timeless miracles into the particulars of experience, and to locate the experience in time and place (p. 13).

Second, narratives can restore context to studies of health and social support.

Stories open up the world of the narrator, replete with the concerns, possibilities, intentions, options, contradictions, and impossibilities. Narratives therefore recover what formal theories necessarily overlook -- how we are inherently social and historical beings. Stories show how individual experience is lived out against a background of shared understandings that develop within particular sociocultural traditions, geographic regions, economic circumstances, and personal relationships.

In grounding this study in the stories the “girls” tell, I believe my use of the narrative approach may go beyond the conceptual limits reached by the individual disciplines of the social or health sciences, where complex human relationships are reduced to unsatisfying and unrecognizable bite-size chunks of this or that discipline. My use of narrative methods for this research suggests that, perhaps in the end, the connection between health and support may be as much a storied as a scientific affair.

2.5 Cultural, Class, Historical, and Regional Contexts

A principal weakness in many of the health and the social support studies I consulted was that they examined social support out of context. My proposal to “put things in context” challenged me (a) to move out of my disciplinary comfort zones in health education and psychology, (b) to summon new knowledge from historical and cultural studies, and (c) to integrate what I know about health with knowledge and insights about history, culture, and class. Because I am a public health educator, whose previous graduate training has focused on health education and counseling, I needed to take a large step forward into new disciplinary territory.

The choices were vast on how to gain background knowledge on “context” for the Girls’ Club; any single part of such an undertaking could turn into a life’s work. I decided to selectively review four historical areas that would broadly illuminate some of the major historical, cultural, and economic forces in the Club narrators’ lives. I think of these four areas -- the immigrant experience of their parents and grandparents, women’s choices in industrial communities, the effects of deindustrialization on women’s lives, and the impact of the 1950s on working-class women -- as four spotlights on the history of my narrators. While they do not illuminate all the structural and cultural forces that were at work in the lives of these seven women, I believe they show enough to put my narrators’ lives in an understandable context.

My goal was to develop a picture of the historical, cultural, economic, and regional circumstances in which women like the narrators of this study grew up. I sought to answer these questions:

1. How did immigration affect the lives of both the immigrant generation and their descendants?
2. How did social and economic conditions in industrial, ethnic-European communities like McKees Rocks affect the lives of young, working-class women?
3. How did the cultural press toward domesticity and family life in the 1950s affect women like my narrators?
4. What was the effect of deindustrialization on women like those in the Club?

The Immigrant Experience

With one exception,¹² at least one parent of each woman in the Club arrived in the Pittsburgh-McKees Rocks area as an immigrant from central or southern Europe. They came to the United States as a part of the great wave of European immigration that occurred between 1880 and 1920.

In order to understand what their experiences may have included, I turned first to John Bodnar's research on immigrant adaptation to urban America (1985), and particularly to his monograph on Black, Italian, and Polish immigration into Pittsburgh between 1900 and 1960 (Bodnar, Simon, & Weber, 1983). Bodnar's work guided my introduction to a complicated picture of immigrant life in America. First, he looked at the immigrant encounter with America through an "interactional framework in which traditional cultures and structural realities confront each other to produce distinct patterns of adjustment" (Bodnar, Simon, & Weber, 1983, p. 6). Second, Bodnar did not view the millions of mostly southern and eastern European immigrants who entered the United

States in this 40 year period as monolithic; he emphasized the diversity in their ranks. For example, he described (a) how they departed from differing economic conditions in their homelands, (b) how they carried disparate traits and skills with them, (c) how they encountered alternating periods of the rapidly expanding and declining capitalist economy when they arrived; and (d) how they achieved varying economic success or not over different periods of time (Bodnar, 1985, pp. 117-143).

This differentiated view of immigrant work histories rang true in thinking about the parents of the Club women. Some had arrived in America with marketable skills like brick laying and sewing. Others had fewer industrial skills and learned their trades of pipe fitting, chipping, and welding on the job.

The immigrant parents of the “girls” embodied Bodnar’s view of a generation in transition. They spoke their native language. Daily life in the Bottoms, in the Flats, on Bell Avenue or Island Avenue was peppered by old world languages, ethnic customs, and the smells of ethnic food. Although an adjustment was occurring, it was more gradual than radical in the first- and second-generation of immigrants who married and settled in parts of McKees Rocks where kin already lived. They carried on many of the customs that kept ethnic identification alive and built ethnically-identified neighborhoods all over McKees Rocks. These neighborhoods were, and in a few rare places, still are the centers for a sense of ethnic identity.

Tamara Hareven’s *Family Time, Industrial Time* (1982) provided a second useful perspective on immigrants in a constant process of adaptation to their new social and economic conditions. Hareven (1982) found immigrants responded to needs dictated by

modern industrial conditions and engaged in the selective use of premigration kinship patterns for help with housing, work, and social life (p. 385). Contrary to falling apart on the impact of arrival, immigrants found solace and tangible assistance in kinship networks located in specific ethnic enclaves that often had pre-migration roots. Far from being archaic carry-overs of a traditional rural past in European village life, these kinship networks quickly adapted to their new industrial settings and became quite functional in that context. Kin networks helped new arrivals to find housing, work, tools, skills, and short-term services during difficult times (Hareven, 1987, pp. 55-83).

A much earlier work on immigration patterns conducted by Rudolph Vecoli (1964) provided an alternative but equally useful view of the tightly-bound, ethnic kinship patterns like those in McKees Rocks. Vecoli argued that regionally-based immigration patterns -- at least those from Italy -- were a mixed blessing for some new arrivals. While strong extended families and kinship systems from the same region (*paesani*) provided structure for organizational unity in relocation, loyalties and mistrust of regions other than one's own could also be a constraint. Vecoli (1964) concluded that such regionally-based kin systems hampered the civic and political solidarity needed for the improvement of life for the whole community (pp. 413-414).

Both the positive and negative features of immigrant kinship networks described by Bodnar, Hareven, and Vecoli operated in McKees Rocks. If you were Calabrese or Siciliano, you never met a stranger on Norwood Hill or Island Avenue. If you were Polish or Slovakian, the Bottoms or Bell Avenue defined your world. But, as Vecoli suggested, ethnic loyalties in McKees Rocks often occurred at the expense of a sense of

responsibility for the whole town. Political bosses bestowed jobs and public housing in exchange for loyalty on election day. Inter-ethnic rivalries easily slipped into ethnic-based prejudice and discrimination -- true even today, as was pointed out in a 1989 story on "the Rox" in *The Pittsburgh Press* (Hopey, 1989, pp. 14-22). Tradition and "old country" culture exerted a deeply conservatizing force on the children of first- and second-generation immigrants.¹³

Young women like the "girls" of the Club grew up in first- and second-generation households that blended the old and the new as they continually adapted to life in industrial America. Second-generation daughters learned domestic duties, traditional moral expectations, and the centrality of family life. As Donna Gabaccia (1994) pointed out in her sweeping study of the gendered dimensions of immigration, *From The Other Side*, many second and third-generation descendants "believe that their family sense of connectedness still differentiates them from other Americans who seem to be less involved and less committed to kin." (p. 75). However, for working-class women like the narrators in my study, greater cohesiveness may have been as much an indicator of economic pressure on families as it was of ethnic connection.

Alongside ethnic traditions, other cultural, economic, and social dynamics were in operation during the 1940s and 1950s. As Corinne Azen Krause's (1991) pointed out in her work on three generations of ethnic women in Pittsburgh, second-generation women, like the Club women, blended traditional values and new cultural ideas. Young women from close ethnic families in industrial communities like McKees Rocks attended school, took jobs after graduation, watched their first television programs, went to movies,

socialized, and were influenced by the “culture of consumption” that was beginning to characterize American life in the 1950s. Mixing tradition and change, on-going adaptation characterized their lives as much as it had the lives of their parents and grandparents.

Mutual aid societies. One particular system of social relations known as “mutual aid societies” may have particular relevance as a living adaptation of immigrant life that continued among the first- and second-generations. A substantial subcategory of immigration literature described these mutual aid societies as a significant factor in immigrant adaptation to life in the United States.

In his description of immigrant fraternal and benefit associations, Milton Cantor (1996) suggested that these societies may have acted as forerunners of modern life insurance companies and even trade unions. The habits of mutual obligation and patronage that characterized the mutual aid societies, according to Cantor, had lengthy pre-industrial histories, evolving out of artisan and peasant associations in the late Middle Ages in Europe (p. 107).

Cantor noted that mutual aid societies operated on the principle of “all for one and one for all.” For many ethnic groups, they functioned as the extended families the immigrants had left behind in Europe. Now in their adopted homeland, these societies reestablished traditional patterns of collective security against accident, illness, and death. According to Cantor (1996), they were essential in a country where little or no compensation was paid to a worker or his family by an employer or by the state (p. 108).

These societies shared some common foci, such as providing financial aid at times of illness or death. According to David Beito (1994), it is important to underscore that

the aid was not viewed as charity, but as an entitlement of membership based on mutual reciprocity. Additionally, these societies sponsored a broad range of political and cultural activities -- some of which were unknown to the premigration culture. While they often became ethnically exclusive and church involved, mutual aid society membership provided immigrant and post-immigration generations many benefits, such as ethnic identity, social events, and a place to speak one's native language, which, Cantor observed, "consciously or not, prompted resistance rather than accommodation to new and dominant values encountered in urban America" (Cantor, 1991, p. 115).

While formal mutual aid societies disappeared with the growth of affordable insurance and government-sponsored social security (Beito, 1994), some historians speculated that the surviving social organizations instilled a reverence in their members for a time when "reciprocal bonds of obligation, not competition, guided relations between people and when possession of skill and knowledge, not money, determined status" (Thelen, 1986, p. 157).

Authors like Virginia Yans-McLaughlin (1971/1977) aided my understanding of the dynamic between modernity and tradition that characterized the adaptation of immigrants and their children to America. The shift that occurred between the immigrant-class generation to the American working-class generation and then to the middle-class was neither dichotomous nor linear, but dialectical (pp. 22-23). Immigrant families were flexible organizations, adapting to new social and economic conditions, while they continued to rely upon traditional cultural forms and ways of relating. Immigrant parents and their second-generation children did not abandon traditional family forms or cultural

beliefs, nor did they categorically fit into the new social and economic order. Rather, they engaged in an on-going process of adaptation to each other.

Women's Choices in Industrial Communities

Three authors -- Susan Kleinberg, Maurine Greenwald, and Corinne Azen Krause -- guided my understanding of how structural conditions, culture, and gender shaped the lives and limited the choices of young women in communities like McKees Rocks.

Gendered roles in industrial communities. Susan Kleinberg (1989) provided a broad historical context in which to understand how the iron and steel mills shaped almost every aspect of the lives of the men and women who lived in their shadows. In particular, Kleinberg described how family life at the turn of the century in heavy industrial communities like McKees Rocks became "gendered." Women were systematically excluded from factory work, while shift work exhausted men who then could do little at home. Under these conditions, women took on the responsibility for parenting and running the home; men took on the responsibility for bringing in wages (p. 315). Kleinberg pointed out the contradiction that this gendering of work roles in turn-of-the-century Pittsburgh created: On the one hand, women's labor supported the economy of men in mill work, and on the other hand, the contribution made by their unpaid work was erased or romanticized (Kleinberg, 1989, p. 230).

Such strictly defined gender roles in the "Steel City" began to change by the turn of the century, especially for middle-class women who, according to historian Maurine Greenwald (1989), experienced the benefits of expanded work roles and improved household and municipal technologies. However, gender-stereotyped work choices

persist even today in areas like McKees Rocks, perhaps supported by the ethnocultural values of its first- and second-generation immigrant populations, and impacted by economic barriers to higher education rendered by class. Although many contemporary women have entered the work force because of the economic needs of their families, the deeply etched divisions between the typical kind of work women and men do that Kleinberg described are still visible in communities like McKees Rocks (Hopey, 1989).

Constraints of race, ethnicity, and marital status. Maurine Greenwald's (1989) research on women, work, and class in turn-of-the-century Pittsburgh supported Kleinberg's picture of constrained employment choices for working-class women. Even when occupational opportunities for women expanded to teaching, sales, telephone operating, and clerical work, working-class women were still limited by race, ethnicity, and marital status. Black women, married women, women from central and southern European backgrounds, and women from working-class families did not live in the same employment world as their white, middle-class counterparts. Constrained by a racialized and class-based system of employment, these women took in boarders, worked as domestics, or produced small manufactured goods like cigars, candy, baked goods, or books (Greenwald, 1989, p. 35).

Corinne Azen Krause's (1991) research was particularly helpful in its focus on the interaction of ethnicity and gender on women's lives in Pittsburgh, including their work choices. Krause's oral history project of three generations of ethnic women in Pittsburgh investigated women's roles in the family economy from the immigrant

experience of the grandmothers to the World War II experience of the mothers to the baby-boom generation daughters born between World War II and 1960.

Her work showed first, that Italian, Slovakian, and Jewish cultures have different cultural constructions of “woman,” and second, that this cultural view of what it meant to be a woman shaped allowable work patterns even as job opportunities opened up to women in the booming war economy. For example, Italian women were the least likely to be employed outside the home in both the first and second generation. Slovakian and Jewish women, on the other hand, were expected to contribute to the family’s income as single women. As married women, Slovakian and Jewish women were expected to work either side by side with their husbands in family businesses or outside the home (Krause, 1991, pp. 1-13 & pp. 207-211).

For all three groups of ethnic women, however, it was common for young married women to stop working, at least temporarily, when babies were born and children were young. Except for children from Jewish families, according to Krause, schooling was not deemed important for the immigrant generation because families saw no practical use for education. Krause’s oral histories brought to life the factors that helped determine which working-class women in Pittsburgh entered the work force.

Working-class women’s employment choices were severely constrained in industrial communities like McKees Rocks, first, by gendered exclusion from the physical demands of heavy industry, and second, by race, ethnicity, and marital status.

Effect of Deindustrialization on Women's Lives

Women's economic contribution to industrial communities, like their household labor, has remained hidden. Not surprisingly, few research studies have investigated the effects of deindustrialization on women's lives. Deindustrialization is a story that has been told largely from the male perspective.

I examined the effect of deindustrialization on women because the lives of five of the seven women in the Club were directly affected by the decline in Pittsburgh's industrial-based economy in the 1970s and 1980s. Two historians, Ellen Rosen and Karen Olson, provided a view of deindustrialization from the standpoint of women.

Ellen Rosen (1987, pp. 1-18) described the major effect of deindustrialization on working-class women as undermining a "century of progress in wages and employment conditions for America's women factory workers" (p. 4). Rosen challenged middle-class assumptions about working-class women in factory jobs by investigating what the actual conditions of factory work were like for working-class women. She found that factory work was good paying, often unionized, and not repugnant to working-class women seeking to enter the work force. To the contrary, these jobs provided women with a modicum of financial security as well as a sense of efficacy, purpose, and community.

Rosen also took exception to the middle-class model of women being torn between work and home. She showed how well-paying factory jobs -- the very jobs that deindustrialization put at risk -- permitted women with little education and few skills to earn more money than they could in other kinds of employment, with little regret at leaving behind the work of home.

While Rosen's research showed the direct economic effect of deindustrialization on the loss of factory jobs for working-class women, Karen Olson (1994) described the indirect effect of deindustrialization on gender relations between men and women in an industrial community. In her ethnographic study of the steel-making community of Dundalk, Maryland, Olson saw the major effect of deindustrialization as an opportunity for women to renegotiate gender relations with their partners. In her analysis of the effect of deindustrialization on the women of Dundalk, Olson (1994) observed that, "What is bad for men isn't necessarily bad for women" (p. 18).

By this, she meant that deindustrialization disrupted the rigid gender patterns within marriage that previously had excluded women from more public and economically viable roles. Olson (1994) showed how "when a woman has a working life," she feels more powerful to negotiate household economics and major family decisions regarding purchases, child care, recreation, the division of household labor, and her own further education. Olson saw her work as corrective to gender-biased analyses of deindustrialization that have focused exclusively on the extreme hardship of men losing their jobs in the steel mills (Olson, 1994, pp. 18-19). Rosen's and Olson's research on the gendered dimensions of deindustrialization provided a needed context from which to examine the lives of women in industrial communities -- both as workers and the partners of workers.

Research on the continuous adaptation of immigrants and their children; the interwoven experiences of gender, ethnicity, and class; and the impact of deindustrialization on women and their families provided an essential background for

reading and understanding the narratives of the Girls' Club. However, no investigation of the external conditions that influenced women like those in the Club would be complete without a focused review of the impact of the complicated 1950s.

The Fifties

I did not set out to understand the entirety of the 1950s. Rather, I wanted to synthesize some of the significant social, economic, and political forces that contributed to the intentional creation by both the national media and government policies of the ideal of family "togetherness." It was this image of the ideal family -- aspiring white, working-class men and women as beaming couples buying homes, appliances, and shiny new cars; husbands working in secure jobs guaranteed for life; and women staying home to raise children -- that exerted an enormous influence on working-class people. I suggest that this undifferentiated view of the 1950s seldom delivered on its promises of family solidarity and happiness for anyone. I selected readings on the 1950s that dealt with the social, economic, and political forces that may have contributed to my narrators' view, as well as the view of millions of white, working-class women, of what it meant to be a woman.

A decade of fear and paranoia. The United States had just won the second World War. Prosperity, and its conspicuous handmaiden, boundless consumerism, were evident everywhere. But according to authors Eugenia Kaledin and Brett Harvey, the national ethos was characterized by fear of losing whatever was perceived as "stable" in the United States. Kaledin (1984) observed that "fear of communism extended through the decade and touched almost every kind of contemporary behavior" (p. 1). Making a similar observation in her oral history of women who came of age in the fifties, Harvey

(1993) elaborated on how fear of Russia and Euro-Communism was directed into absolute fear of difference: “This fear of the enemy outside was easily manipulated by demagogues like Senator Joe McCarthy into a suspicion of subversion within, which rapidly spread into a queasy fear of difference itself” (Harvey, 1993, p. xiii).

Harvey (1993) speculated that McCarthyism and uncontested images of family togetherness in magazines and newsreels in the 1950s enforced women’s fear of difference. One of the participants in Harvey’s (1993) oral history study described the ubiquitous fear of difference directed at white women:

“Insecurity” and “self-doubt” were our buzzwords. We worried about not being clean enough, or womanly enough, about not finding husbands, about not being good enough mothers. We were afraid of “getting a reputation,” of “being a cocktease,” and we were terrified of getting pregnant. We made our life decisions on the basis of safety and security. We chose solid, reliable mates and valued maturity above all other personal qualities (Harvey, 1993, p. xv).

Women in the United States had made fairly constant progress in the spheres of employment opportunities, politics, and education throughout the first half of the twentieth century. During the Depression, for example, large numbers of women went to work because their families needed every bit of cash they could bring home. Then, World War II dramatically changed how the nation regarded the employment of women. As if overnight, that which had been perceived as distinctly unfeminine work -- holding heavy industrial jobs -- became a patriotic necessity (Halberstam, 1993, p. 588).

Although the number of single and married women entering employment during the war was impressive, the numbers alone underestimated the social significance of women having a working life. Not only were women making money, but many were

living alone or with other women, many experiencing independence and economic self-sufficiency for the first time. But when the war was over, all these changes raised worrisome questions among government leaders and social scientists: What if women had come to enjoy their independence and did not want to give up their jobs to returning veterans? What if not enough of them were willing to return home and start creating the nuclear families that would in turn create the demand for goods that the nation's prosperity depended on?

The answer to questions like these came in a stunning -- albeit temporary -- reversal to the war year trends and to the progress women had made up until that point of the century. Part of what happened was the tilt of society and hiring preferences toward men -- especially veterans. David Halberstam commented, "If there were good well-paying jobs, then the jobs obviously belonged to men as they came home from the war to head families" (Halberstam, 1993, p. 589). Two million women lost their jobs in the two years after the war (Halberstam, 1993 p. 589). The obvious social and economic message directed at white, working-class women -- including the "girls" of the Club -- was the importance of marriage and family, not school or work.

The message had temporary success. Following the war, white married women were pulled back from full-time work or forced to downgrade its centrality in their lives. They were laid off from manufacturing jobs in droves, despite polls showing that most wished to continue working (Halberstam, 1993, pp. 588-589).

But the dramatic exodus of women from industrial work after the war did

not produce a long-lived return to female domesticity. Eugenia Kaledin (1984) observed that it was a myth that most women who worked during the war were glad to return to domestic life; in fact, “although some women returned momentarily to their homes after the war out of deference to returning heroes, they did not remain in the kitchen long” (p. 61). Reinforcing the temporariness of women’s return to domesticity, Stephanie Coontz (1992), critiqued the monolithic myth that all women flocked to domestic lives in the 1950s. According to Coontz (1992), most women workers did not lose their jobs permanently but were simply downgraded to “women’s work” in clerical and service jobs, and by the end of 1947, female employment had begun to climb again (p. 160).

Before turning to examine the social construction of the feminine and family ideals that led women -- even for a short period of time -- back into the kitchen in the 1950s, I need to note that the forces I have been describing were not directed at women of color or at women of the elite or owning classes. For example, women of color did not have the economic luxury to even temporarily leave the work force after the war. In 1950, 57 percent of Black women had jobs outside the home, compared to 37 percent of white women. And 42 percent of Black women who worked in 1950 were employed as domestics (Rubin, 1994, p. 57). As one of the participants in Lillian Rubin’s 1994 study on the intersection of class, race, and ethnicity commented, “Black girls are brought up to know they’re going to work their whole life” (p. 57). Rubin observed that this knowledge that work would continue throughout life showed an area of life where race, not class, determined the hopes and dreams of people:

Few Black women, even those who grew up in stable working- and middle-class homes, shared the fantasies about their role in marriage that were so common among whites. . . The Black women I spoke with always knew that, married or not, they'd have to work (Rubin, 1994, p. 56).

Similarly, the campaign for conformity and female domestic contentment did not have a uniform effect on women who were educated, economically independent, or upper-class. Leila Rupp and Verta Taylor's (1990) history of the women's rights movement between 1945 and 1960 commented on a very small group of women who were "white, middle- or upper-class, well-educated, and employed in professional or semi-professional occupations" (p. 197) that supported the early twentieth-century suffrage movement. Taylor and Rupp (1990) stated that this privileged minority group was able to harbor the women's movement through the 1950s because they were either "without family obligations, with supportive husbands, or in relationships with other women who shared their commitment to women's rights" (p. 201). On the whole, they were women who did not experience economic pressures or tensions between work and family roles.

Thus, research on the mystique of "hyper-femininity" and 1950's family "togetherness" revealed that not all groups of women were its primary target and not all women responded to it in the same way.

The feminine ideal and family togetherness. Powerful inducements to early marriage and motherhood *did* surround young women approaching adulthood in the 1950s. Historian David Halberstam (1993) described the new standard of femininity that was evolving during these years:

To be feminine, the American woman first and foremost did not work. If she did, that made her competitive with men, which made her hard and aggressive and

almost surely doomed to loneliness. Instead, she devotedly raised her family, supported her husband, kept her house spotless and efficient, got dinner ready on time, and remained attractive and optimistic; each hair was in place. According to the studies, she was prettier than her mother, she was slimmer, and she even smelled better than her mother (p. 590).

The ideal fifties woman, wife, and mother was supposed to strive for the standard of nuclear family happiness that came to be known as “togetherness” (Halberstam, 1993, p. 591). A family was portrayed as a single perfect universe of togetherness -- instead of a complicated, fragile mechanism of conflicting economic, political, and emotional pulls. Media depicted family life as having no conflicts or contradictions or unfulfilled ambitions. Women who could not live the idealized version of their lives were blamed for being exceptions (Halberstam, 1993, p. 592).

Rejecting the monofocal image of the perfect wife and mother that dominated the media in the 1950s for a more complicated picture of family life, Coontz (1992) said, “The happy, homogeneous families that we ‘remember’ from the 1950s were. . . a result of the media’s denial of diversity” (p. 31). The message broadcast to white working- and middle-class women about what was expected of them was clear, rigid, and coated in the illusion of universal acceptance. Public acknowledgment or acceptance of ambiguity regarding gender roles or family expectations did not exist.

But of course, the public ideal of the happy suburban family was a far cry from the lives of most working-class families in industrial communities like McKees Rocks. Significant scholarship on family life in the fifties showed that the ideal of the suburban family was not the reality for working-class people (Komarovsky, 1962; Rubin, 1976/

1992), for people living in poverty (Harrington, 1962), for women consciously working for women's rights (Rupp & Taylor, 1990), or for gay men and lesbian women experiencing official state persecutions (Kennedy & Davis, 1993). The lives and work of people like these provided a much more complicated view of the fifties. They offered a critical counterpoint to accepting the fifties as a homogeneous time of extreme domesticity for women, family bliss in the suburbs, and unchallenged political conservatism and repression.

In order to continue building the context to understand the lives of the Club women, I focused on the work of two of these authors: Mirra Komarovsky and Lillian Rubin. Based on research with working-class people, these two scholars took exception to the assumption of middle-class uniformity in women's role and family life in the 1950s. I concentrated on their work in the hope that it would help me understand in greater detail the world of the then young women of the Club.

Working-class girls and blue-collar marriages. Mirra Komarovsky's book, *Blue-Collar Marriage* (1962), provided a particularly useful conceptual framework from which to think about the choices that women like the "girls" made regarding school, work, marriage, and family. Komarovsky published *Blue-Collar Marriage* in 1962, but she completed the case study research on the lives of 58 working-class couples during the mid- to late-1950s. This time period coincides with the time frame in which the "girls" of the Club graduated from high school, got married, and started their families. Komarovsky's work was unusually illuminating because the "girls" of the Club and the men that they married could have been in her sample of working-class couples.

Komarovsky undertook her study of stable working-class families because she found the existing literature to be limited and “bipolar.” On the one hand, most research that was supposed to represent the “American family” was in fact derived from white, native-born, Protestant, college-educated couples. On the other hand, research on working-class people gave disproportionate attention to problem-ridden families. In her mind, both genres of research were class-biased. Komarovsky set out to find out if the then dominant view of “the American family” was universally applicable to the whole population (Komarovsky, 1962, p. 3-4).

Using case study methods, Komarovsky (1962) discovered that generalizations concerning American marriages and families applied more to middle-class and college-educated respondents. Her thesis was that contemporary problems that predominated within middle-class marriages in the 1950s were rare among working-class couples.

The first major difference Komarovsky observed between middle-class and working-class marriages pertained to marital roles. The assumed ambiguity of male and female roles said to characterize modern marriage in a rapidly changing and heterogeneous society did not apply to her blue-collar respondents, where no such ambiguity about marital roles existed. She observed that working-class marriages were not conflict-free, but their conflicts were not over marital roles (Komarovsky, 1962, pp. 50-56).

Second, she found little evidence that housewives in the blue-collar sample resented the low prestige society assigned to their role as wives and mothers. Not all respondents in Komarovsky’s (1962) study were happy and contented, but the origin of their discontent did not derive from society’s devaluation of their domestic role (p. 49).

The strain of feeling underchallenged by traditional domestic roles was more characteristic of educated, middle-class women than the respondents in Komarovsky's study.

Third, middle-class women and working-class women differed regarding work outside the home. Most working-class men and women believed that the wife's place was "in the home," and about half of her blue-collar respondents expressed no desire to work outside the home. When they did work, blue-collar housewives expressed less guilt and defensiveness than middle-class women, who were plagued, in Komarovsky's view, by the self-doubts raised by the spread of psychoanalytic theory (p. 62).

Among the working-class couples, the economic drive for financial security was the most acceptable motive for going to work. But working-class women also described the sheer pride of earning money, money as a source of power and self-esteem within the marriage, the pleasure of good workmanship, the enjoyment of social life on the job, and the desire to escape housework (Komarovsky, 1962, pp. 61-74).

Additionally, little frustration existed over the division of labor in the working-class family, as was reported among middle-class couples. Both men and women accepted traditional segregation of masculine and feminine tasks. For eight out of every 10 working-class couples, "who does what around the house" did not constitute a troublesome issue (Komarovsky, 1962, p. 52). When wives ranked qualities that characterized a good husband, "willing to help with housework" was low on the list of priorities (Komarovsky, 1962, p. 52).

Finally, the generation gap that allegedly existed between parents and children in the rapidly changing social environment of the 1950s was not evident among

Komarovsky's working class families. The parental family remained a major reference and model after marriage. The generation gap between middle-class parents and children did not apply to working-class youth, especially in regard to how young people learned what to expect from marriage (Komarovsky, 1962, p. 34).

One of the most fascinating sections in Komarovsky's study focused on the role that friendship and kin played in socializing young working-class men and women into their marital roles and thus assuring the viability of the marriage. While a 1954 *McCall's* magazine article proclaimed the benefits of nuclear family "togetherness" as a way to promote marital harmony, Komarovsky found the presence of friends, kin, and confidants with whom to share the ups and downs of married life enhanced the success of the working-class marriage. In particular, same-sex friends helped make the transition between single to married life. Such friends provided advice and support on how to meet marital expectations and on how to meet disappointment with resignation. In the middle-class marriage model, confidants who came to know marital secrets were perceived as a threat to the solidarity of the couple. Among working-class couples, confidants who knew about marital dissatisfaction contributed to the steadfastness of the marriage.

Komarovsky theorized about this difference. She suggested that many young working-class men entered marriage unable to communicate because they had been raised with the "trained incapacity to share" (Komarovsky, 1962, p. 156). In order for a wife to be happy when communication and companionship were minimal, the marriage needed special supports. Foremost among these were close friends and relatives who fulfilled for both husband and wife, but especially for the wife, functions lacking in the marriage.

Marriages particularly helped by the presence of a same-sex confidant for the wife were those in which close friendship between the mates was especially lacking.

Komarovsky (1962) described working-class wives who found themselves in marriages with minimal sharing and communication:

It is difficult to see how some of the women could maintain emotional balance if they had no outside friendships. The confidants enabled some women whose communication with their husbands was meager to be nevertheless quite content with their marriages (p. 219).

The “crowd” that young couples might “run” with played a similar role.

Komarovsky (1962) defined the “crowd” as a “reference group enforcing common definitions of marriage roles” (p. 43). First, the crowd reinforced common definitions of what was expected of a spouse through direct pressure on those who deviated. Second, the crowd drained off resentment against the mate for the common frustrations of marriage by helping a spouse to realize that a particular grievance was common. The crowd served as a place for men and women to exchange ritualized accusations about stereotyped shortcomings of spouses. A young husband or wife could criticize a mate, release irritation, and strengthen his or her own self-image as a “wife” or a “husband” who knew how the other should behave. Finally, Komarovsky (1962) observed that the crowd sometimes promoted marital communication under the guise of a joke or under the protective cover of the group, where a person could express a feeling and “the presence of others. . . will keep the expressed feeling from developing into a quarrel” (p. 44).

Komarovsky’s portrait of blue-collar marriages contrasted sharply with the image of the self-sufficient nuclear family on the move in a highly mobile society so dominant in

the 1950s. The blue-collar couple often needed the emotional and material aid of family and friends nearby. In the working-class network of family and friends, residential proximity was a prerequisite for effective reciprocal relationships and extended kin-like relations that contributed to long-term economic viability of the family (Komarovsky, 1962, pp. 236-240).

More recent research has reiterated Komarovsky's view of friendship as an enhancement rather than a threat to marital stability -- especially among women friends. For example, Stacey Oliker (1989) argued that best friends not only meet women's intimacy needs that are not satisfied by the marriage, but also diffuse and manage anger or other volatile emotions so as to sustain married women's commitment to their marriage. Oliker found that the net effect of improvised "marriage work" by friends was overwhelmingly in the direction of solving marital conflicts. She described how friends generated empathy for a woman's husband and framed the marital situation in such a way as to ennoble it. Women friends used humor to defuse situations, they underlined the women's own awareness of their financial dependence on their husbands, and they reinforced women's sensitivity to their children's needs (Oliker, 1989, p. 127). These are the effects of women's friendships that O'Connor (1992) would call "conservatizing" in their power to maintain the status quo.

Overall, Komarovsky's work was critical in building my understanding of how young working-class women formulated their ideas and made decisions about marriage, family, and work in the 1950s. Working-class women like the narrators in my study made their choices out of complex knots of motives that included (a) the pervasive

messages of family togetherness and domesticity characteristic of the fifties, (b) the cultural and class expectations of their blue-collar parents, (c) their own emotional and material needs, and (d) the economic pressures of their historical period.

Change and continuity in working-class life. Lillian Rubin's book *Worlds of Pain: Life in the Working-Class Family* was first published in 1976, 14 years after Komarovsky published *Blue-Collar Marriage*. A second and updated edition of *Worlds of Pain* was published in 1992. These three texts span 30 years of research on working-class couples, and even today, they remain among the few studies to examine working-class marriages and families instead of the often studied middle-class family.

Komarovsky's and Rubin's research provided me with a conceptual yardstick with which to measure change and continuity occurring in working-class family life throughout the second half of the twentieth century. And again, because of the time period in which these studies were conducted, the social and economic conditions made visible in the three works were especially critical to me because they described the lives of the Girls' Club and their families.

While vast social, economic, and political forces swept the American landscape between the publication of Komarovsky's book in 1962 and Rubin's book in 1976 -- the civil rights movement, the student movement, the antiwar movement, the women's movement, the Pill, increasing divorce rates, changing definitions of the family -- the portrayal of working-class life in these two books demonstrated continuity and change.

For example, working-class youth's decision to marry appeared to remain the same between the late 1950s and late 1970s. The young men and women in both

Komarovsky's and Rubin's studies married as a major route to an independent adult status and to the privileges that accompany it. For many of the girls in Rubin's study, they remained under their parents' roof until they were married. There were no other roads to womanhood, manhood, and independence, as those that existed for middle-class youth: "For working-class young, the privileges of separate domiciles and sexual relations outside marriage that are legitimated and accepted in the middle-class community -- come only with marriage. For them, this is yet another of the hidden injuries of class" (Rubin, 1976/1992, pp. 72-73).

Change and continuity were also evident in women's attitude toward work outside the home. For example, at the beginning of the 1960s, 18.6 percent of married women with children under six worked outside of the home. But, by the 1970s, the figure had jumped to 30.3 percent -- an increase of 62.9 percent (Rubin, 1976/1992, p. xix.). However, despite the fact that so many working-class women held paid jobs outside the home, they, like the women in Komarovsky's study, continued to define themselves as wives and mothers, not as workers. Work was something they *did*, an instrumental activity that served the economic needs of the family, not a definition of who they were. Housewifery and mothering remained at the core of their definition of self; these defined who they *were*. (Rubin, 1976/1992, p. xx).

However, equity in household chores constituted one significant area of change. In 1976 as in 1962, working wives continued to take on traditional gender-differentiated household roles, sharing with their husbands the view that a man who works hard all day has the right to come home to rest and comfort. However, by 1992, perhaps as a result of

the social liberation movements of the previous two decades, the number of women in the workplace, and media attention to changing gender roles, working-class wives no longer accepted the second-shift. According to Rubin (1976/1992), they no longer believed that men had a right to come home and relax while wives rushed about picking up toys and dirty clothes, fixing supper, cleaning up, and giving the children time (p. xxii).

Like their middle-class counterparts, working-class wives' demands for equity in household chores became a source of conflict in working-class families in the 1980s and 1990s. Full-time working-class women in the 1990s struggled to reorder gender roles in the private realm of their homes. But for working-class wives, Rubin stated that there was still a gap between the equity they sought and the reality of dividing labor. Even in households where husbands granted that they ought to help their full-time working wives, there was often a long way between word and deed (Rubin, 1976/1992, p. xxii).

Another shift occurred in the desire for more leisure time as a couple. Among the 1976 working-class sample, when children arrived, both husbands and wives agreed on the primacy of their parental responsibilities. Slowly throughout the 1970s and 1980s, there was a change toward wanting more companionship and no longer settling for less in the working-class marriage. With this shift, the demands of parenting began to conflict with the needs for shared adult time and leisure, for companionship, and for privacy. Rubin commented that the new "role strain" in the working-class couple was based on the desire to be companions and on the lack of resources to "buy" the time needed for leisure.

By 1992, the picture had dramatically changed even more. The pressure of time, multiple jobs, and lack of affordable child care had left the working-class couple

completely time impoverished, trying “to do in two days a week what usually takes seven -- that is, to establish a sense of family life for themselves and their children” (Rubin, 1976/1992, p. xxv). As one of the consequences of pressured working-class family life, Rubin (1976/1992) observed that the “relatively stable cast of family characters of the past is harder and harder to find”(p. xxvi). In 1972, when the first edition of *Worlds of Pain* was published, roughly one-third of all marriages ended in divorce; in 1992, the figure stood at about one-half (Rubin, 1976/1992, p. xxvi).

An area of unexpected continuity between the couples in *Blue-Collar Marriage* and *Worlds of Pain* was in the couples’ tolerance of the man’s “trained incapacity to share.” In 1976, Rubin stated that the three attributes working-class women listed most readily when asked what they value in their husbands were, “He’s a steady worker; he doesn’t drink; he doesn’t hit me” (Rubin, 1976/1992, p. 93). Notably, these three attributes matched what working-class women in the 1950s said. However, rather than judge working-class women as unconcerned with the emotional side of marriage, Rubin offered a class-linked analysis of this resigned attitude. The importance of the material aspects of life over the relational must not be underestimated among people for whom financial insecurity are woven into the fabric of life (Rubin, 1976/1992, p. 94).

Among the most compelling changes between the two generations of working-class couples occurred in the area of marital satisfaction. The working-class women in Rubin’s 1976 sample shared the characteristics of vague dissatisfaction and frustration with life that Komarovsky had previously associated with middle-class, college-educated women in the 1950s. Rubin described the 1976 working-class couples as having reached a

dramatically different point where they were able to conceive of marriage as more than an economic arrangement. But having arrived there, the role segregation and the rigid socialization patterns they had experienced growing up did not prepare them for the role changes and flexibility needed to build marital satisfaction using a new set of rules. As a result, emotional dissatisfaction ran rampant among her women respondents, and access to consumer gratification did little to improve the emotional dissatisfactions of the couples she interviewed (Rubin, 1976/1992, p. 116).

By 1992, working-class women still expressed concern over the obstacles they experienced with their husbands in trying to negotiate full partnerships and equity in household chores and child-rearing. Rubin offered yet another economic analysis to explain how working-class husbands successfully resisted change between 1976 and 1992, and why working-class wives seemed to “put up with it.” Rubin explained that economic inequality fueled women’s tolerance of their husbands’ “trained incapacity to share.” Women traded acceptance of poor communication with their partners for preservation of the peace and safeguarding the marriage (Rubin, 1976/1992, p. xxii-xxiii).

Summary

When I began the process of interviewing the “girls” in 1995, I asked them to tell me about their families and traditions, about their parents’ immigration to America, and about their own and their husband’s employment histories. In order to develop historical, class, and cultural sensitivity to the contexts of my narrators’ stories, I read broadly in such areas as (a) immigration and adaptation of first- and second-generation people to life in urban America, (b) the shape of social relations in working-class, industrial

communities like McKees Rocks, (c) the impact of deindustrialization on women as both workers and family members of workers, and lastly, (d) the patterns of work, marriage, and family that were typical for working-class women like the Girls' Club in the fifties.

What I found was a complex and interrelated set of factors that provided clues to the hopes, dreams, and choices of young working-class women like my narrators. I learned that, in addition to being bombarded with fantasy images of femininity and family togetherness, women like those in the Club, also dealt with their own gender and ethnic role expectations as well as those imposed by their families. The social and economic conditions they lived in limited the possibilities they were able to see and the choices they were able to make. Given all of these constraints, the Club women responded by shaping lives that had meaning, coherence, and purpose.

2.6 Summary of the Review of the Interdisciplinary Literature

My goal here was to develop a broad interdisciplinary background against which to interpret the oral interviews I conducted with the women of the Club. What then have I garnered from the previous research regarding the four central concepts of this study?

1. First, current research in the health and social sciences continues to investigate the health and social support connection using the methods of objective scientific inquiry. While these methods produce increasing amounts of knowledge about how social relations affect health, they do not enhance our understanding of the actual connection between the social world and the "inner" world of health. Few studies use methods that diverge from the experimental or quasi-experimental methods of the health and social science.

2. In current scholarly literature, health is most often defined as a set of biomedical indicators that demonstrate the absence of illness, or in the case of new diagnostic techniques, the absence of even the potential of illness. There is some evidence from inside the biomedical community that the meanings people attribute to their health and illness may be related to health status. Additionally, new research shows that when ordinary people use the word “health,” they are often referring more to a broader set of quality of life concerns than to objective health status.
3. Research has irrefutably linked social and economic conditions to health status, but common definitions of health do not include its correlation to issues of social justice or economic equality. Professional health educators uphold a “health-in-isolation” perspective rather than a “health-in-society” perspective.
4. Social scientists have classified and defined social support systems using structural and functional categories. These classification systems are useful, but they also tend to distort the social and economic dynamics that operate within social support systems. They do not account for the cultural, social, and economic conditions in which the support systems exist, nor do they deal with the adaptability of persons within the systems to change as conditions require. Additionally, the functional classification systems tend to privilege verbal and emotional support functions over material or instrumental functions.

5. Women's friendships are often portrayed as highly idealized support systems. The social and health science literature typically does not subject women's friendships to cultural or structural analysis, although some historical studies of women friends have done so.
6. Some social and health scientists, who are frustrated with the limits of objective scientific research to solve social and health problems, have turned to narratives as a different way to study complex human phenomena. They assert that narratives have a different explanatory power than objective science and they describe a different narrative standard of truth by which to assess data.
7. Some health-care professionals use the narrative approach to teach providers (a) how to hear the clinical "story" the patient presents, (b) how to understand different cultural constructs regarding specific illnesses, and (c) how to see the patient in the "wholeness" of their lives, rather than only as a diagnostic category. Research in the field of medical humanities views narratives as a way to teach care providers the ethics of caring for patients.
8. The data of this study -- the narratives of the Girls' Club -- originated in a specific place, time, and circumstances in history. While a complete social and economic history of working-class ethnic families in southwestern Pennsylvania between 1900 and 1990 was beyond the scope of this research, understanding socioeconomic and cultural conditions of the narrators' lives

provides a critical backdrop against which to listen to and understand the narratives.

9. Selected points from research on the social, economic, and cultural circumstances of working-class women like those in the Girls' Club include:
 - (a) Immigration was not an event but an on-going adaptation, a dialectic, between the traditions, values, and hopes of immigrants, their descendants, and the social and economic conditions of society.
 - (b) Women who grew up in communities characterized by heavy industry and traditional ethnic neighborhoods often experienced constrained opportunities for employment outside the home.
 - (c) Women who grew up in first- and second-generation Italian and Slavic homes often were not encouraged to pursue education beyond high school; they commonly graduated, married, and began to raise a family.
 - (d) While middle-class marriages began to focus on issues of companionship, marital roles, and child-rearing in the 1950s and 1960s, working-class marriages focused on economic stability with fewer conflicts about traditional gendered roles.
 - (e) Images of domesticity and femininity that targeted working-class women in the 1950s implicitly suggested that consumerism could

take the place of the frustrations of living with men who were trained not to be able to share.

- (f) The effects on women of the economic decline precipitated by the deindustrialization of American in the 1970s and 1980s were often not visible, but working-class women's earning power was cut short at the very point in history when they were beginning to enter higher paying jobs. Additionally, some women in heavy industrial communities achieved greater gender equity in their marriages when their spouse's lay-offs spurred them to enter the job market.

2.7 Chapter 2 End Notes

¹ In 1994, Aaron Antonovsky developed a controversial critique of the wellness movement based on its focus on individual self-improvement and virtual disavowal of what he called “social system” factors. *Advances: The Journal of Mind-Body Health* devoted an entire issue to his critique and to responses from a number of wellness and body-mind practitioners. See Antonovsky, A. (1994, Summer). A sociological critique of the “well-being” movement. *Advances: The Journal of Mind-Body Health*, 10(3), 6-44.

² Claire Cassidy critiques both the reductionist paradigm, which assigns significance to individual access to medical systems, and the holistic paradigm, which assigns significance to self-responsibility. Cassidy recommends going beyond paradigm thinking and using a “partnership perspective” which she feels can “take seriously the particularities of the varied systems of health care currently available” (p. 29) and can account for both individual responsibility and social/political responsibility. See Cassidy, C. (1994, Winter). Unraveling the ball of string: Reality, paradigm, and the study of alternative medicine. *Advances: The Journal of Mind-Body Health* 10(1), 5-31.

³ For an overview of the social construction of health in Western society, I recommend (a) Dubos, R. (1959). *Mirage of health*. New York: Harper and Row; (b) Illich, I. (1976, 1982). *Medical nemesis: The expropriation of health*. New York: NY: Pantheon Books, and (c) Dossey, L. (1991). *Meaning and medicine*. New York: Bantam Books.

⁴ I acknowledge that a vast literature exists on the unity of body and spirit within Eastern beliefs and practices. However, I am focusing on Western medical practice and research because it is Western thought that has influenced the research on the relationship between health and social support.

⁵ Christopher Berry, a friend who is also a philologist, helped me to find the Indo-European roots of the word “health.” The following is the result of that search: *Kailo* is the common Indo-European root for health and holy; it literally translated as “whole, uninjured, of good omen, or holy.” The Old English *hal* means “whole,” *halsum* means “wholesome,” and *halig* means “holy or sacred.” Finally, we found that the Old Norse word *heill* means “healthy.” It is also the root of “hail and wassail.” And the Old Norse feminine name *Helga* means “holy.”

⁶ I recommend the following studies to anyone who would like to review research that represents two decades of scientific literature on social support and health outcomes: (a) Cassel, J. (1976). The contribution of the social environment to host resistance. *American Journal of Epidemiology*, 104(2), 107-123; (b) Cobb, S. (1976, September-October). Social support as a moderator of life stress. *Psychosomatic Medicine*, 38(5), 300-314; (c) House, J. S. & Kahn, R. L. (1985). Measures and concepts of social support. In S. Cohen & S. L. Syme (Eds.), *Social support and health*. Orlando, FL: Academic Press, Inc.; (d) Hall, A. & Wellman, B. (1985). Social networks and social support. In S. Cohen & S. L. Syme (Eds.), *Social support and health*. Orlando, FL: Academic Press, Inc.; (e) Cohen, S. & Syme, S. L. (1985). Issues in the study and application of social support. In S. Cohen & S. L. Syme (Eds.), *Social support and health*. Orlando, FL: Academic Press, Inc.; (f) Antonucci, T. C. (1985). Social support: Theoretical advances, recent findings, and pressing issues. In I. G. Sarason & B. R. Sarason (Eds.), *Social support: Theory, research, application*. Dordrecht, The Netherlands: Martinus Nijhoff; (g) Cutrona, C. & Suhr, J. A. (1992). Controllability of stressful events and satisfaction with spouse supportive behaviors. *Communication Research*, 19, 154-174; and (h) Cohen, S. L., Doyle, W. J., Skoner, D. P., Rabin, B. S., & Gwaltney, J. M. (1997, June 25). Social ties and susceptibility to the common cold. *Journal of the American Medical Association*, 277(24), 1940-1944.

⁷ Smith-Rosenberg’s (1975) work, for example, while highlighting the centrality, integrity, and independence of the nineteenth-century women’s world of love and ritual, also showed that its very structure was influenced by the men’s world. She argued that this pattern of intimate women’s friendships could be understood in terms of the rigid gender-role differentiation within the family and society as a whole at that time wherein the “devotion to and love of other women became a plausible and socially accepted form of human interaction” (Smith-Rosenberg, 1975, p. 9). Faderman (1981) went even further in her connection of the changing status of women’s passionate commitments to one another and the social

structures of the times. She observed that the committed relationships she documents from the sixteenth century to the twentieth were treated in a casual and accepting way by society. She implied that up to the end of World War I, when economic independence of women became a reality and new "medical knowledge" cast same-sex relationships in a pathological light, these intense friendships between women moved from socially acceptable to threatening (p. 20). See (a) Smith-Rosenberg, C. (1975). *The female world of love and ritual: Relations between women in nineteenth-century America*. *Signs: Journal of Women in Culture and Society*, 1(1), 1-29 and (b) Faderman, L. (1981). *Surpassing the love of men*. New York: William Morrow and Company.

⁸ For example, Susan Koppelman, editor of numerous anthologies of women's fiction, has compiled an anthology of nineteenth and twentieth century United States women's short stories about friendship between women. This book has diverse subject matter and represents several historical periods in United States history and several different cultures. The book is capped by a short essay on friendship by Koppelman which notes that friendship depends on reciprocity and the perception that reciprocity is possible. Koppelman also writes that in women's friendships the participants must be equally subject to each other's power to counter the forces of patriarchy that women have lived under. In my estimation Koppelman successfully uses fiction to create a contextualized picture of women's friendships. See Koppelman, S. (Ed.). (1991). *Women's friendships*. Norman, OK: University of Oklahoma Press.

⁹ For recent examples of the idealization of women's friendships, see (a) Apter, T. & Josselson, R. (1998). *Best friends: The pleasures and perils of girl's and women's friendships*. New York: Crown Publishers, and (b) Berry, C. & Traeder, T. (1995). *Girlfriends: Invisible bonds, enduring ties*. Berkeley, CA: Wildcat Canyon Press. Apter and Josselson attempt some critique of the critical way women treat each other, but Berry and Traeder are unabashedly celebratory in their treatment of women's friendships.

¹⁰ In a review of narrative research techniques for reading, analysis, and interpretation, psychologists Amia Lieblich, Rivka Tuval-Mashiach, and Tamar Zilber (1998) reference an on-line data base for narrative research resources. I found this data base up-to-date and useful: Hevern, V. W. (1998, Jan.) *Narrative psychology: Internet and resource guide*. [on-line]. Syracuse, NY: Author. Internet: January 31, 1998. Available at <<http://maple.lemoyne.edu/~hevern/narpsych.html>>

¹¹ For a fascinating introduction to the field of narrative therapy and the principles of freeing subjugated stories from dominant cultural plots, see White, M. & Epston, D. (1990). *Narrative means to therapeutic ends*. New York: W. W. Norton & Company, pp. 1-37.

¹² Donna Muha is the only member of the Girls' Club whose parents were both born in the United States.

¹³ I found an oral history of a second-generation Italian woman who grew up in McKees Rocks and kept a diary as a child. The diary reveals her pain and frustration at not being allowed to pursue an education and to follow her girlhood dreams. See Interview with Betty Straccia, June 1994, Transcript 1994:0226, conducted by C. Cerrone. Italian American Collection, Historical Society of Western Pennsylvania Library and Archives, Pittsburgh, PA.

CHAPTER 3: USING NARRATIVE RESEARCH METHODS
FOR THE STUDY OF HEALTH AND SOCIAL SUPPORT

3.1 Introduction

The term “narrative research methods” refers to any study that uses or analyzes narrative materials from oral life stories and diaries to autobiographies and literary works (Lieblich, Tuval-Mashiach, & Zilber, 1998, pp. 2-3). In this study, the term refers to the practices and techniques I employed to gather and interpret the oral narratives of the women of the Girls’ Club.

The purpose of this chapter is to tell the story of the ways I applied narrative methods to my research. Having already discussed at length how narratives provide a channel for accessing both (a) individual identity and its systems of meaning (Bruner, 1986; Gergen & Gergen, 1983; McAdams, 1993; Polkinghorne, 1988), and (b) a view of the narrator’s social, cultural, and economic world (Frisch, 1990; Portelli, 1991; White & Epston, 1990), in this chapter, I turn to a consideration of the actual practices that comprised this project: what I did, what worked, how I dealt with limitations in the method, what surprised me, and what I gained from using a narrative approach to investigate health and social support. The steps I took to implement my research include:

1. Planning the interviews and conducting the background research,
2. Thoroughly considering the ethical issues surrounding the gathering of oral interviews with the members of the Girls’ Club,
3. Conducting the oral interviews with the members of the Girls’ Club,

4. Managing and editing the oral data gathered in those interviews,
5. Analyzing and interpreting the narrative data,
6. Reflecting on the meaning of the narrative data and its contribution to the study of health and social support,
7. Reporting the data, taking into account the limitations of the methods,
8. Planning how to “return” the story to its tellers.

While the steps may give the appearance of being linear, the process of applying narrative research methods to this study was not. These steps were linked and interactive with each other. Activities such as reading, thinking, researching, listening to tapes, writing, consulting with the narrators, redoing, editing, and rethinking, did not occur in a vacuum, and they often occurred simultaneously.

I present the results of this dynamic process in Chapter 4: a set of seven personal narratives that could not be obtained from experiments, questionnaires, or observations. The advantage of this narrative approach, that is, the deep and broad narrative data it generates, also gives rise to its main quandaries: the quantity of accumulated material and the complexity of the interpretive nature of the work. In this chapter, I share my thoughts on the work of processing this narrative material, and I reflect on the experience of being the “research instrument” in this highly qualitative and interpretive project.¹

3.2 Planning the Project

I used to say to my sister, “Someone should write a book about the Club.” I often imagined that I would be that person because I was a part of their world, *and* I could see them in a way they themselves seemed to take for granted. However, it was not until I

began to plan my research on the health effects of social support that I connected the goals of my study and the particular advantages of interviewing the “girls.”

Girls’ Club as a “Sample”

The women of the Club are what researcher Michael Patton (1990) calls a “purposeful sample,” that is, a sample that is rich in the particular information the researcher seeks to investigate. The Girls’ Club is neither a representative nor a randomly selected group of women, but they are “information-rich cases from which one can learn a great deal about issues of central importance to the research” (Patton, 1990, p. 169).

Three factors qualify the Club as a purposeful sample:

1. The Club women share a common history and working-class background. They have all lived in the same place all their lives. Hence, the Club provides unique opportunities to examine my central thesis: the influences of cultural, economic, regional, and historical contexts on health and social support.
2. The Club women already have an “indigenous story” about how their friendship has been “good for them,” and how their Club is “therapy.” The Club is hence an excellent group to study because they have generated their own original constructs regarding the health effects of social support.
3. The Club has a 40-year story of friendship, and they want to collaborate with me to tell that story. They make an extraordinary sample to work with in this narrative research because they want to “give”² me their narratives, and they trust that I have the capacity to bring their private story to public awareness.

Conducting the Background Research

I conducted the background research for this project in three ways: (a) I consulted the scholarly literature for research conducted on McKees Rocks, (b) I examined the resources on McKees Rocks in two historical archives in the Pittsburgh area, and (c) I conducted interviews with community and academic historians who specialize in McKees Rocks and the Pittsburgh region.

Although I did not conduct an exhaustive review of historical literature, I found that little scholarly attention had been directed to the contemporary history of McKees Rocks. Several Pennsylvania history texts discussed the ancient history of the mound-building Indian people³ who lived in the area now known as McKees Rocks; some texts dealt briefly with Alexander McKee, a controversial British Indian agent, and his brother, James McKee, a Revolutionary War patriot who settled McKees Rocks a decade before the Declaration of Independence was signed.⁴ But the only readily available scholarly text I found that dealt with the modern industrial history of McKees Rocks was John Bodnar's (1985) *The Transplanted*, a history of immigrants in urban America.

I located 18 citations for McKees Rocks at the Archives of the Historical Society of Western Pennsylvania and the Archives of Industrial Society at the University of Pittsburgh. Fifteen were published by ethnic churches in McKees Rocks to celebrate church anniversaries; they provided little information about the larger community. Additionally, I found three short self-published local histories of McKees Rocks,⁵ but only one, the *McKees Rocks Borough Centennial, 1892-1992* (Presutti, 1992), provided details of the period between 1900 and the present.

I found one additional unpublished local history of the Rox serendipitously. My sister was telling the story of the Girls' Club project at her beauty shop when she was overheard by someone who knew the Condeluci family. The Condelucis are locally renowned. Four generations of this family live in 13 houses on one four-acre hill in McKees Rocks known as "Condeluci's hill." The person who overheard my sister's story was related to the Condeluci family and knew that in 1989, one of the patriarchs of the family, Sinbad Condeluci, had written a 34-page history of McKees Rocks and Stowe Township. Consequently, Sinbad Condeluci provided a copy of this local history to me.⁶

As a third strategy for learning more about McKees Rocks and its ethnic, industrial background, I conducted interviews with local historians specializing in the Pittsburgh area.⁷ Among the people I interviewed were two local Catholic community organizers, Father Regis Ryan and Sister Ruth Bearer,⁸ who provided a unique perspective on current conditions in the Rox.

Father Ryan and Sister Bearer are the administrators for McKees Rocks' federally-funded health and social-service agency, "Focus on Renewal" (FOR), which has served the community since the late 1960s.⁹ During our interview, they expressed disillusionment with local Rox politics, and both shared a deep cynicism about improving the Rox's tangled roots of corruption and racketeering. In a 1989 newspaper article, Father Ryan spoke about the FOR's inability to fight the corrupt "pay-off politics" that people in the Rox accepted as a way of life. According to Father Ryan, by providing vital community services, the FOR was "winning the fight for dignity but losing the war against corruption" in McKees Rocks (Hopey, 1989, p. 20).

Accounts of vice and community decline in McKees Rocks always go back to the 24-year rule of Democratic strongman, Mayor David Hershman, and his right-hand man, Police Chief, Joseph “Yussey” Thompson during the mid-1940s to the 1960s (Hopey, 1989, p. 20). Some local observers track the lack of public involvement in government to Hershman’s and Thompson’s unfortunate merger of politics and racketeering in the 1950s; others trace the apathy back to earlier inter-ethnic rivalries that led to tight, in-bred neighborhoods but weak community efforts. As I listened to Father Ryan describe the Rox as “deeply apathetic” and the FOR as a “failure in bringing about a culture change” (Hopey, 1989, p. 20), I began to think about how the “girls” might portray the Rox in their oral narratives. I speculated about (a) what memories they held of McKees Rocks, (b) what their particular memories might reveal about the meaning of the Rox to them, and (c) how their view of the Rox would compare to the contemporary perspectives I gleaned from people like Father Ryan and Sister Bearer.

In a second series of interviews, I met with Corinne Azen Krause, historian and author of *Grandmothers, Mothers, and Daughters* (1991), a book which describes change and continuity in the lives of three generations of ethnic women in the Pittsburgh area. I gained a perspective from Krause on how gender alone, in the absence of ethnicity and class, does not explain the life-span choices and development of ethnic women in Pittsburgh. Krause advocated strategies that examine “the complex interaction of all three factors -- ethnicity, gender, and class,” and how together they influence “women’s behavior, choices, and attitudes over the generations” (Krause, 1991, p. xi). I determined to examine these factors, not in isolation, but as they interacted in my narrators lives.

I supplemented this research on McKees Rocks by reviewing studies on other Pittsburgh-area industrial communities such as Homestead.¹⁰ I pieced together the background information for my interviews with the Girls' Club using the few formal scholarly resources I could find, the informal community histories that were available on the Rox, and the oral interviews with key local historians and community organizers. From these I wrote the brief social history of McKees Rocks that introduces the Club narratives in Chapter 4.

On-Site in McKees Rocks and The Importance of Place

My research with the Girls' Club was intimately linked to McKees Rocks and benefited from my on-site field work there. First, McKees Rocks was not just the setting of the study; it was also a part of the story. McKees Rocks emerged as a topic in every interview. The "girls" talked about the streets and neighborhoods in the same way they talked about being Italian or Slovak. The Rox was a part of their identity.

Independent of any cues from me that would elicit a site-related recollection, the "girls" placed their memories in the Rox. The dominance of McKees Rocks as an anchor for their memories illustrated what oral historian Linda Shopes (1994) found in her review of local history collections in repositories around the state of Pennsylvania: "Indeed these interviews suggest that orienting oneself in space and linking memories to specific places seem to be a fundamental way people think about the past" (p. 6). The "girls" structured their memories by linking them to places, events, and people in the Rox.

Second, being in McKees Rocks provided opportunities for supplementary interviews with family members and friends of the Club women. Many informal

conversations with the children and husbands of the “girls” occurred before and after the Club interviews. Additionally, I attended Club rituals like their annual family picnic, and their fortieth high school reunion, where I noted the recollections that their classmates had of the “girls” when they were high school friends.¹¹

But most important, conducting the interviews in the narrators’ Rox homes catalyzed unique sections of the narratives. For example, during one of the interviews, Anna got up from her kitchen table with tears in her eyes and pointed across the yard to the former Dellemonache residence where she had grown up. This experience enabled her to go deeper into the meaning of that house in her life story, the memories it contained, and what it meant to her to see it “first thing every morning and last thing every night.” I conducted Betty’s interview in the room which she had recently redecorated and claimed for herself. She was able to look around the room and tell me what it meant to her to have a room she considered her own.

Finally, my decision to travel to McKees Rocks meant that I was able to meet with the “girls” several times as an intact group. In November 1995, we met as a group to discuss the overall goals of the project. In June 1996, I conducted a loosely structured group interview on the topic of “how the Club has changed over the years.” And, during our last group session, in March 1998, we discussed the final questions the narrators had about signing authorizations for copyright clearance and archival storage. All seven Club members were present at these meetings.

For all these reasons, *being* in McKees Rocks was central to this project, but *getting to* McKees Rocks created several problems. Traveling to McKees Rocks and

conducting the research on-site was labor- and time-intensive, as well as financially expensive. As a result of the strains on my human and financial resources, my field work in McKees Rocks was necessarily limited.

I conducted all the interviews (at least 2 two-hour interviews with each woman) during 2 two-week trips in November 1995 and June 1996. I completed all of my follow-up sessions with the “girls” by telephone. The most significant impact of not being able to make additional trips to McKees Rocks was that I did not interview any of the women who used to belong to the Club, but for different reasons, no longer do.¹²

3.3 Ethical Issues

Before addressing the development and implementation of the interview protocol, I want to describe some of the ethical dilemmas I faced in applying narrative research methods to this project. This section is not an account of how I solved the ethical considerations. Rather it chronicles the steps I took to ensure that, to the best of my abilities, no harm would come to the women of the Girls’ Club as a result of participating in the narrative research.

I relied on three reflexive processes to assist me in conducting my work with the highest ethical standards possible. By reflexive, I mean what feminist scholars Mary Margaret Fonow and Judith Cook (1991) refer to as the “tendency of feminists to reflect upon, examine critically, and explore analytically the nature of the research process” (p. 2). The processes I used to reflect on the ethical standards in my work included (a) the development of a human subjects review, (b) the application of the *Oral History*

Association's Evaluation Guidelines, and (c) my intentional involvement of the narrators in the early, interpretive, and integrative phases of the research.

Human Subjects Review

A code of ethical principles aimed at protecting human research subjects from unreasonable risks guides all research that involves data collected from human subjects. The Office for Protection from Research Risks at the Department of Human and Health Services' National Institutes of Health recently added oral history research projects to its list of categories eligible for expedited review because these projects involve minimal risks to human subjects (OHA Newsletter, 1999, p. 3). The safeguards for the protection of the rights and welfare of human subjects for this project were reviewed and approved on January 27, 1996, by my doctoral committee, which serves as the internal review board at The Union Institute's Graduate School. In accordance with legal guidelines and ethical standards established in the human subjects' review process, I developed an application for this project that included the following sections:

1. Purpose of the project,
2. Procedures and methods of the project,
3. Contents of the interviews,
4. Anticipated benefits and risks associated with participating in the interviews,
5. A statement of how risks would be minimized, and
6. An informed consent.

Additionally, I asked Dr. Joan Stevenson, who has served for over 10 years on the Human Subjects Review Committee at Western Washington University, to review the

principles I established for this project. Dr. Stevenson stated that my human subjects protections met a high standard of ethical practice. She noted that I had provided a thorough and thoughtful discussion of the issues in protecting human subjects. She specifically commented on my decision to include the narrators in the interpretive phase of the project: “I had not been aware that you could bring the subjects more directly into the analysis. . . an excellent idea and one that gives more dignity and power to the participants” (J. Stevenson, personal correspondence, January, 22, 1996).

Appendix A contains a copy of the Informed Consent section of the Human Subjects Review.¹³

Guidelines and Principles of the Oral History Association

While the Human Subjects Review process provided a general ethical framework throughout my research, I turned to the *Oral History Association's Evaluation Guidelines* (1992) for practical guidance in the specific application of ethical principles in the daily management of the project.

The Oral History Association (OHA) has promoted professional standards for oral historians since the organization was founded in 1967. The OHA's *Evaluation Guidelines* (1992) were written specifically for the collection of oral historical materials. However, at its heart, the *Evaluation Guidelines* offer general research standards to anyone applying oral historical methods to the investigation of a social science, or in my case, a health-science question. The *Evaluation Guidelines* provided a checklist to review my compliance with a high standard of ethical procedures while conducting the interviews and managing the narrative data.

The sections of the *Evaluation Guidelines* (1992) entitled “Responsibilities to Interviewees” (pp. 1-2) and “Responsibility to the Public and to the Profession” (pp. 2-3) served to keep my focus on two central questions throughout the research:

1. Does the project protect the well-being of my narrators to the best of my ability?
2. Does the project focus on the truth of the oral historical materials produced to the best of my ability?

Involving the Narrators as Subjects

Writing the Club’s story meant that I was making public what had been previously private and personal material. Although I believed there would be benefit to Club members from participating in this project, I was also aware of the risks to their personal privacy and to the inner integrity of the Club as a group.

I engaged in several specific practices to ensure that the narrators remained the “subjects” of this investigation, rather than the “objects” of study (Geiger, 1990, pp. 169-182). I engaged the narrators as authorities in the production of the narratives, in the negotiation of their meaning, and in the minimization of risk from unwanted public exposure or embarrassment. I shared authority with my narrators during the introductory, interpretive, and integrative phases of this research:

Introductory phase. I presented the original research proposal to the “girls” in January 1995 in a long and candid letter. In that letter, I walked through the steps of the project in straightforward language, describing the process from the interview phase through the writing of the final report.

A few months later, I went to Pittsburgh and met with the “girls” to discuss the project. I explained the goals and the timetable. Additionally, I spoke about the meaning and importance of the history of “ordinary people.” After my brief presentation on the meaning of studying history “from the bottom up,” one of the “girls” translated the idea into these words, “Oh, I get it. So forget the kings and queens. It’s all of our turns now.” I introduced the principle of “narrators’ rights,” and I asked them to begin thinking about issues like anonymity and confidentiality.

During this meeting, I read through the Informed Consent, and I explained the possible effects this project could have on them as a group. For example, I explained how agreeing to do this project would change them -- not necessarily in a bad way -- but that it would change them. They responded that I was too serious and that they saw this project as an opportunity to honor what they had created. “On with it” was their attitude. However, I think the seriousness with which I dealt with the ethical considerations in the study gave them confidence and trust in the process.

At the beginning of each interview, I briefly repeated the goals of the project and what the “girls” could expect from their participation. I also explained that the interviewing process could be a moving experience that had the potential to stimulate strong feelings and memories. I encouraged each narrator to tell me if she felt uncomfortable during the interview or needed to stop at any time.

I debriefed with the narrator about her feelings and her frame of mind after each interview. I wanted to know if anything in the interview had triggered painful memories. I do not mean to imply that any of these women was incapable of dealing with difficult

feelings. Indeed, their lives bear testimony to the opposite. Rather, I wanted to know that they did not have to protect me from their pain -- a role that they might naturally assume given our prior relationships. I encouraged them to tell me any experiences that seemed important to them about their lives or the Club -- not only the positive parts.

After each interview, I intensely scrutinized the work I did with them. I made notes what I had said and not said. Despite how busy each visit to McKees Rocks was, I wanted to stay mindful of the moments I shared with each narrator and the privilege she bestowed on me by opening up her life, the Club, and her view of the world.

Interpretive phase. My intent was to involve the narrators as much as possible in the interpretation phase of the project. I was inspired by a telephone conversation I had with historian Grey Osterud¹⁴ in which she explained the way she shared authority in the interpretive phase of working with interview participants (Grey Osterud, personal communication, November, 14, 1995). I implemented a version of this process by sending the interviews back to the narrators for more than just editing. My goal was to interact with them: I wanted to hear their thinking, and I wanted them to know where my thinking *about them* was headed so that they could respond, amplify, or disagree. I discuss how this process worked in subsequent section on editing the transcripts.

Additionally, I corresponded with several of the “girls” throughout the project. Their regular letters gave them the opportunity to tell me how being interviewed was affecting them and to discuss new ideas that had occurred to them since the interview. In these letters, they spoke about how the project had raised their awareness about the

group's value to them. I responded by sending them newsletters that updated my progress and answered their questions about the snail's pace of my research.

I used telephone conversations with each narrator to talk about specific issues in her narrative: how she saw it, how I saw it, and what we both understood. None of the "girls" ever said directly, "I disagree with that," but occasionally, we would agree that we saw things somewhat differently.¹⁵ Some narrators asked that parts of their transcripts that dealt with sensitive marital relations be eliminated from the final published narrative.

During one visit to McKees Rocks, I read parts of the biographies I had written on each of them. As the group listened, they became quiet and emotional. They were intrigued by details they did not know about each other's family background. Bemused by this, one of the "girls" asked, "What have we been talking about all these years?"

Integrative phase. The end of the project was not a surprise to the "girls." I had asked them from the very first meeting to consider critical issues. At our last group meeting, two issues remained:

1. The level of signature authority they wanted to give to me or to retain for themselves when we placed the tapes and transcripts in an archives, and
2. The use of their real names or pseudonyms.

I had given each narrator a copy of the Informed Consent and the Release Agreement at the beginning of the project, but I suggested that they might want to wait until the end before signing the Release Agreement. The Release Agreement (Appendix B) specifies any limitations narrators might want to impose on the copyright or future research use of the oral materials they generated. I reasoned that at the end of the project

they would have the experience they needed to make informed decisions about possible restrictions they might want to place on their narratives.

When I finally asked each of them to sign the Release Agreement, we had established trust and confidence. They gave me unrestricted copyright permission to use the taped interviews and transcripts for educational purposes as I saw fit. Additionally, they placed no restrictions on the scholarly use of their transcripts and tapes, other than to require that I give written permission to anyone who would want to use their materials. Together, we determined that we would place the narrative materials in the Archives of the Historical Society of Western Pennsylvania. The “girls” stated that they wanted to participate in presenting the tapes and transcripts to the Archives.

The second point we discussed was whether to use pseudonyms for their names and for McKees Rocks. Some discussion had occurred at the beginning of the project about assigning them pseudonyms in the final report, but I realized as the work progressed that I wanted to use their real names and the actual place name of McKees Rocks. This study was about *them*, the *Girls Club*, the *Rox*. I hoped that any fears they might have about their privacy and the need for pseudonyms would be allayed by having full knowledge of what material would appear in their narratives. I was not neutral on this point; I advocated that they honor themselves and where they came from by using their real names and the place name of McKees Rocks.

By the end of the research, the “girls” were in agreement. Pride won out over any fear about what others who read this work might think about them. They were proud of themselves, their lives, and the Girls’ Club. They wanted this study to bear their real

names, the name of the Girls' Club, and the place name of McKees Rocks, the town where this story continues to unfold.

However, I did use pseudonyms when I wrote about the women who were once in the Club but are no longer members. They are referenced many times in the narratives, but were never involved in the study. The pseudonyms seemed like a reasonable way to include the references to them, and simultaneously, to protect their anonymity.

The final point we discussed were options for my "returning" the story to them and their families and for making their story public. We talked about the possibilities of publishing a feature story about the project in one of Pittsburgh's newspapers or contacting local Pittsburgh documentary film makers for interest in the project. It did not seem to matter to them how the story became public; they trusted that I would find a way. What the "girls" wanted was for their story to be told. Further, they wanted to enjoy the publication of their story while they were all still alive and could share it with their families. We agreed that I would provide each of them with copies of their audiotapes, a copy of their transcripts, and a bound copy of the dissertation.

3.4 Conducting the Interviews

Building the Interview Protocol

In the early phases of this project, I had determined to build an interviewing instrument that would combine (a) a qualitative life-story review process, (b) questions on self-perceived health status, and (c) questions assessing structural and functional qualities of social support in the Club.

I excerpted some questions, from oral historian Paul Thompson's (1988) guide to eliciting life stories, to include in the life-history segment of my interviews (pp. 296-306). Further, I experimented with "translating" quantitative quality-of-life scales, used in health and rehabilitation sciences, into qualitative questions for my narrative project. The two scales I was interested in¹⁶ -- one created by rehabilitation specialist John Flanagan (1982) and the other by psychologist Aaron Antonovsky (1987) -- dealt directly with the relationship between physical and emotional well-being, life satisfaction, and the quality of relationships and support systems. Although I was concerned about the potential negative effect formal questions might have on the interviews, I overrode my doubts.¹⁷

Preliminary Interviews

I piloted these quality-of-life questions in my early interviews with Dolores and Anna in 1995. As I used the quantitatively derived questions during the interviews, I noticed that something in the conversation changed. The "girls" were quintessentially accommodating, always trying to answer whatever questions I asked as best they could. But when we got to the quality-of-life questions, I noticed a certain kind of quizzical look on their faces. After they tried to answer the questions, they would look at me and ask, "Is *that* what you wanted me to talk about?"

Not only did their demeanor change, but so did the content of their narratives. They shifted from "storytelling," in which they were animated participatory characters, to abstract "reporting," in which they were observing themselves. It was serendipitous for my work that the technique backfired. I heard a remarkable difference between the way Dolores and Anna responded to questions like "Tell me about the Club and what it

was like when you first started,” compared to questions like “In the past, when you had to do some thing which depended upon cooperation with others, how did you feel it would or would not get done?” The first question opened the door to their stories. The second question changed the atmosphere in the room from liquid to lead.

As I systematically reflected on how my questions affected these early interviews, I suspected that my “translated” quantitative questions disconnected my narrators from their storied experiences of “being” in the Girls’ Club. I was asking them to step outside themselves and to make themselves what researcher Harold Garfinkle called “anthropologically strange” (Garfinkle as cited in Grele, 1991, pp. 252).

As I followed this hunch deeper, I realized that in spite of my intention to involve the women of the Club in telling their stories from their own subjective points of view, I was using a technique that asked them to objectify themselves. I thought I could unproblematically apply methods that I had exported from quantitative questionnaires to narrative research with impunity. But dressing the quantitative questions in a qualitative format had not changed the *system of thinking* that was imbedded in them. The interview format had not changed the intention of the empirical based questions to separate the narrators from their experience and to “break down” social support into its “parts.”

Even though I used narrative methods in the first interviews, I had not let go of my objectivist assumptions. I thought I needed the “reliability and validity” of the Flanagan and Antonovsky instruments to legitimize my work. I was surprised to discover so much need to control lurking in the epistemological corners of my research methods. I was redeemed by the “girls” themselves and the compelling “narrative truths”

that began to emerge from their early interviews in spite of the awkward questions I asked. I soon learned to get out of the way of their formidable storytelling abilities.

Revising the Interview Protocol

Based on the considerable knowledge I gained in the initial interviews about what had worked and what had not, I significantly revised the interview questions. In an effort to improve the content and the flow of the interviews, I also consulted with oral historians who had experience developing interview questions.¹⁸

Feminist approaches to interviewing spurred my thinking about the kind of rapport I wanted to establish with my narrators and the way I wanted to conduct the interviews. For example, authors like Kathryn Anderson, who together with Dana Jack wrote about learning to listen in oral history interviews with women, influenced my emerging interview style. Following Anderson and Jack's (1991) experiences in oral interviews with women, I needed to make a shift in "methodology from information gathering, where the focus is on the right questions, to interaction, where the focus is on process, on the dynamic unfolding of the subject's viewpoint" (p. 23).

Further, I was particularly influenced by the work of Irving Seidman (1991), who, in his book *Interviewing as Qualitative Research*, recommended a three-step process for in-depth interviewing projects like mine that have a phenomenological focus. Seidman (1991) suggested first a focused life history, then the details of the central research event or experience, and finally reflection on the experience in the light of history.

Following Seidman's suggested format, I viewed my principal task in the early part of the interview as putting "the participant's experience in context by asking her to

tell as much as possible about her life history in light of the topic up to the present time” (Seidman, 1991, p. 11). I asked each narrator to tell her personal life history, and I listened for opportunities to explore the relationships between her life story and the topic of the Club. In this way, I was able to collect brief life histories from each narrator and to keep the collective story of the Club always in the foreground. For example, Dolores told me that she was born and raised in the 900 block of Island Avenue. When I probed about the significance of that location, she responded by telling me that this is the same block where Joanne was raised, and thus they were childhood friends long before the Club began. Similarly, Betty spoke about her mother’s fame for baking pizza. When I probed regarding the connection of that memory to the Club, Betty told me about how the “girls” used to stop in after school for pizza every Thursday. As Seidman had suggested, this first interview step brought past experiences up to the present.

In the second stage, the narrators talked about their present lives and their specific experiences in the Club. Seidman (1991) recommended that this part of the interview “concentrate on the concrete details of the participant’s present experience in the topic area of the study” (p. 11). I listened to their unique individual meanings and to the patterns of meanings that began to emerge across all seven narrative about the benefits of being in the Club.

In the third integrative step, Seidman suggested that interviewers ask questions that weave together past and present experiences. For example, I knew that growing up in a household with five brothers carried significant meaning for Betty. Therefore, I asked questions that brought that family experience together with the Club experience --

questions such as, “Given what you said about growing up in a household of five brothers, what does it mean to you to have close women friends in the Girls’ Club?”

In order to become “fluent” in asking interview questions, I developed an extensive list of concrete questions designed to elicit specific recollections regarding family of origin, neighborhood life, school, work, marriage, children, health-related experiences, and Club-related experiences. However, I did not “use” the questions in a lock-step manner. The questions provided an internal structure for my thinking, not an intimidating external structure for the interviews. They helped me keep my language tied to concrete daily experience, rather than abstract concepts. Appendix C contains all of the questions that formed the infrastructure (not the script) for the interviews.

While I did not have a fixed agenda, I went into the interviews with a list of topics:

1. Birth Family: grandparents, mother, father, siblings, and other significant adults.
2. Growing Up: neighborhood, parents’ livelihood, friends, school, understandings of role in family, understanding of sexuality, values, understandings of family’s economic status.
3. Graduation, Early Jobs, Leisure: dreams, expectations, hopes, as well as barriers and obstacles to action.
4. Marriage: meeting spouse, hopes, realities, strengths, accomplishments, problems, and constraints.
5. Children: knowledge of birth control, understanding of reproduction, pregnancy and birth experiences, hopes for children, problems.

6. Work: jobs after or during marriage, jobs after or during childbearing years, meaning of work, ambition, pride, sense of accomplishment.
7. Girls' Club: beginning, middle, and contemporary understandings of Girls' Club friendships; perceptions and experiences of how the Club works; meaning of Club; how meaning has changed; current understanding of Club friendships in their lives.
8. Perceptions of Well-being and Quality of Life: overall evaluation of physical and emotional health status, significant markers of life satisfaction and dissatisfaction, use of professional health services, meaning of quality of life.

Interviewing the Women of the Club

I was surprised to discover that I was not the only one who had prepared for the interviews. It was obvious that the “girls” had been looking forward to the experience, and that they had given substantial thought to their experiences in Club.

I was relieved because, at first, it was difficult to engage them in planning the interviews, especially from long-distance. Their lives were busy, but not in the scheduled way I was accustomed to. Their roles as household managers, mothers and grandmothers, and friends came first. I learned to fit into their schedules. The two easiest narrators to schedule were Donna and Dolores -- the two women who worked full-time and who were accustomed to breaking their time up into appointment-sized chunks.

However, once we got together, I realized that the “girls” had begun to “own” the project. No one missed a scheduled interview time. All of them found a private space, free of interruptions, where we could talk. They prepared their husbands and other

family members to cooperate with our need for privacy. We were often in a kitchen or dining room by ourselves, and there were always refreshments. They welcomed me and the work we were about to do together. They talked about “our” project.

Without my prompting, they brought out photograph albums and other memorabilia that catalogued their family life and significant events in the Club. I learned that Club had a material culture consisting of things like photos neatly arranged by years, “favors” from parties, Christmas ornaments made out of tuna fish cans and gold-sprayed elbow macaroni holiday trees. There were several versions of telephone trees; two narrators showed me their original blue mimeographed sheets from the 1950s. One of the most interesting pieces of Club culture was a year-by-year log of Club meetings that Anna kept. It documented whose “turn” it was to “have Club” by month and where the Christmas party was to be held each year. These tangible mementos stimulated conversations about the Club’s history.

The topic guide that I created for the interviews allowed us, researcher and narrators, to meander our way through their life stories, the Club’s history, and the meaning of the Club in an exploratory rather than linear way. It provided both sufficient structure and flexibility.

As the interviews progressed, I became aware that I talked less and listened more -- a fact substantiated in the taped interviews and in the transcripts. The narrators seemed engaged in a process that was new territory for them. Through my questions, they were making public what had always been private in their lives. Sometimes a

narrator would respond to a question with a monologue or stream of consciousness where a complete idea or interpretation of the Club emerged. Other times, I elicited information about the Club in a more joint exploration.

The interviews for the most part felt alive. They moved from moments of fluid conversation to utter silence to laughter to philosophical analysis, and occasionally, to tears. I was aware that I was in a privileged space where a meaning-making interaction was occurring that was not commonplace for me or for them.

However, I was totally unprepared for one area of difficulty that arose in the interviews. I had expected that the narrators might want to ask me questions about my life since I had left McKees Rocks, and I was prepared to tell the things they were curious about. But what I did not expect was the discomfort I felt when they questioned me about *why* I had left McKees Rocks, and more specifically, why I had not returned. It was only after I listened to the tapes several times that I was able to hear how I responded to these questions: by talking too much, usually in vague statements, or conversely, by distancing myself from the questions.

As I reflected on this change in my demeanor, I suspected that my resistance to their questions had to do with my still ambivalent relationship to “home,” made obvious by my decision not to move back to the Pittsburgh area. I felt comfortable talking about the values I shared with the “girls” -- how we were the same, from the same roots. But I felt uncomfortable talking about how we differ. I did not know how to talk with them about my strong desire for separation and distance from the close, ethnically-related extended family structures that endure in the Pittsburgh area and frame much of their

lives. By not dealing with questions about why I had never returned to McKees Rocks, I believe I missed an opportunity to explore our differences and to know each other better. In Chapter 5 I reflect on what I learned from these moments of disconnection.

3.5 Managing and Editing the Oral Narratives

Processing the Taped Interviews

After returning from each trip to McKees Rocks, I audited the interview tapes to assure that I had recorded them properly. I duplicated the tapes and sent the copies to a professional transcriber. I listened to the tapes a second time while reading the first edition of the typed transcript. In this way, I completed a preliminary editing of the tapes, corrected misspellings, and added punctuation that helped the interview to flow. For each interview, I had a master tape and a copy, each labeled to indicate the date and place of the interview and the narrator's name. After all the tapes had been transcribed, I had a total of 1,133 pages of roughly edited transcripts.

In order to carry out my intention of involving the narrators in the interpretive phase of the work, I sent each a copy of her roughly edited transcript. I also sent a series of questions I had developed to stimulate the narrators to review what they had said and to reflect on four questions: First, I asked them to elaborate or expand on areas in the transcripts that had particular meaning for them. Second, I requested that they indicate any areas in the transcripts that they did not want to become public for whatever reason. Third, I asked them to correct specific family and place names which neither I nor the transcriber could interpret. And finally, I requested that they respond to the brief paragraphs I had written summarizing my impressions of the interviews.

My good intentions miscarried. Although I had warned them not to be surprised at how different the written transcript would be from how they thought they sounded, the narrators were overwhelmed by the experience of confronting the printed version of their oral speech. The largely unedited transcripts were unsettling to them. Several of them commented that they sounded “illiterate.” Instead of attending to the things I had asked, they spent a good deal of time trying to edit the transcripts so that they would sound “right.” I realized that I had omitted the important step of editing out all the speech tics that caused them consternation.

The purpose of this project was to tell the story of the Girls’ Club and its role in the women’s lives, not to literally reproduce the speech patterns of the women. In the actual interviews, their articulateness, and sometimes their eloquence, was moving. However, when they read the written transcription of their oral interviews, they were unable to hear the power and charm with which they had originally expressed themselves.

Editing the Transcripts

During the subsequent editing, I decided to cut out the speech impediments from the flow of their stories -- the “ums” and “y’knows” that peppered the transcripts. I found the thinking of oral historian Michael Frisch (1990) helpful in making my editing decisions. Frisch’s (1990) work reassured me that there are no “right” editing decisions and cautioned against what he called the “misplaced literalism” of phonetically reproduced transcription:

To transcribe each pause or false start or tic would make an otherwise clear tape absolutely unreadable on paper, inevitably suggesting to readers an inarticulateness anything but characteristic of the speaker-as-heard. On the other

hand, to eliminate them all arbitrarily might risk a distortion of a different kind. In the final analysis, rules can not substitute for judgment in such matters (p. 85).

But even more important to my work with the Club narrators, Frisch (1990) explained how editing takes place in a social and political context that cannot be ignored -- especially when working with narratives of the "common people or the working-class" (p. 86). He pointed out that interviews of the powerful or the elites in our society are often granted the unconscious privilege of being edited before placed in print. Frisch's (1990) thinking in this extended passage provided me support to edit the Club transcripts in such a way as to grant my narrators the opportunity to convey their understandings of their lives and circumstances and to communicate in print with a style that matched their expressive speech:

To encounter the narratives of common people of the working class only in the somewhat torturous prose of "faithful" transcription. . . is to magnify precisely the class distance it is one of the promises of oral history to narrow. Similarly, to be limited to the exact sequence and linkages with which such an informant's story emerges in an interview is to deny such speakers the privilege of communicating their fuller experience or understanding as they know it, and indeed as they spoke it, broadly understood -- a privilege enjoyed by the powerful who are almost never encountered in such rough form, even though they drop as many g's, utter as many uh's, and would seem as inarticulate as anyone else were their discursive interviews or rambling thoughts presented as literally expressed (p. 86).

In the narratives that I present in Chapter 4, I have excised those parts of oral speech that acted as verbal impediments to the meaning I understood the "girls" to make. I also have excluded from the final transcripts all introductory conversations in which I talked while I set up the equipment or as I re-introduced the project goals.

Indexing

After editing the transcripts, I returned to the tapes and listened again while I read the transcripts to assure that meaning was retained. I stopped after each five minute interval of the tape and I summarized the content of the passage and its corresponding transcript page number. I created a file for each narrator that contained the demographic cover sheet, the indexed guide to the tape and transcript, and the edited transcript.¹⁹

During the tape audit, I noticed places where I wished I had asked a different follow-up question or places where I wished I had kept quiet. I made notes that provided a guideline for brief telephone interviews I later conducted to clarify points of confusion or to expand on areas that needed elaboration.

3.6 Analyzing and Interpreting

Several qualitative researchers have called attention to the lack of specific and practical guidelines for the analysis of in-depth interviews. For example, authors Natasha Mauthner and Andrea Doucet (1998) observed the gap between the increasing attention given to qualitative processes like data collection methods, while data analysis is still largely neglected. Mauthner and Doucet (1998) expressed particular concern over the “paucity of guidance in the literature; the lack of training on data analysis; the difficulties of finding appropriate support, mentoring and supervision from other researchers; and the increasing move to equate computer ‘coding’ with qualitative data ‘analysis’” (pp. 119-120). Other scholars have commented (a) on how little is available to show the novice oral historian the process of transforming raw, choppy interviews into the powerful and flowing narratives of published documentary texts (Frisch, 1990, p. 82), and (b) on how

narrative research practices have preceded the formalization of a methodology parallel to the practice (Lieblich, Tuval-Mashiach, & Zilber, 1998, p. 1). The mystery surrounding the actual analysis of narrative data, according to many of these researchers, has led to questions that ultimately cast a shadow over the integrity of the work conducted.

Developing the Narratives

For all these reasons, I entered this phase of my research with my eyes open. From my previous experiences in qualitative research projects, I knew that there were no easy templates to follow. But I also knew that there was a process I could count on -- one that I had engaged in and knew from other creative work. This process consisted of complete immersion in the data, followed by a fallow period, and finally by a time of emerging insights and integration.

I lived with the idea for this research for nearly five years and with the data itself for over four years. During that time, I immersed myself in the tapes and transcripts, searching for story lines and patterns that made sense and represented the data, trying to feel where the data tugged and pulled in certain directions. At the same time, I continued to draw from the literature that assisted me in understanding the culture, class, and history of my narrators, as well as from existing literature on social support and health.

As I listened to the voices from the research and to the voices from the “girls,” I became aware of a conversation. Sometimes, I could hear one of the girls say in response to a sociological theory on reciprocity, “See how brilliant we are! We knew that already.” Other times I heard the “girls” ask how a group of scholars could be so smart and yet have so little common sense about what people actually need from one another. And yet

other times, I could hear one of their voices rise in earnest disagreement with a psychological theory asserting the absolute virtue of honesty: "That is not the way it works in the Girls' Club." I took notes when I heard relevant dialogue between the transcripts and the interdisciplinary research. Some of that dialogue became part of the "prose bridges" in the presentation of the oral narratives.

Categorical-content analysis. Upon looking at the different possibilities for presenting the narrative data, I originally decided to take a "categorical approach" to the content of the narrators' life stories. By this I refer to a process of analyzing narrative content by first defining categories to be studied, and then classifying and extracting separate utterances of the text into these categories for interpretation. I began by creating a code book of relevant categories such as "instances of emotional support," "support during times of crisis," "maintenance of sense of coherence." Following this, I began to read the transcripts with the intent of breaking them down into specific sections that fit into the codes. My goal was to present the data in large thematic categories illustrated by quotes that I gleaned from across all seven narratives. Additionally, I planned to introduce the themes with a prose version of each narrator's biography based on the life-history data in her transcript.

By the time I reached the third transcript, I knew something was wrong. I was indeed achieving my goal. But when I sat back and read the "themes and categories" with their "illustrative quotes," the liveliness that I had grown quite familiar with in the individual transcripts seemed to have vacated the dissected analysis. Further, the

personal life history that each narrator told me was now reduced to my less interesting and less precise prose version of her biography.

Instead of a “narrative approach” to health and social support, I realized upon reflection that I had merely reproduced the positivist paradigm of trying to understand the whole by breaking it down into its parts. Even though the “parts” that I created were “narrative,” the fragmented and decontextualized quotes and themes achieved the same effect of separating an indivisible system into sections. I had violated the system of meaning within each narrative -- a system in which the narrators’ life stories and the Club story were interdependent.

The effect I produced by cutting the narratives apart and categorizing them to illustrate themes was described by narrative researcher Catherine Riessman (1993) as “fracturing” the narrative structure of the texts. Riessman (1993) cautioned against categorical analyses because narratives “are essential meaning-making structures . . . that must be preserved, not fractured, by investigators, who must respect respondents’ ways of constructing meaning and analyze how it is accomplished” (p. 4).

I had not preserved the “essential meaning-making structures” of the narratives. Consequently, I had created a disassembled analysis that did not reveal the health and social support connection in a way that improved on the methods of the health sciences or the traditional social sciences.

Holistic-content analysis. I asked myself, “What would a ‘storied’ approach to understanding health and social support look like? How could I preserve the ‘whole

story' and still arrive at reasoned interpretations of meaning that advanced a deeper understanding of the health and support connection?"

While there is a growing body of research dedicated to narrative theories and techniques for collecting data, far less attention has been paid to the retention of "narrative quality" in the analysis and reporting of the data (Ribbens & Edwards, 1998, pp. 15-16). Although the categorical-content analysis provided a means to manage and report a vast amount of narrative data, the data lost its personal, authentic, and contextual qualities. I was committed to finding a better way to interpret and to present my data -- a way that was as alive and "narrative" as the stories the "girls" had told me.

I went back to the texts and began to read again, listening this time very closely to the narrators and trying to detect the direction of their *whole* stories. Instead of reading for specific, pithy excerpts or quotes, I read the transcripts as I would a novel, asking myself questions like, "What does this action mean? Where is this part of the story going? Where is the main energy in this woman's story? What does this passage mean in relationship to what she or others said before or after?"

The first critical element I noticed in this new way of reading was how many of the Club's values and practices were already evident in their life stories long before the Club ever became an historical reality. The story of the Club and the story of these lives refused to be separated. Pulling them apart did not make narrative sense. Many of the "girls" explicitly said that they "grew up with" and matured with the Club. The stories of their lives and the story of the Club went together.

I decided to present the data “holistically” by editing each Club woman’s entire transcript in a way that wove together *both* the story of her life *and* the story of the Club as they were and are in dialogue. I faced two major challenges: First, I edited hundreds of pages of transcripts into a structure that flowed in a story-like sequence with a verisimilitude that matched the life it represented. Second, I checked my construction of each narrator’s story for its integrity with the raw transcript from which it emanated. I was guided again by Michael Frisch’s (1990) insights into the editing process, which he explains is grounded in a thorough understanding of the original text:

One must respect the original enough to come to know it deeply, and this knowledge must be the benchmark for measuring the validity of any digest, excerpt, or editing. But on this basis, one must also be able to abandon the pretense of literal reproduction, in order to craft the document into a form that will answer to the needs of successful presentation and communication (p. 84).

The physical process of editing required vigilance to detail, perspective on the whole, and the ability to make connections that were not always contiguous in the actual transcripts -- all at the same time. I presented the material in the order in which the “girls” had remembered their stories. Beginning with their life histories, I sequenced the chronology from their most faraway reminiscences about their immigrant parents and grandparents to their more proximate memories of their present day lives in which they themselves are grandparents.

Sometimes narrators told parts of the same story at different times or they related different stories with similar meanings. If it was clear to me from my thorough digestion of the whole transcript how their thoughts were connected into a coherent whole, I connected pieces from non-contiguous parts of the transcript. I used a row of asterisks in

the narrative to show that parts of their story were not continuous pieces; I used a double row of asterisks to indicate that the narrative was shifting from the autobiographical emphasis to the Club emphasis. In each case, I made every effort to maintain the narrator's meaning in the order in which she presented it. I made decisions to use non-contiguous parts of the narratives only when doing so added to the meaning. I always asked myself whether the decision maintained integrity with the overall interview.

Developing prose bridges. Additionally, these narratives did not occur as monologues, but were rather the product of actual conversations in which I asked a question and the narrators provided "answers." Rather than choosing a question-and-answer format for the narratives, I decided to introduce sections of each narrator's testimony with context-setting structures that I have come to call "prose bridges."

These prose bridges served several purposes. First, they provided a creative way to prevent the monotony of repeating the same questions that I had asked every narrator.²⁰ Second, I used the prose bridges to connect large sections of a narrator's story to other parts of her story or to parts of other narrators' stories. Third, and most important, the short prose sections provided a bridge between the narrator's life story and the social, political, cultural, and economic context of that story.

I made an effort to select material that would demonstrate both similarities and differences among the "girls." For example, I included information on how they all got their first jobs after high school -- jobs that illustrated the limited range of employment available to young working-class women at that time. But I also edited to show differences between their life stories. For example, Betty and Patti spoke in detail about

teachers and significant high school experiences. Joanne, on the other hand, was the only narrator to speak at length about a difficult birth experience. For some, work outside the home was important; for others, it was not at all important. The questions I brought into the interviews produced roughly parallel structures, but the emphases that characterized each narrator's story produced considerable variation in the final documents.

I began each narrative with a significant impression I had of that particular woman's interview. Sometimes, the introduction was a reflection on a defining moment in the interview. Other times, I wrote about a connection between this narrator's interview and the background research -- independent of my interviewing but connected to that woman and her story. These introductions vary in content and style. I did not intend them to be equivalent, and they are as different as the memory I hold of each interview.

The narratives that appear in Chapter 4 are the Club women's stories in their own words. Their voices are at full volume. As I speak in the introductions and the prose bridges, my voice serves to facilitate their stories from the background. However, both voices -- theirs and mine -- are present in the narratives.

Finally, I introduced all seven narratives with a brief social history of McKees Rocks -- a description of the larger social, regional, cultural, and economic contexts from which the stories of the Club women emerged. Here I present an overview of their families, their backgrounds, and the town that played such a large role in all their stories, against the backdrop of larger historical and structural forces.

Interpreting the Narratives

Satisfied that I had presented the Girls' Club narratives in a form that had preserved the "whole story," I set out in Chapter 5 to interpret the narrative data with similar respect for and sensitivity to their whole meaning. As a result, my interpretations are holistic; that is, I develop my interpretations by taking into account content from *all* the life stories told to me. The Club in its entirety is the unit of analysis.

In Chapter 5, I present five interpretive essays that look at the relationship between health and social support in the Club through different lenses. In the first essay, I explore the significance of my narrators' multiple contexts to their definitions of social support and health. I examine how their narratives reveal lives shaped by specific times and conditions. In the second essay, I trace the chronology of the Girls' Club development and how the meaning of social support has changed over its 40-year history. Here, I ponder the question of permeability, that is, to what degree the women of the Club were influenced by the vast social and economic changes occurring all around them. The third essay examines how the Club members use common, presumably culture-free, terms to refer to their health and well-being in ways that reveal specific cultural meanings. Specifically, this essay deals with how the Club women view their group experience as "therapy." The fourth essay describes how narrative research illuminates the "causal" connection between health and social support in a different, yet significant, way from traditional scientific investigations. I make a case for the way narratives link social support with our sense of wholeness and well-being. And finally, in the fifth essay, I discuss how the form of the narratives with their "leaning toward the positive" has a

meaning of its own. I argue that the form of the narrative uncovers deeper patterns about the meaningfulness of the Club experience to the narrators.

I suggest that these five essays constitute a holistic “thick interpretation” of the health and social support connection in the Girls’ Club narratives. Thick interpretation is the work of the storyteller, according to Norman Denzin (1994), who sets out to do a double task: (a) to uncover the working meanings that actually operate in the worlds of the people studied, and (b) to construct a system that reveals larger patterns in these meanings (pp. 506-507). In Chapter 5, I set out to do this double task. I examine what the “girls” themselves know about what works for them, what keeps the Club together, what keeps them whole; that is, their own pragmatic interpretations of their experiences. I also situate what the Club women know about health and social support within the specific cultural and material conditions that I believe shaped that knowledge.

3.7 The Limits of Narrative Research Methods

Narrative research methods provide a way to understand the details of lives from within narrators’ own points of view. Narratives provide a perspective on how individual experiences play out against the background of larger social, political, and economic forces, and how individuals make sense of their lives within these larger contexts. While narrative research methods have considerable strengths to deepen our understanding of lives in context, they are not without limits.

Narratives as Partial

The narrative that each Club member provided for this study represents one instance of her whole life story. Life stories are meaning-making enterprises that we

continually build and re-build throughout our lives. The time at which these particular stories were recorded and transcribed represents a single, frozen moment -- a still photograph -- in the dynamic construction of meaning in the lives of the narrators. These narratives should not be mistaken for the “way Club is” or for the whole person each narrator is.

Additionally, it almost goes without saying that generalizing to other persons or situations is impossible with this narrative research design. I cannot claim that these narratives are connected to the world by virtue of statistical representativeness of the Girls’ Club narrators. To the contrary, these narratives make a different claim for their usefulness. In Chapter 5, I discuss the criteria of “authenticity and trustworthiness” as a possible response to this condition of limited generalizability in narrative research and as a possible claim such research might make in its application to the larger world.

Shared Context as a Complicating Factor

Overall, I have found that being a “Rox girl” who came back to talk with people with whom I am closely connected has been a meaningful part of this research. My personal relationship with the “girls,” and the fact that I too was raised in the same working-class milieu contributed immeasurably to what I learned from them about health and social support. I devote considerable attention in Chapter 5 to how this study benefited from our shared context.

However, limitations also emerged from my close connection to the narrators. For example, during some of the interviews, the personal rapport opened the floodgates to highly personal and emotional material. Additionally, I have been trained as a counselor,

and my own communication style may have encouraged more disclosure. When the interview process opened up material that was painful for my narrators, I was aware of choosing not to probe or push a topic that may have been worthwhile to explore. Conversely, if the narrator wanted to speak about a painful topic triggered by the interview, I was aware that I often chose to listen empathically rather than to pursue my own agenda. The aversion I felt to eliciting material that was painful to them may have limited the range of responses that were possible in the interview and may have contributed to the possible leaning toward the positive in the narratives.

Leaning Toward the Positive

Given that it is impossible to know how much any oral history narrator might try to slant a story to make it acceptable to the interviewer, I was aware that the “girls” sometimes labored to answer questions that I had asked poorly in an effort to “get at” what they thought I was asking. From within the context of our relationships, the “girls” may have emphasized some details or omitted others to match their perceptions of what “Patty” needed.

From the beginning, the women of the Club have been my allies. They wanted their story to be told and they wanted to help me write it. They were enthusiastic and flattered that I saw them as the subjects of history -- something they began to see in themselves toward the end of the project. Because of the intention that we all had to see the good in their relationships, a story that leans to the positive may have resulted.

The fifth essay in Chapter 5 presents an analysis of what the positive emphasis in the narratives and their production may mean about (a) the value the Club has in the

narrators' lives, (b) the respect I have for what they know, and (c) the meaning I discovered in the culture I left when I came back for another look.

Sharing Authority in Qualitative Research

The ideal of sharing authority, especially in the interpretation of these narratives, has been an ethical standard for me throughout this research. But I do not assume that holding this ideal overcame the fact that I was the “interviewer” and the Club women were the “interviewees.” I am aware that I am the person who is writing the words that eventually represent the Girls' Club.

I do not underestimate the responsibility of authoring this written text. However, my experiences with the "girls" was that, for the most part, they were as much in control of what they said, when they said it, and how they said it as I was in control of asking the questions. As I reflected on the limitations to the ideal of sharing authority, I was comforted by the observations that oral historians Karen Olson and Linda Shopes (1991) made about the working-class women who participated in one of their projects. Olson and Shopes (1991) commented that women in groups like the Girls' Club, who have a strong sense of who they are, may not be especially threatened by the interview experience, and may in fact, “get” something out of participating in the research and “helping.” They observed that their narrators did not seem “especially overwhelmed, intimidated, or impressed with us at all. If we assert power by inserting ourselves into their world unbidden and asking for their stories, they also assert power by gratifying or denying our request” (Olson & Shopes, 1991, p. 196).

While I am the “author” of this written text, I believe that the “girls” also “authored” what they told me and how they conveyed their stories. The patterns I noted in their narratives showed me how they wanted to be understood. I too created the story by editing, shaping, and interpreting. My desire in this chapter on narrative research methods has been to record the lengths and depths I have traveled to use well my privilege of authoring this work in which the women of the Club and I all speak.

3.8 Chapter 3 End Notes

¹ I agree with researchers Gretchen Rossman and Sharon Rallis (1998) that the “researcher as instrument” is an unfortunate metaphor because it implies an antiseptic quality to what is, in reality, a quite human and often messy enterprise. See Rossman, G. & Rallis, S. (1998) *Learning in the field: An introduction to qualitative research*. Thousand Oaks, CA: Sage Publications. p. 26.

² In the introduction to *Portraits in Steel*, historian Michael Frisch describes his collaborator, photographer Milton Rogovin, as the sort of photographer who does not “take” photographs; rather, his subjects “give” them to him. During this project, I often felt that the “girls” were giving me their stories. They seemed excited and pleased to be telling the story of their Club; they had a presentation in mind before I started to interview them. Although we talked about many things, I felt that there was a “Club portrait” in each of their minds that they were anxious to transfer to me so that I could see them in the way they see the group and themselves. To read more about Frisch’s and Rogovin’s collaboration with ex-steelworkers in the Buffalo area, see Rogovin, M. & Frisch, M. (1993). *Portraits in steel*. Ithaca and London: Cornell University Press, pp. 1-21.

³ A large sandstone outcrop on the Ohio River was discovered as a burial site for the early Adena and Hopewell people who lived in the area between 1,000 and 500 B. C. The site is still known as the Indian Mound. In 1896, the Mound was opened for archaeological study and thoroughly explored. Bones and artifacts were removed and placed in the Carnegie Museum of Pittsburgh. Many attempts were made over the years to preserve the Indian Mound as a state or federal park, but they all failed. Today the Indian Mound is the site of an oil storage tank, what local historian Sinbad Condeluci calls “a forgotten landmark.” See (a) Kent, B. (1994). *Discovering Pennsylvania’s archeological heritage*. Harrisburg, PA: Pennsylvania Historical and Museum Commission and (b) Swetnam, G. (1964). *The McKees Rocks Story*. Pittsburgh, PA: Pittsburgh National Bank.

⁴ For an account of early Pittsburgh history and a view of McKees Rocks between the mid-eighteenth and mid-nineteenth centuries, see Baldwin, L. (1937). *Pittsburgh: The story of a city, 1750-1865*. Pittsburgh, PA: University of Pittsburgh Press.

⁵ The three local histories included a 1931 history of the McKees Rocks Bridge, a 1964 booklet commemorating the opening of a branch of the Pittsburgh National Bank in McKees Rocks, and a copy of the 100 year centennial booklet on McKees Rocks. See (a) White, J. (1931). *The McKees Rocks Bridge*. Pittsburgh, PA: Allegheny County Department of Public Works; (b) Swetnam, G. (1964). *The McKees Rocks Story*. Pittsburgh, PA: Pittsburgh National Bank, and (c) Presutti, D. H. (1992). *McKees Rocks Borough Centennial History, 1892-1992*. McKees Rocks, PA: McKees Rocks Centennial Celebration Committee.

⁶ Copies of this booklet are available by writing to Sinbad Condeluci, 112 Caldwell Street, Stowe Township, McKees Rocks, PA 15136. See Condeluci, S. (1989). *An historic portrait of McKees Rocks and Stowe Township*. McKees Rocks, PA: Unpublished manuscript. On pages 18-20 of this booklet, Mr. Condeluci quotes extensively from an August 26, 1909 *McKees Rocks Gazette* newspaper article covering the strike at Pressed Steel Car Company.

⁷ I spoke with Frank Zabrosky, who was at that time Curator of the University of Pittsburgh’s Archives of the Industrial Society. He introduced me to historian Corinne Azen Krause whose work on three generations of ethnic women in Pittsburgh proved very helpful to me. I met Dr. Eugene Levy of Carnegie-Mellon University with whom I had several conversations about the on-going evolution of ethnic identity and culture in the East Pittsburgh industrial towns he studied in his photojournalism essays. I spoke with Vince Leonard, who was born in McKees Rocks and became a reporter for the former *Pittsburgh Press*. Mr. Leonard, who later wrote for *the McKees Rocks Gazette* under the pseudonym of Rocky Phillips, was enormously helpful in revivifying my visual memories of McKees Rocks. With his near total recall of shop names, factories, school teachers, etc., he was a wonderful source of information about the way the Rox used to be.

⁸ Field notes from June, 1995 interviews with Father Regis Ryan and Sister Ruth Bearer at their Thompson Avenue offices of Focus on Renewal (FOR) project in McKees Rocks, Pennsylvania. Father Ryan has been with FOR since its inception in 1969; Sister Bearer joined the project in 1981.

⁹ The three original Focus on Renewal (FOR) organizers were Father Regis Ryan, Father Donald Fisher, and Sister Paulette Honeygosky. FOR started in 1969 as a grassroots organization to oppose Mayor David Hershman's politics. By the 1990s, the FOR had over a \$1.5 million annual budget, and offered the citizens of McKees Rocks drug and alcohol abuse counseling, a soup kitchen, a parenting program for young mothers, health and dental care, an education program, a transportation service for the elderly and handicapped, and an apartment house for the elderly. In spite of this dramatic contribution to the McKees Rocks community, the original organizers believed they had failed to inspire the community to organize and to fight back against the "pay-off politics" that have ruled the town since the mid-century. See Honeygosky, P. (1990). *Neighborhoods can transform: The McKees Rocks Story*. Arlington, CA: Institute for Transformation of Consciousness Research.

¹⁰ I consulted several excellent studies on Homestead ranging from the early Pittsburgh Survey to contemporary studies of the Homestead Strike. I also discovered Thomas Bell's *Out of This Furnace*, a novel about three generations of immigrant workers in the Homestead area. See (a) Byington, M. (1980). *Homestead: The households of a mill town*. Pittsburgh, PA: University of Pittsburgh Press. (Original work published in 1910 by the Russell Sage Foundation); (b) Bell, T. (1976). *Out of this furnace: A novel of immigrant labor in America*. Pittsburgh, PA: University of Pittsburgh Press. (Original work published in 1941 by Little, Brown, and Company); (c) Krause, P. (1992). *The battle for Homestead, 1880-1892*. Pittsburgh, PA: University of Pittsburgh; and (d) Miner, C. (1989). *Homestead: The story of a steel town*. Pittsburgh, PA: Historical Society of Western Pennsylvania.

¹¹ At the Club picnic, I had several conversations with the women's husbands about their perceptions of why the mills closed. Additionally, I spoke with their adult children who shared very clear memories of how their mothers used to prepare for Club meetings days in advance. When I attended the McKees Rocks High School Reunion for the Class of 1955, I was asked by the class president to get up and say a few words about the project, the importance of "old friends" in our lives, and how "friends can be good medicine."

¹² In Chapter 5, I provide a detailed profile of the Club's evolving membership, including the stories of the women who left as told through the current members.

¹³ A complete copy of the Human Subjects Review used in this study is available from the author who is available on-line at fabiano@cc.wvu.edu.

¹⁴ Grey Osterud, author of *Bonds of Community: The Lives of Farm Women in Nineteenth-Century New York* (1991), spoke with me on November, 14, 1995. She shared her ideas about a "best practices" model of interviewing women that avoids reproducing the dominant culture's way of creating new knowledge by conferring the interpretive role on the "author" and the "raw material" role on the narrators. To avoid this, Dr. Osterud has devised a method of (a) showing her narrators early drafts of her interpretations of what they said, and (b) asking them to reflect and comment on her interpretations. In this way, she believed that she has established a dynamic that encourages the narrators to historicize themselves and to see themselves in a larger context, which they are then free to comment on. I admired the process Dr. Osterud explained, and I attempted to implement a version of it with my narrators.

¹⁵ For the most part, the "girls" were intrigued by and interested in my interpretations. Occasionally, however, there were differences between us. For example, Dolores felt I overstated the way she "managed" her frustration with the other "girls" behavior during the class reunion planning sessions. She maintained that it just was not a "big deal." Patti thought that I overemphasized her resistance to the way General Motors treated her in the dispute over her retirement benefits. She did not see herself as someone who repeatedly questioned the authority of the "bosses." Joanne wondered why I connected her story so closely to her husband's, not so much in disagreement, but more as a concern that it made her look like she could not do anything without him. No one asked me to change any of my interpretations, but there were discrepancies in the way we viewed some parts of the narratives.

¹⁶ The two valid, empirically derived quantitative instruments were Flanagan's *Quality of Life Scale* and Antonovsky's *Sense of Coherence Questionnaire*. For more information on these scales, see (a) Flanagan, J. C. (1982). Measurement of quality of life. Current state of the art. *Archives of Physical Medicine and Rehabilitation*, 63, 56-59, and (b) Antonovsky, A. (1987). *Unraveling the mystery of health*. San Francisco: Jossey-Bass, Inc., pp. 189-194.

¹⁷ A passage from a background paper I wrote for a presentation to the Oral History Association on the Girls' Club Project shows that I had doubts about the effects of quantitatively derived question. I overrode my doubts because I believed that the "dynamic interactive qualitative environment of the narrative interview" would ground the quantitative questions in the rich context and concrete details of everyday life.

¹⁸ In January 1996, oral historian Linda Shopes reviewed the revised interview protocol and made substantive suggestions for further changes, which improved the overall flow and content of the interviews.

¹⁹ Copies of the indexes and edited transcripts, as well as audiotaped interviews, will be placed at the Archives of the Historical Society of Western Pennsylvania at the end of the research project. Until that time, they are available from the author with the narrators' consent.

²⁰ Appendix C contains the one sheet overview of the interview questions and a complete list of all the questions that I drew from in the interviews.

CHAPTER 4: THE ORAL NARRATIVES OF THE FIRST THURSDAY GIRLS' CLUB

4.1 A Social History of McKees Rocks

Anna, Betty, Carole, Dolores, Donna, Joanne, and Patti are the women of The First Thursday Girls' Club. They have met regularly on the first Thursday of every month since August 1958, three years after their graduation from McKees Rocks High School. They were girlhood and high school friends anxious for news of who had been on vacation, who was working where, who was the next to get married, and who would be the first to get pregnant. Someone at the first gathering said, "We have to keep in touch because if we don't make an effort, we're not going to do it."¹ Dolores volunteered to host the second meeting. She invited the "girls" to her parents' house where she was living while her husband was overseas in Korea.² Now, in the late 1990s, the Girls' Club has a history of friendship and social support that spans over four decades.

The seven women of the Club share a history that is longer than the Girls' Club itself. Several of them met and became best friends in grade school. Two of them are cousins. Two lived near each other in the same row houses on Island Avenue from the time they were in first grade. Their memories include childhood walks to and from public school and high school forays to roller skating rinks and dances. Living in the McKees Rocks area is one of the threads that tightly binds them together.

The Club women were born between 1937 and 1938, but the story of the Girls' Club goes back further into the history of McKees Rocks. The Girls' Club evolved partly in response to the specific circumstances of the narrators' lives as daughters of

first-generation central, southern, and eastern European immigrants who lived, worked, and raised their families in the stable, working-class, industrial community of McKees Rocks. The Rox -- both as a geographic location in southwestern Pennsylvania and as a set of social, economic, and cultural forces -- has a remarkable presence in each narrator's life story. Joanne's husband, Bud, captured the centrality of McKees Rocks in the Club women's story when he said, "The Rox *is* their ethnicity. Being from the Rox is the common denominator."³

The Rox, taken as a set of complicated and interacting contexts of gender, class, ethnicity, and geographic location, offers clues to the narrators' motives, their life choices, and, most importantly for this study, their views of health and social support. A meaningful interpretation of the Girls' Club as a support system for health and well-being requires an understanding of these intertwined contexts.

McKees Rocks is typical of small industrial towns in western Pennsylvania that reached the pinnacle of their economic strength in the first half of the twentieth century. From the late nineteenth century through post-World War II years, McKees Rocks boomed as a center for iron, steel, chemicals, and railroads. It was the destination of thousands of immigrants in the early years of the twentieth century, to the extent that the 1910 census reported 42 percent of McKees Rocks residents were foreign-born immigrants -- mostly Slavs, Poles, and Italians (Presutti, 1992, p. 19).

From its incorporation in 1892 to the early 1950s, McKees Rocks was synonymous with stable ethnic neighborhoods, heavy industry, and immigrants. Between 1900 and 1920, the parents and grandparents of most of the Club members

arrived in the Rox to take one of the thousands of industrial jobs in the factories or railroad yards that were springing up on the flood plains between the Chartiers Creek and the Ohio River.

The booming town and ethnic neighborhoods the “girls” invoke in their reminiscences were populated by first- and second-generation immigrant men and women. The men worked in hard, dirty shift jobs in the factories of the Bottoms and Neville Island, tended vegetable gardens behind their houses, and sometimes spent an evening playing cards or “shooting the breeze” with friends at one of the local ethnic clubs like the Liberty Club on Island Avenue or the Croatian Club in the Bottoms. The first-generation ethnic women mostly stayed at home and worked “out” only if economic need demanded it. They reared their children to respect the family, to take care of the family first, and then to give to their neighbors -- neighbors who were definitely white, probably of the same ethnicity, and most likely went to the same church.

The economic boom and industrial expansion that occurred in and around Pittsburgh through the end of World War II brought improved standards of living for working-class families in industrial communities like McKees Rocks. Sustained by the industrial economy and the increasing power of unions in the region, these communities provided a stable environment where the ethnic customs and worldviews of first- and second-generation immigrant families could take root. The war boom and post-war prosperity enabled them and other working families to participate in the consumer economy that seemed to bring a sense of new vitality to mill towns like McKees Rocks.

The fathers of the “girls” worked in the expanding industries in or near McKees Rocks. Anna’s father, for example, came to America from Italy with the special skill of bricklaying. He worked all his life laying and repairing brick in the ovens used to make steel at the Wheel and Axle Division of Carnegie Steel -- later United States Steel -- in the Bottoms. Some of the narrators’ fathers worked as general laborers in factories whose names later became synonymous with McKees Rocks: Pressed Steel Car Company, Federal Enamel and Stamping Company, Taylor-Wilson Manufacturing, Continental Can, Lockhart Steel, and the Pittsburgh and Lake Erie Railroad. Some fathers traveled the mile or so to Neville Island where they worked in the boat yards of Dravo Corporation or the foundries of Shenango Company. When the Club women think about their fathers, they tell about men who uncomplainingly worked hard under demanding industrial conditions so that their families would “never want for food or other basics.”

During this time of economic expansion for the working-class in Pittsburgh, owing to the war and the growing power of unions, the families of the Girls’ Club members settled in the ethnic enclaves in the Bottoms, on or near Island Avenue, or off Chartiers Avenue. For example, the Bordas family moved from the Bottoms to a row house on Island Avenue. The Fabianos moved from a housing development known as “The Terrace” to their Island Avenue row house, two doors down from the Bordas, and there the story of Joanne’s and Dolores’ friendship began. Mr. Dellemonache, Anna’s father, found a house in a sheriff’s sale that was big enough for his growing family. He moved into the large house in the Rox neighborhood where Anna and her family still live. Betty’s family left “the Flats” and moved into a four-story duplex on Alexander Street

one “terrace” up from Island Avenue. Betty recalled that her large family, with her five brothers used this house “from top to bottom.” After surviving the trauma of eviction from their parish home in the Bottoms, Patti’s family settled into the Bell Avenue neighborhood where her mother and sister still live. Carole’s family moved to the Bottoms from Millvale so that her father could be closer to his work at Pressed Steel. Within a few days of arriving in her new Bottoms home, Carole recalled meeting Angie, her best friend for life and her entree into the Club. Donna Hufnagel, whose family heritage goes back several generations to the original German settlers in the McKees Rocks area, grew up near her large, extended family’s farm along Chartiers Creek in an area that became known as “Hufty’s Hollow.”

The families of the Club women were typical of working-class people who populated McKees Rocks and other industrial communities in Pittsburgh. Their survival, their success, and their self-respect were all dependent on hard work, family loyalty, and a commitment to help family, friends, and kin. Relatives stayed with one another after their arrival in this country until they could set up households of their own. The narratives tell the tale again and again of relatives meeting kin arriving at Ellis Island from the “old country” to help them make the trek to a boarding house or a job that had already been arranged and that awaited them in McKees Rocks. Extended family networks gathered regularly on Sundays to eat together and to informally take the measure of everyone’s well-being or needs. *Paesanis*⁴ helped each other find work when the mills went out on wild-cat strikes because “someone always knew somebody somewhere who could get you a job.” Roman Catholic churches in large Italian enclaves like Norwood Hill

featured Saturday afternoon confessions in Italian, and all the churches reproduced rituals that were both religious and cultural, like the blessing of the Easter breads at St. Mary's Ukrainian Church in the Bottoms or the saints' day festivals at Mother of Sorrows Church in Norwood.

The ethnic traditions that kept the families, friends, and kin of the "girls" in close social contact served to meet the economic conditions of the times. Family and friends needed to be able to depend on one another as everyone's economic well-being was tied to the ups-and-downs of the mills. As Betty spoke about the economic status of her working-class family, she reflected that "everyone was on the same level field," everyone worked hard, and everyone struggled. When a strike or lack of contracts curtailed work in the mills and times got tough, people turned to their families and their community. Under the historical and economic conditions that prevailed in McKees Rocks up to the boom years of World War II, the family most fit to survive and thrive was "not an isolated nuclear type," as Tamara Hareven has pointed out, "but rather one of extended kinship ties" (Hareven, 1982, p. 364).

These kinship ties were a valuable resource for the "girls" and their families. The care and nurturing of these ties often fell to the narrators' mothers as part of the gendered division of labor that everyone took for granted. Like many white traditional first- and second-generation immigrant women in heavy industrial communities, the mothers of most of the "girls" worked in the household. They did not work outside the home, unless extreme economic hardship demanded it -- as in the case of Patti's family. When they did, it was for short periods of time when their families required the extra income. The

exception to this rule was Donna's mother. Donna recalled that her mother worked all of her life -- an unconventional pattern that Donna continued.

But for the most part, the mothers of the "girls" did what Micaela diLeonardo called the "work of kinship" (diLeonardo, 1984, pp. 191-229). They visited extended kin when sick, and they never went empty-handed, even if it meant only bringing a "can of peaches." They organized holiday gatherings, and they provided services and material goods to those in need. Several of the narrators described vivid examples of how their mothers knitted their households to others by making and giving away food, hosting social gatherings, and visiting.

The "girls" grew up in close neighborhoods where houses, churches, shops, industries, and taverns spilled into each other and where the lines between private and public seemed blurred. The McKees Rocks community that the "girls" recall in their narratives has a distinctive identity characterized by hard work and an inviolate priority of taking care of your own -- where your "own" meant your brothers and sisters, your aunts and uncles, your cousins, the people who lived on your street, those who went to your church, your godparents, and your friends -- the people who were not your family, but who felt like your family and were treated like them. McKees Rocks was a town where working-class culture flourished. There was work and there was family. Beyond these, there were also the neighborhood, churches, ethnic clubs, unions, taverns, and the Pittsburgh Pirates and the Steelers -- institutions that built and sustained a sense of identity and pride among the people who lived there.

The families of the Club women, however, differed from their working-class peers in McKees Rocks in one significant way. These families were apparently more geographically attached to their Rox neighborhoods than were other similar working-class families. The economic prosperity that many working families experienced during the 1940s was followed by a post-World War II exodus from the center of town to the hilltop subdivisions of Kennedy and Robinson Townships. People who had arrived in the Rox as immigrants, and who had worked all their lives in heavy industry, left for better housing and the appearance of middle-class lives that seemed possible after the war.

But none of the Club women's families followed this pattern. They did as well economically as others during and after the war. Most of the narrators' families were living in their own homes by that time, but no one left the Rox to move "up the hill." For whatever reasons, they were content to stay within the borough boundaries of McKees Rocks -- near kin, ethnic churches, neighborhood social clubs, and the school system that eventually brought their daughters together into a friendship circle that predated the Club by a decade. Joanne is the only narrator who recalled that her parents later regretted their decision to stay in the Rox as post-war prosperity began to fade.

By the time the "girls" graduated from McKees Rocks High School in 1955, the signs of economic decline were already visible in the Rox. Although the narrators' memories reflect a still prosperous and thriving community, by the mid-1950s McKees Rocks was well on its way toward its current economic disintegration. In the early 1950s, McKees Rocks suffered through several major setbacks to its industrial base. For example, Pressed Steel Car Company, the area's largest employer, moved to Chicago due

to “labor troubles,” taking its 4,000 jobs with it. At the same time, Continental Can Company, employing over 450 people, closed its plant in the Bottoms. With these two blows, the area lost almost one-half of its jobs (Presutti, 1992, pp. 30-35).

Simultaneously, the Pittsburgh and Lake Erie Railroad phased out its steam rail jobs as the railroads fought the upsurge in the trucking and airlines industries. In the early 1950s Mayor David Hershman said, “Unless we rebuild, McKees Rocks will trip over its own grave” (Presutti, 1992, p. 32).

Social scientists and historians say that by the late 1950s and early 1960s, Pittsburgh’s industrial economy had already reached a mature plateau; lack of industrial diversification was leading the region into inevitable “economic arteriosclerosis” (Lubove, 1996, p. 4). But a deceptive appearance of economic prosperity persisted throughout this period of time -- a time when the “girls” of the Club were getting married. As newlyweds, the “girls” and their husbands benefited from the veneer of economic activity in the area -- activity that masked the deeper problems of labor-management disputes, changing world markets, and insufficient investment in technological development that would later lead to precipitous economic declines. Betty, for example, described how she and her husband were able to put a down payment on a house immediately after they were married in 1958 because he had a good, steady job. Most of the “girls” and their spouses had purchased a home by the time their children were born in the early 1960s.

The husbands of the “girls” worked in a wide spectrum of jobs ranging from heavy industry to lower-level managerial positions to professional work. Some worked more than one job for long periods of time. All of the men were able to earn middle-class

incomes, which brought higher economic standards of living to their families throughout the first two decades of their marriages. They seemed to enter into that implicit contract that characterized the lives of young working-class men in the Pittsburgh area: In exchange for working hard at a job, you got to keep it most of your life and you had enough money to buy a house and most anything your wife and kids wanted. But this contract was soon to become null and void.

An important side note in this review of the work lives of the narrators' husbands is that throughout this entire period Donna, who followed her mother's pattern of lifelong employment, and Patti, who supported herself all of her life, worked continually at a variety of manufacturing and clerical positions. They were the only narrators who worked outside the home from high school graduation to the present.

In the late 1970s and throughout the 1980s, the "wolf finally came" to the steel industry. John Hoerr, in his panoramic presentation of the decline of the American steel industry, quotes a local Pittsburgh union leader expressing his disbelief that the steel industry would ever collapse: "One of the problems in the mills is no union man would trust any of the companies. To the average union man, they're always crying wolf. And the wolf finally came" (Hoerr, 1988, p. 23). Bobbie Muha, Donna's husband, who had worked in the steel industry for over 30 years, echoed this same sense of disbelief at the end of an era when he told me, "It's all gone -- from Aliquippa to Kennywood -- nothing's left. Not one smokestack. Nobody would ever have believed this."⁵

The severe economic recession of the early 1980s, precipitated by the unchecked decision of U. S. Steel and other steel companies to close down their Pittsburgh area

plants, affected the lives of the Muhas and several of the other Club members and their families. Dolores told a personal story of deindustrialization from her perspective as a displaced office worker who found out suddenly one day that her job of nearly 20 years at the Dravo Corporation had just disappeared. Dolores was surprised by the loss of identity she felt when she lost her job. Donna was let go from a large oil company where she had worked for over ten years. All of a sudden, as a woman in her late 40s, she found herself out looking for work. Donna's husband took an early retirement from the Wheel and Axle Division of U. S. Steel where he had worked for three decades. He worried about the divorces, illnesses, and suicidal behavior he saw among his friends who were suddenly out of work and without the support system he had in his family. Anna's husband was given a few thousand dollars severance pay and a partial retirement in return for having given Dravo 32 years of service. And Patti, who had worked at General Motor's Regional Division Offices for over 30 years, found herself fighting management for a fair retirement package in the midst of the company's pull out of the Pittsburgh area for relocation to a "more profitable regional center."

The shutdown of the steel industry in the Pittsburgh region involved more than the loss of jobs. Critics of the steel industry's unilateral disinvestment from industrial communities throughout the Pittsburgh region argue that statistics cannot convey the full human costs of plant shutdowns. Communities where generations of young workers earned their living in the mills, where grandparents did baby-sitting so that parents could work, where elderly parents were taken care of by their families rather than institutions, began to unravel (Lynd, 1982, p. 202).

Industrial workers in communities like McKees Rocks were accustomed to the instability of industrial work cycles and the economic struggles associated with strikes that lasted longer than union benefit funds could pay out. The people of this region were not strangers to the capriciousness of market-driven capitalism. Families developed well-practiced resilience in order to respond and do battle against the turbulence of such economic forces. Many of the Club women had heard their fathers' stories of the dangerous working conditions in the mills, the risks involved in being union activists, and the hard times of finding part-time jobs when strikes shut the mills down. But the complete decapitation of industry, one built over the course of a century, that occurred in the 1980s in Pittsburgh was nothing that anyone could prepare for.

Steelworkers, heavy industrial workers, and the office workers who supported them had to cope with the loss of security, sense of worth, and identity -- all of which were wrapped up in the jobs that would not return. For industrial communities like McKees Rocks, which already had suffered from massive economic dislocation, unemployment, and an aging tax base, the disinvestment of the remaining industries on Neville Island, like Dravo, was devastating. The loss of a sense of continuity, security, family, cohesion, and community that characterized working-class life at its best in towns like McKees Rocks was the real cost of deindustrialization. McKees Rocks and many other towns up and down the Monongahela and Ohio River Valleys that had once been stable, independent, hard-working communities were devastated.

Big companies and omnipresent industry had shaped attitudes and expectations over generations, and as Michelle Fanzo (1996) observed, “When that system suddenly disappeared, the human parts of the machinery were the least equipped for change” (p. 106). After having profited from the labor of working people in the Pittsburgh area for nearly a century, the steel companies pulled out, and communities like McKees Rocks that had served those industries have never been the same. McKees Rocks today bears little resemblance to the prosperous, intergenerational, ethnic community it once was.

This is the town where five of the seven Club women were born and where all seven have lived and raised their families. Their stories are rooted in the place, times, and circumstances in which they grew up. The narratives that follow are the personal stories of the Club women, *and* they reflect the history, the region, the culture, and the economic realities within which the women have lived and made sense of their lives.

I present these narratives as the phenomenological data of this study. They provide the material with which to understand (a) each woman’s personal story and lived experience of health and social support, (b) the effect of larger historical, cultural, and economic forces on their experiences, and (c) the way the Girls’ Club has helped them maintain a sense of identity, self-worth, and well-being throughout their lives.

4.2 Dolores

“It’s like all of them were putting their arms all around me.”

When I made arrangements to meet with Dolores at her home in the residential section of Neville Island, I had not been on the Island for over 30 years. But from the minute my car crossed the Neville Island Bridge and made the turn past the Shenango Foundry, my body remembered the anticipation of going to the “pool.”

Dravo Corporation, which practically owned Neville Island from the 1940s to the 1980s, provided its employees and their families with a park and a pool. The park was the site for the annual Dravo Picnic with carnival rides, horseshoe-throwing contests, free food, and speeches by company administrators and union officials. The pool was where I lived during the summer. It never bothered me that it was right in the middle of a huge industrial complex. It was heaven to take the Schaeffer bus, and, for 25 cents, be whisked away from the traffic, noise, and heat of Island Avenue to this turquoise oasis. My father worked at Dravo, and I could see from the deep end of the pool the structural shop where he welded and fitted huge pieces of steel together.

My sister Joanne and my cousin Betty, whose father also worked there, spent a lot of time at the pool. Sometimes they would finagle me out of going so that they could use my metal identification tag to get Dolores into the pool. It was at the Dravo Pool that Dolores met her husband, Steve Kosko. He was from the Island and he worked as a lifeguard at the pool for three summers while he was in college. He was three years older than my sister and her friends, and everyone agreed that he was very attractive.

I drove past the buildings where the name Dravo appeared like a ghost through the rust. Trying to steer straight and keep the car on the road, I peered at the industrial detritus all over this part of the Island, trying to detect a trace of the bath house, the picnic tables, or the pool itself. I couldn't see anything, and by then, I had rounded the curve by the Neville Island Roller Rink, which meant I was very near the town of Neville Island.

Dolores and Steve live in a neat brick ranch on the main street through town. Steve opened the door and warmly welcomed me. Steve had grown a little heavier and gray, but still there was evidence of the handsome lifeguard from the Dravo Pool in his blue eyes and angular face. He explained quickly that he was about to leave for the evening. Like all the other "girls," Dolores had prepared her husband for the privacy we needed during the interviews.

Dolores called out from the bedroom to make myself at home. While I waited for her, I was drawn to a large gold-edged wooden plaque of the Last Supper that sat on top of her dining room hutch. It was painted in the characteristic flattened style of Byzantine art. Cyrillic letters inscribed a religious message on it.

Dolores came in and explained that Steve had bought her the Last Supper for Mother's Day. She looked a bit rushed from just having gotten home and changed clothes from work. Dolores was in person as I always see her in my memory: tall, elegant, wide-eyed, and intensely graceful.

* * * *

Dolores' parents emigrated from Czechoslovakia. Her mother's story contained the familiar immigration pattern of a father coming first to establish work and housing, before sending money for his family to join them. But Dolores' father's story was unique; it was a story he himself did not like to tell.

My background is Slovak. Both my parents were born in Europe, in Czechoslovakia, which is no longer a country or a state. My mother came to the United States with my grandmother as an infant. I think she was only six or nine months old. I really can't remember now if the entire family came at that time. But my grandfather was here. The men always came first to establish residence, because they needed to do that to bring the rest of their families over. And of course to get a job.

Now my father . . . only in later years did I really try to appreciate his hard life. My grandfather likewise came over first, but he didn't have enough money to bring my father. So he just brought my grandmother and my father's sister. My father was left behind in Europe and was left to live with family. And picking up little bits and pieces over the years -- he never really wanted to talk about it -- but I think that he was treated almost like a servant. He didn't sleep in the main house; he was to sleep out in outside quarters, and he worked very hard. They used him almost like a servant.

And he came to the United States alone, without knowing English on the boat, and he was, I believe, 12. And after he died, and after my mother died, I was going through things, and I found his passport. It's on fabric, and there's his picture. And I looked at that and I thought, "What was he thinking of? So brave to come over all by himself and to go through the immigration at Ellis Island." I wished I would have been able to talk about it with him, and that he did that all alone.

This would have had to have been probably 1920's, around in that time. And I don't know exactly when they came to McKees Rocks. But my grandparents lived in the Bottoms, very close to our church, the Holy Ghost Byzantine Catholic Church. Behind the church, my grandfather had built a grocery store and also apartments above the store. My earliest recollection is riding a tricycle in the storeroom, and then going up the steps to where we lived in the apartments. But when the '37 flood came, he was just ruined, he lost everything. And I guess he couldn't keep it, and they did have to sell that building.

That building is still there. As a matter of fact, when we come out of church, and we pull out of our parking lot, I'm facing that building every week. So right now it's a social hall, but the building is intact, and they still have the apartments on the second floor. So it's very unique that I see that every week.

Dolores grew up in a first-generation immigrant household. Family loyalty and hard work were the primary values that her parents lived and taught her by their example. Her father, John, worked on Neville Island, and her mother, Juliana, was a homemaker and a skilled seamstress. Life in her family was governed by tradition and rules. Dolores recalled that her family seemed restrictive, but always filled with love and nurturing.

My father worked for Pittsburgh Coke and Chemical on the Island, right by Shenango, right on the tip. He was a pipe fitter. I remember him coming home from work dirty. Dirty in his work clothes, his work shoes, the steel-tipped work shoes, his lunch box, the steel kind of lunch box with the thermos inside, and he would hand it to my mother as he would walk in.

But one thing that I admired about my parents, is that when my father came home, he kissed my mother hello. And then later on in years, I would remember hearing

my mother and father saying good night to each other in bed. And even though maybe they had a disagreement and maybe weren't talking to one another, they always did that. They always said good night to one another. And I remember my mother always walking my father to the door when he went to work and they would kiss good-bye.

It meant a lot to me that my parents loved each other and that they were very devoted to one another. And even though they had their disagreements, that love and that commitment was there. And that my mother and father always walked hand in hand, and it comes back, because now Steve and I walk hand in hand. I always reach for his hand now.

* * * *

I think my father was the most remarkable man. He self-taught himself. His education probably was maybe sixth grade level, and he did take some courses to read blueprints. I remember seeing the books there. And he became a master pipe fitter.

And in the evenings, he would read the newspaper from front to back. Everything. And he would buy the almanac, the World Almanac, either every year, or every other year. And after reading the paper, if he had time, then he would go through the almanac. He would start at the beginning, and he had a year to go through to the end. So again he just really educated himself, so that he knew a little bit about many things. He had the drive and the desire and the ambition to make the most that he could of himself without a formal education. And he worked very hard.

There were many nights that he did everything, repairs in the house, again through trial and error, installing things and rewiring. I remember him rewiring and he would start

that after he would come home from work and he would be there till 10 o'clock at night. And my mother would call to him, to come up, and it was time to go to bed, and sometimes he'd be in the corner, and then I would be in the corner holding the light on a hook, holding it for him, and you don't say a word if your arm's tired, you just sort of shift over to the other arm. And so he was very very hardworking.

But my father was probably around 61 or 62 when he had a stroke. That's when they sold the house on Island Avenue, and moved here on Neville Island, which is about two blocks away from me. He had to take an early disability retirement from Pittsburgh Coke and Chemical. It took a toll on him because what he used to be able to do in maybe in 10 minutes, took him all day, all day. And he was very frustrated, and he was angry.

He was very emotional, he would cry very easily. Many times, I remember him coming over and he would cry and say, "I don't know why I'm not dead. Why didn't God take me?" And I says, "Because he knew I needed you." It's overwhelming to see your parent cry. And you realize that now here is an adult, but you have to use your skills because you are almost dealing with a child to help them make something rational out of their feelings. So, all along with those kind of experiences, I think it matures you, it changes you.

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I was naturally closer to my mother. I don't know if that's true in every child/parent relationship that maybe a boy is closer to the father, but I was closest to my mother. My father being a very quiet person liked to read and all, and I was closest to my mother.

I remember in growing up that my mother was an excellent seamstress. And when I was about five or so, my mother took sewing lessons at Rosenbaum's Department Store. I remember sitting there. They'd give me little scraps of material and the needle and they would let me sew these scraps together, just to keep me occupied.

She made all my clothes, growing up. She made all my clothes, and then when I was graduating, we were talking about it, and I said, "I'd like to buy a dress." And now that I think back, I think I hurt her feelings, because that was something she would have wanted to make for me because my mother had sewn for me all those years. I had custom-made designer dresses "a la mother." And then I could not find anything that I liked. So last minute, I said to my mother, I called her Ma, I says, "Ma, will you make my dress for me?" This was maybe two weeks before graduation. And terrible of me that I did that to her, but late at night, there she was with her sewing machine. She had a treadle pedal sewing machine, and her little foot was just going on that pedal, and she made me my dress, I'll never forget it. It was white shantung. I'll never forget that dress. And it was a beautiful dress. But afterwards I thought to myself, "I bet I hurt her feelings." And I probably did. Y'know, that I wanted a store-bought dress.

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I learned about commitment to family from my mother and father. And that family is always there to help one another. Very strong moral lessons. I had to be home at a certain time. Of course, growing up and young, you don't know any better, you think your parents are being very mean. But you never talk back to your parents. You

never questioned your parents' decisions. I never did. All I ever thought was, "Oh, they're so old-fashioned."

I remember thinking that. But I never said it. I think I respected them, because, now it's hard to put into words. It was just something inside of you. You respected your parents, and down deep you knew that whatever decision they were making for you was for your own good. It was not a flighty kind of thing. It was just part of that life, part of growing up.

Like about my grandmother living with us. In the two bedroom house such as you and your sister shared a bed and a bedroom. I in turn shared a bed with my grandmother, and a lot of the girls in high school would say, "Ouou! You sleep with your grandmother! How could you sleep with your grandmother?" But I never thought anything about it. It was like, "Oh, what are we going to do? Are we going to put her out, or what?" It was like this: There was a bedroom, there's a bed, and there're two people. . . you sleep together, and I slept with my grandmother till the night before I got married.

And my grandmother lived till 92 years, but the last couple of years, she was bedridden, and they had to get a hospital bed for her, and they cared for her. But it was 24-hour care. My father had a folding bed that he had in my grandmother's bedroom, and he slept there with her cause she had her nights and days mixed up. So she was up all night, so again, I guess that's all part of family. Taking care of one another.

Dolores talked about one of the qualities her parents lacked: the ability to talk personally with her. However, she believed this characteristic was generational and not specific to them. She illustrated this point by telling two contrasting stories: one in which her mother was talking with her about sexuality and the other in which she was talking with one of her daughters.

The only drawback I think in that generation was not talking to the young girl, like the situation of a young girl starting her first period. It happened to me in sixth grade. I knew nothing. I knew nothing. And all day long I just felt like, I don't feel right, and I kept going to the bathroom. I came home, and when I went to the bathroom, I was like, "Oh, what is this!" And I told my mother, and my mother just gave me a box of pads, she says, "This will happen to you once a month, it's natural and you'll be fine." But only then in seventh grade when we had health classes that it all fell into place, but I trusted my mother. She says, "This happens once a month, lasts for five days. This is what you do, don't take a bath." And I didn't.

I guess my mother couldn't, wasn't comfortable. Just wasn't comfortable about talking about that. My mother was very private. I never saw my mother without any clothes on. Very private. And of course, now my grandmother, I would wash her back for her when she was in the tub, but I never really saw my mother without clothes on.

I guess it's just a different generation kind of thing. Compared to whenever my daughters started their period. I was at work, my Diane calls me on the telephone, she says, "Mom, I started my period." And I'm thinking, "Oh and I'm not there for her." And I started to tell her, and she says, "Don't worry, Mom, I know all about it." And I says, "Are you all right? Did you have cramps?" "No, I'm fine." And she says, "I'm going roller-skating tonight." "I don't think you should go." "I'm fine, why are you worried about me, I'm fine." When that happened, I thought back to whenever it was for me. So again it was just those times, that generation.

Graduation was an indecisive time for Dolores. Although her parents wanted her to go to college, she could not justify the financial expenditure. Instead of going to college, she did the "next best thing." She went to a business school, worked for a while, met her future husband, and soon found herself on a domestic path that was typical for a young working-class woman in McKees Rocks in the 1950s.

After we graduated, everyone sort of went their own way. Joanne and Betty got jobs at Mercy Hospital. I got a job at St. Joseph's Corrugated Paper Company on Island Avenue. I worked there through the summer and I was in the accounting department and I really do not like accounting. I realized then, "This isn't for me." So I thought, "Well, I've got to do something," so I talked with my parents. They had wanted me to go to college. But I wasn't sure what I wanted, and I didn't want to waste their money, because my parents really struggled.

But I thought, maybe the next best thing would be that I would go to Robert Morris Business School, which I did. I took a six-month course, and I was like a hermit for six months. I never saw anyone, because I really wanted to do well, and I graduated second in my class, and I got my first job with Manufacturer's Light and Heat in the Union Trust Building. And at that time I was dating Steve and then we made plans to get married, and then after we were married, of course I started my family almost immediately, and y'know, quit working.

I met Steve after I graduated. He was three years older. Turned out we both went to the same church, and he was just very very polite, and attentive. And mature. He was mature and I fell in love with him. And we dated and he was a sophomore in college. So we dated all that time when he went to college, and he graduated in '57, then we married in '58, and he was drafted.

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I went into marriage so dumb. I mean, you know a little bit, but again, out of the group of girls that we knew, we all got married the same year or so. Your sister got married in June, and I got married in July and again that was kind of private, y'know, we really didn't talk a whole lot about it. And being brought up a strict Catholic, we went to premarital classes. They were held with the priest, not as they do now in a group. And it was just the rhythm system. They say, "The rhythm system, the rhythm system." So I says, "Okay, the rhythm system, that's what we'll do. The rhythm system." Got married, went on my honeymoon, got pregnant. Valerie was born nine months to the day. Was married July 26th, she was born April 26.

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I had to grow up real fast. I stayed with my parents. I was there for a year, and my Valerie was born and Steve was overseas. He was sent to Korea. Of course that wasn't war time, that was peace time, but he was gone for a year. So there was that first year of marriage, having Valerie, raising her by myself. My mother and my grandmother were there for me, but it was hard living in that situation. I had to be a responsible mother. Talk about living on a shoestring. All I had was Steve's Army allotment. I would not have been able to be on my own to pay rent and food and medical bills with a young, small baby.

I was lonely. I was very lonely. And again being the only child, not having any brothers and sisters. Now I had to be responsible for the care of this child which I had no

idea what I was doing. It's amazing that I got through it. I wouldn't have been able to do it all without my mother. I think that just made that bond with her more and more.

And then when Steve came home from the service, then we got the apartment in the Mansionettes. I remember my mother crying when we left with Valerie. I'll always remember that, looking back when we went down the steps off the porch, and I looked back at her, and she was crying.

Club was born at a point of great personal need in Dolores' life. As a young wife and mother, she felt lonely, and Club satisfied very basic needs for companionship, advice, and encouragement.

I stayed home. I sold Christmas cards. I did whatever I could to try to bring in a little bit of extra money. As with all the girls, I think those were lean years and I was so lonely. I would go over and visit your sister. She had the apartment over in West Park and we just came up with the idea. Let's get together whoever can to come over, and that was the first get together for Club. And then we just thought, "Well, how about this one, how about that one?" And that's the way Club was born. Out of a need to continue friendships that you had in high school, but it was different now. Although Patti and Anna weren't married, it was like a combination of us. For me it was just a salvation.

I probably had the highest need. Definitely. I needed an opportunity to just to get out of the house. Although you love your child, it's kind of nice just to get out and have adult conversation with people of your own age. I had adult conversation with my parents, but that was different. You need it with people of your own age to be able to talk of different things.

Dolores went back to work because her children were growing up and her family needed more income than her husband's job could provide. She reflected on the hope and then the disappointment that she and her husband felt about the unfulfilled promise of the job he had worked in most of his life.

After coming back from service and taking a couple of jobs, Steve accepted a job with Braun Baking Company. It was supposed to be a training program, and they did want college graduates, but they said to him, "You start from the bottom. You run a route."

They didn't recognize the potential in him. The men that were the managers there had come up through the ranks, and they felt like, "No young whippersnapper, snotty college kid is going to get ahead of me or have it any easier than me. He's going to have to pay his dues." Which is a very archaic foolish way of running a business, but that's the way it was. The men running the company had come up through the ranks for 20, 30 years and yet didn't have the skills, didn't have the polish.

So the training program was never developed. It was just at its infancy. There was no one to really fully develop it the way they should have. So it turned out he was just running these routes, long hours, but the pay wasn't great. He did get into supervision. Longer hours and a little bit of an increase in pay. And then it came to a point where he was there close to ten years and it was hard to make a change. And I don't think Steve had the confidence in himself. And I was too wrapped up in the family and I didn't sense that or recognize that, as I look back now. So he stayed with Braun's for 25 years. Working on Saturdays. His day off was Wednesday. So for 25 years, he was never home on a Saturday. We were never able to do anything as a family for a

weekend. He came home maybe seven o'clock or later, so any of the children's activities like softball, I did it alone. I know he felt badly about it, but he stayed with Braun's. They didn't know how to run that company well and it's gone down the tubes.

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Oh, I went into marriage with rose-colored glasses. I was very much in love and I thought, oh, we're just going to live happily ever after and like the white knight comes and picks up the maiden and carries her off, and it's just going to be wonderful. We're going to be able to be together and love one another and no problems, well, again, I learned very quickly. Marriage is something that you have to work at constantly, and there comes, I think sometimes, it happened in our marriage, that our interests went different ways. I grew. I was growing while Steve was stagnating, and I think although he never said it, or implied it, I think that down deep he resented me for my accomplishments. I went to work for Dravo, I didn't want to progress, all I wanted to do was go back and help supplement the income, because we were struggling. It was just too hard on one salary. We had zip. We lived from one pay to the other. There were no extras. And we never went on vacation, we couldn't afford it.

After a long hiatus in which she stayed at home with her small children, Dolores joined thousands of women who were entering the job market in the 1970s. Her supervisors at Dravo Corporation quickly noticed her capabilities, and she rose up through the ranks. As a benefit of working at Dravo, Dolores was able to pursue her deferred dream of going to college. But like many working people in Pittsburgh in the 1980s, she was not immune from the drastic economic changes that were taking place all around her.

Kids by that time were . . . Valerie was twelve, Diane was nine, and then I went to work part-time, which was fine. But then y'know, you work three days, and then the

next thing you know, they want you to work four days, and then before you know it you're working five days, with no benefits, no nothing. No paid vacation, and then they offered me the full-time job, and I thought, "Well, I'm working five days anyways, and it seems to be working." I was right there on the Island, so it was very convenient, so I did go as a full-time employee. And I did that for maybe about three years, and then I was offered the promotion but it was in the city. They offered me a job as a supervisor. What did I know about being a supervisor? I took it, y'know, you look back at this, and I think to myself, "How did I ever do it?"

Without any formal training. I did not have a college degree, they gave me the job of supervisor of stenographic services. I had 10 girls reporting to me. Responsible for a co-op program of students going to business school and working at Dravo. Setting that program up. Interviewing. I never had any formal instruction on how to interview people. I was interviewing people. I had to do performance reviews. Writing procedure manuals. Maybe part of it is my sense of organization. I really feel that that's probably it. How do you develop a sense of organization or is that ingrained in you, or a part of your personality?

And then after that, as I look back now, it seems like every four years I made a change. Then I was transferred over to Information Systems, it was Automation Systems responsible for office automation, testing software, making recommendations.

I still very much wanted to go to college, to get a college degree. I didn't think I was going to be able to go for the four years, but I definitely wanted to have an

Associate's Degree. And Dravo had the tuition refund program. You have to pay for it first, and then they reimbursed you for it. And I started with classes.

It took me 12 years. But I have my Associate's Degree in Business Administration. I'm not bragging, but I just feel very proud of myself that I was able to do it, working full time, raising a family, working overtime also when projects needed it or demanded it. Algebra was the most difficult class that I had. I had to be tutored by a college student that was probably the age of my daughter. But I did not like Algebra, and after I finished that class, I only retained what I needed to take the test, and I know that when I took the final test, I forgot everything. I just wasn't that good in math, but I did it! And I feel real good about that.

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I was just at the right place at the right time, something opening up and my being recommended for and then moving up. And then after 16 years at Dravo, my job was eliminated because they were downsizing.

And then when I was laid off, always in the back of your mind you think, "Oh, I wish I could get laid off and I'll collect unemployment and I'll sit at home." And no one really knows what happens to them when there really is a layoff. But my job was eliminated, I was laid off. And I had two weeks, they gave me like a two week notice.

And a lot of people reacted with anger when they were laid off. They just picked up their stuff and they left their office. I got laid off, I came out of the office, and I went back to my office, and I went back to work. And people were walking past my office

because they put two and two together, so they figured I got laid off, but they couldn't figure out why I was still working.

But I never thought I should do it any other way. I had a job, I had a project to finish. And I finished it in the two weeks, and then when the two weeks was over, then I packed up my stuff and I left. Why? Dravo was good to me. I got my education. They paid me. That was the contract with them. My contract was to finish that project. And I did. And I wouldn't do it any other way. But the day I had to walk out of there, it was the most horrible feeling. And then I felt as though I were in limbo. Like I wasn't anywhere, and I thought to myself, "I should be enjoying this time off." But I had out-placement services, and I went to work at that. But I didn't start at eight o'clock, I started at eight thirty. Because I really didn't want to bump into the people in the elevators. So I went in a little bit later, and I left, like four o'clock because my job was to get a job.

I felt like I was in limbo. Like I didn't have an identity. I didn't have an identity. I wasn't. I was Dolores Kosko, but yet, I wasn't Steve's wife, I wasn't Valerie's mother, or Diane's mother, or Julia Bordas' daughter. I felt in limbo, that I had no identity. That's the only way that I can describe it. I was collecting unemployment. Steve was working. And I had severance pay till the end of the year. What drove me? I don't know. Joanne would say to me, "You're crazy. Stay home!" But I don't know. I still don't know what it was.

"Should I go to do something different?" And I looked at that, but I'm not good at sales, because I can't sell a product I don't believe in. Because I can't lie to anyone. So I

knew sales weren't for me. The position I really liked the best at Dravo was where I was responsible for office automation and then I was responsible for the voicemail and I did training sessions.

And then, I realized then, that I missed my calling. I should have gone to school to be a teacher. That's my one regret. That I didn't go to college. But, at the time, I don't think I was mature enough, or I didn't know what I wanted to do. My parents wanted to send me to college, but I felt that I didn't want to burden my parents because my parents really couldn't afford it. So I just went to Robert Morris for a six-month course, but after my lay-off, that's when I realized that I missed my calling. But I didn't know that when I was 18.

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Dolores and Joanne have been best friends since the late 1940s when the Fabianos and the Bordas moved into the same row of houses in the 900 block of Island Avenue. Two houses separated them – the Loiaconos and the Schufkos. But that small distance did not prevent Dolores and Joanne from becoming best friends.

I believe I was five whenever my parents bought the house on Island Avenue and we moved there. And then a couple years later, then your mother and father bought the house three doors down. And then that was the beginning of my friendship with your sister. And we went to school together from first grade.

The meaning of Club for Dolores is related to her being an only child. Club has provided the sisters she never had. Club has been a source of guidance on becoming a better parent and a better person. For Dolores, Club represents her deepest, almost spiritual, connections to others.

Well, I'm an only child, so to me Club is my family. And they have been my support group. I would never miss Club. Maybe there are other things, or organizations that you belong to that it's very easy to make an excuse not to go, maybe you're too tired, or for whatever reason. But I speak for myself and probably a couple others in Club that we'll drag ourselves to Club. Even if we're not feeling good, have a headache, or just have had a bad day, we go. Because once we get there, I can say for myself, once I get there, it re-energizes me. It puts me back into perspective a little bit. If there have been problems in my life, I know that I can talk them over with Club. They may not be able to give me a solution to my problem, but I think it's just the release of it, the unburdening of it, that they are sharing my burden. And in most instances, sympathize.

Yeah, and no matter how I changed in my life, once we get together, it's as though the years just erase themselves, all of a sudden. You, you're yourself. Where I work, there is a certain image that I have to portray. I have to portray my business image, but with Club, it's, I'm totally relaxed. I'm me. I'm myself. Many times I'll leave there and come home and I feel more peaceful, I feel a little bit better about it. The problem is still there. The problem hasn't gone away. But just releasing some of that anxiety or the stress that's associated with the problem helps. It is my total support group. It's my group therapy. That's what I always say, "I'm going to group therapy." We've taken this situation for granted. Because we've been together for such a long period of time. But, it's my support group.

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Support is somebody being there when you need them. And giving without question. There is no hesitancy there. It's immediate, it's an immediate response. And even more than that, that more is offered than what you really need. And, it's not as though you have to pay back to them immediately. Like whenever I had my surgery, and I had to go back to the doctor to have my staples taken out. Steve was working, my girls work. I have no other family. Well, there was no question. Joanne and Betty just said, "When you have to go back to the doctor's, you let us know; we're going to take you." And I accepted it because it was just a natural thing to do because that's what I would do for them. And they came, they took me to the doctor's, we went out to lunch, and then we stopped back here. I would have insulted them, if I would've said, "Let me pay you for the gas," or something immediately, because in time, we give back to each other in different ways.

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I think in the beginning it was more of a social outing. Because I was newly married, raising a family, and it was an escape to be able to get out of the house. And then as the years went on, and different things happened in my life, the death of my father, again Club was always there, coming to the funeral, coming to the funeral home, providing baked things for the funeral, and a real support when my mother was so very ill.

There really aren't words that you can describe that kind of support. It's as though somebody just, like the Almighty puts their arms around you and comforts you, and it's. . . it's just that feeling. It's just that feeling all around you that they're there for

you. And it's just very difficult to put into words, but it's a peaceful feeling. The only way I can explain it is as though someone were just putting their arms *all around* me, like *all* of them were putting their arms all around me, and I feel a little bit more secure or a little more stronger when I need the strength . . . at those times when I needed to be able to dig real down deep and to find the strength just to go on and to deal with all of that.

Club supported Dolores in specific ways. She recalled how the Club was a haven and a source of counsel (a) when her husband left for the service, (b) when she was raising her first child alone, prior to his return, (c) when she was trying to figure out the intricacies of raising two daughters, and (d) when she, as an adult daughter, needed to make decisions about her own parents' care.

Again, because I am an only child, and I didn't grow up in a family situation where you have brothers and sisters, I didn't have any experience to pull on. Now I'm raising two daughters and in, in most respects in raising a family you pull on things maybe that you have learned or experienced as you were growing up and how you were treated as a child in dealing with brothers or sisters. But I didn't have any of that. So I really needed somebody to talk things over with in raising my girls.

And I think the hardest thing for me with the two girls was that I felt that I was raising them the same with discipline and love, but what I didn't realize was that they weren't the same. I had two girls, but they weren't the same. They are two very strong different personalities. And finally, I don't know who in Club I was talking with, but it was like a light bulb went off. I realized, "Well, I'm really not doing anything wrong." I've got to look at them, and see them as two separate personalities, and realize that and deal with it. I was always taking the brunt, like, what did *I* do wrong? But in talking with Joanne or Betty, again you realize, I didn't do anything wrong.

I had to rely on Club to talk things through, so, y'know, every part of my life from my early pregnancy, being alone without Steve, and then raising the girls, and then, farther on. And then my going back to work. Just so many things. There was always somebody there.

There was that summer when Joanne was on vacation one week, and Betty was on vacation one week. I have never felt the void in my life as I did that week. It has never affected me as much as it did that year. I went to the telephone, but I said to myself, "They're not there. I can't call them." And I realized that more and more that week, and it never really affected me as much. Maybe that week of my life that I just needed them, I needed to talk to them. It wasn't just a kind of social call. And when they came back, I says, "You can't imagine how I *missed* you."

I think more recently there's a certain bond between some of us because of what we're experiencing with our husbands. With early retirements, some forced retirements, and such. That is a big transition for a woman to go through, that it has brought changes to our lives, that we can *laugh* about it. We can find some humor in it. And some of us have some really classic stories about the different husbands and, when we get together, "We'll say, are there any new husband stories?" And someone will say, "Oh, yeah, I got a new one."

Dolores described one of the most highly valued ways the Club women communicate with each other — a way that feels respectful and caring, not pushy or overbearing. First, you do not confront or overstep the unspoken rules of privacy. You wait until a person is ready to speak. Second, you weigh your individual needs against the group's time together.

I worry a little bit because Patti Borden is a widow. And I often think to myself, "Are we excluding her?" I have my concern for her. I wonder, "What is she feeling? All this conversation going on about our husbands?" She's a very sensitive, caring person, and I wouldn't ever want to do anything to hurt her. When I'm on my way driving home, and I sort of think back to the evening and what we talked about, that's when it sort of clicks in my mind, "Oh maybe we shouldn't have carried on as much as we did."

There's always a sense of trying to become aware of each other's feelings. And our concern for each other, because we are all individuals and we all have differences and I recognize those differences in everyone, and I never would want to overstep my bounds. Everyone has a certain distance around them, that if you get too close to someone they will step back, and I guess I sort of relate to it that way. Sometimes you just can't step over that bound.

Or like with your sister, with her problem sometimes I will say, "Y'know, maybe you don't want to hear this." But I'll say it anyways. And I'll say my piece. And when she first told me that she thought she was going to have to have additional surgery, she says, "I'm not going to do it." And, just the way that she was talking, I knew that it wasn't the right time to proceed with it, and all I said to her, I says, "Well, you'll know when."

I knew that I couldn't talk to her at the time that she told me, because she sort of teared up. It wasn't going to do any good to talk to her because she wasn't going to listen to me. She wasn't going to hear anything that I had to say. And so what is that? That

you know, again, not overstepping your bounds. Respecting and knowing when you can say something.

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There are probably certain things that I discuss more with Joanne and Betty that I may not necessarily have come out in Club. Because whenever we get together I don't necessarily want to burden them. In other words, I don't want to dominate, and no one has ever done this. No one has ever dominated our get-togethers. It's like little bits and pieces. We, as a whole it's, it's a light-hearted evening which a lot of us sometimes need, that light-heartedness. But yet, if any of us ever have a need -- that we need to talk, we can, but we've never ever totally dominated an evening. But when I really and truly need to go into more detail with it, that's where I have Joanne and Betty to rely on. Club is more than that Thursday night meeting.

Whenever I told Joanne and Betty that I had to go through surgery for an ovarian mass, of course I cried. And Joanne said that we were going to Club at Patti's. And she says, "What're you going to tell the girls?" And I says, "I don't know. I'm afraid if I tell them I'm going to cry, and I don't want to do that. I'll have to play it by ear." And so we went that evening, we were just having such a light-hearted time, and it was Anna's birthday and Patti had a birthday cake for her. And we sang Happy Birthday. We were laughing, we were just being so silly that I didn't feel it was appropriate because I wanted to remember that evening as it was. Very light-hearted, happy.

And without their realizing it, they gave me strength for my surgery. And Joanne looked over at me, like, "Are you going to tell them?" And I just, I just shook my head

no. Because it would've put a damper on the evening. And I didn't want to leave there crying. I wanted to leave there happy. And I did. And without their realizing it, they supported me. I know that they would've supported me had I told them. But because the way that evening went, I didn't want to put a damper. We were celebrating Anna's birthday.

Dolores acknowledged that sometimes small conflicts arose in the group. When conflict occurred, her first thought was to reflect on what she valued most, which was the continuity of her friendships. Then she reflected on her behavior and examined her own role in any conflicted feelings.

Whenever I had the class reunion meetings it was very difficult for me because the group tended to turn into Club gatherings, but I had to keep it as a business meeting, and I know that I irritated some of them. I know that. But then I thought about it, and I thought, "Well, somebody has to be in charge of this group." And somebody has to give them direction. And if that's what it takes, then that's what it takes. We had things to accomplish. I like to have a good time, and laugh too. But let's get our business done and then we can have a good time..

And I just got a sense that they resented me a little bit. Then I let it go, because it's over. I try to look at myself and think, "Did I provoke it? Maybe, maybe I just didn't handle it right?" So I always turned it around and looked at myself and said, "Did I do anything to maybe cause that comment or situation?"

I would bite my tongue first, before I would say something. I would never ever want to hurt any of them. Or be judgmental in any way. We're human; we're all individuals, but we have our differences. But we would never hurt one another. That's

the way I look at Club. We are all individuals. And whatever our differences are, doesn't mean that I'm right and she's wrong or vice versa. Beyond that, it's not worth it.

Nothing's worth jeopardizing our friendships.

Dolores stated that the "girls" are the same because they come from similar backgrounds. And she also described each of the women as different because of the different responsibilities and experiences they have had. From her perspective, their differences have never been the source of jealousies.

I think our neighborhoods and upbringing had a lot to do with who we are. I raised my daughters in this neighborhood but it's not like that Island Avenue neighborhood. Now that was a neighborhood! Or, like with Anna, where she lived. Donna and her big family on Creek Road. And Patti, Bell Avenue and her family. And Betty on Alexander Street. And I think it's the generation. The more I think about it, I feel like we're the last of the Mohicans. I think we're the last, like breed, so to speak that have been fortunate enough to have this.

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I see a lot of similarities in each of us, but yet we are individuals and we've grown together but differently. That's about the best way that I can describe it. We've grown together but yet differently, because we are individuals. Because of our responsibilities whether they be marriages, or family or whatever.

It's obviously something that we've all contributed to. I mean it's not just one person keeping it together. Such as me trying to run a meeting. It's not one person. It's just something that we, without realizing, that we've all contributed to in an on-going fashion.

We had never intended or thought when we first got together that first time at Joanne's house, that that's what it was going to develop into. It was only a social kind of thing. Never did we ever intend it, let's say, this is our intention, that we're going to keep on meeting on and on and on. It just evolved. It was an evolution! That's what it was. It was an evolution. Of, of all of us just contributing to it, and it was a right combination, the right *psycho-recipe*.

Okay, think of us as a recipe. That we're all different ingredients. I'm the flour, Betty's the sugar, Joanne's a couple of eggs. Anna's the oil or the water or the vanilla, and so forth. We're a recipe. And we are all different ingredients, but when you put us all together, you've got this fantastic cake. So you can have your cake and eat it too!!

* * * *

One thing is that we definitely are not envious. Whatever each one of us has accomplished is a source of pride . . . like I'm very proud of Betty, of what she's accomplished in her life and how she went out and was able to find a job as a bookkeeper. Somebody would say "Bookkeeper? What's the big deal about a bookkeeper?" But for Betty to have done that! I'm real proud of her. And Donna, what she has accomplished and how hard she has worked for it. Why would I be envious of their hard work and sacrifice? I'm really proud of the things all the girls have accomplished. And I feel comfortable to say these things to them. Our values are part of our trust in each other.

Dolores talked about a typical Club meeting. She admitted that, to an "outsider," it might look like a "bunch of nothing," but that there is an important process going on. Although the Club clings tenaciously to its informality, there is a ritualized process that always occurs at meetings that both comforts and energizes the members.

Whenever we get together with them, it's as though time has passed us by. I think we're just sitting together and it's almost as though we just got out of school and we're just having a good time and just saying anything that comes in our minds, and just laughing.

Whenever I tell anybody about "I'm going to Club," or "I'm having Club," they always say, "Oh, you play cards?" And I say, "We never play cards. We don't have to play cards."

Our mouths never shut. We never shut up. There has never been a lull. The only lull is whenever we're eating and sitting down at the table. And we take our first mouthful and you don't wait for anybody. We have no manners as far as it comes to food. I get my plate, I start. And the whole time, there's still conversation going on.

We don't have just one conversation going on. Like where one person talks and the rest of us listen. We have many conversations going on simultaneously. And then, sometimes, something gets real interesting over there, and you quickly try to finish your conversation over here so that you can say, "Oh, wait a minute. What did you say?"

And it's interesting how we bounce back and forth and no one is offended because I'm interested and you're interested in what the others are talking about. And a lot gets said.

Dolores attributed part of her own personal development to her friendships in Club. She explained that, as an only child, she needed this group to complete her own personal growth and development as a whole human being.

I wouldn't be the person I am without them. There would be such an emptiness. There would be a void in my life. And they fulfill a need that I have, I don't believe anything else would ever have done. Because of my situation, because of being an only child. Really, I only have one first cousin. My mother was from a family of six. But out of that family of six, my mother of course just had me. And then my Aunt Annie never married, my Aunt Mary had two children but they died early in infancy. My Uncle John didn't have any children. My Uncle Andy had two children, but one is deceased and Alice is the first cousin that I have. And Uncle Mike died in the War. So out of that family of six, there weren't many offspring from it, so I don't even have the cousin relationships. So my family is very very small, and so again, for me, Club is family. And, it truly enriched my life. I feel very strongly that I would not be the person that I am today. Had I not had them to help me to grow and just to be there.

I feel that I have received so much, what they have given me, and it's not always an equal balance. In some respects maybe, I've gotten more out of the relationship than what I have given. Probably I needed Club more than anyone else there. And of course for them it was social. In a way it was for me social also, but it was also an opportunity to be able to talk things over with them.

I truly feel that my need for Club has been greater than any of the others. Because of family limitations, I feel I've gotten most, I've got the greatest benefit from Club. And they have just fulfilled a great need for me, and have helped to balance my life. I think they have helped to be able to keep my life in a proper balance and perspective. So, it's sometimes very difficult to put into words. I have that deep feeling, but . . .

I think they, they've helped me to grow, they've helped me to develop into the person that I am. Given me a little bit more confidence in myself. There, there have been times in my life when I maybe doubted myself or maybe didn't have enough of confidence. Just by sometimes talking things through, they've been able to give me that little extra confidence.

Dolores described the bonds she has formed between herself and her best friends in the Club as spiritual. They defy rational explanation. She compared the connections with her life-long friends to the connections she imagines exist between identical twins.

There is some sort of inner sense that we have when there are critical times in our lives that we need each other. I can pretty much say just about anything to Joanne and Betty, because I think each one of us knows that we're saying it because we love one another and we care about one another, and because of that deep concern.

* * * *

And how, for example, can I explain when I was talking to Betty and she says, "Oh, I want to go look for a dress for the class reunion." And I says, "Kaufman's is having a sale." And she says, "Well, I'm going with Jeannie on Monday to look for something." And so Sunday morning, I'm sitting here. I get up Sunday morning, just to read the paper. That's my own private, personal time. And as I opened up the paper, there was Kaufman's and it says, "Last day for the sale!" And there was an additional thirty percent off of the reduced price. They were fantastic buys.

So I looked at it and I kept on looking, and it was maybe about 10 o'clock or 10:30. And I was in the middle of cooking and doing everything else and laundry. And I

called her up and I says, "Betty, this is the last day of the sale." And I said, "What are you doing?" And she says, "We're going to go to see John's mother." And I says, "Well, what time you going?" And she says, "Well, we're going to be there at two o'clock, and then his sister's coming over for dinner so I'm going to put a ham in the oven." And I says, "Well, today's the last day of the sale. Let's go shopping." And she says, "Wuh, well, well, I-I-I'm all dirty, I have to take a shower." I says, "Well, go take your shower, get dressed, I'm going to come and pick you up." So I left my laundry, I turned my oven off, and I says to Steve, "Betty and I are going shopping," because *she* needs a dress, and I know that she has limited funds, and I knew that she wanted something nice. And I says, "I'm taking her shopping." So I jumped into, changed my clothes, I didn't even shower, because I figured, "Well, I'm not trying clothes on, so I don't have to shower." So I jumped into different clothes. I says, "We're going." He murmured or mumbled about something. And I said, "I'll be back."

I went, picked her up, and she got into the car, and she says, "I hate this." And she started to cry. And here I am driving to Kaufman's, and I says, "Not now." I says, "I'm driving." So I says, "Don't do this to me now, I'm driving." So she laughed about it, I says, "You want to have an accident." I says, "Two insane women in this car." I says, "They'll take us to the loony farm." So then she started to laugh.

And we got into Kaufman's. I know Kaufman's like the back of my hand, I says, "Just follow me," I says, and we zipped onto the right floor, and there were just these racks and racks and racks of dresses. And we just started with these racks. There was no one else in that department except the saleslady. And we told her why we were there. I

says, "My friend needs this, we've got to find her a dress for the class reunion." I says, "And it has to be *the right dress*." So we started going through the racks and we started pulling these things off. And I sent her into the dressing room and I says, "Go into the dressing room and here's all these dresses and you try them on." And she's, "Well, I don't like that, I like---" and I says, "Try it on, you'll like it." We had the best time. We laughed and laughed and laughed. And she's talking about her rolls of fat and her big boobs, and I says, "Just never mind, put this dress on, you'll look great." And then I says, "How about this dress?" And it didn't look like anything on the hanger. And she says, "Ohhh." But then she, she sort of like looked at it, and she gasped and says, "It has a slit on the side!" I says, "By golly it does!" I said, "Well, you have to try it on. It just doesn't look like much on the hangar." She tried it on.

It was *the dress*, and that's the dress that she wore to the class reunion. She says, "I love it," and she was just like, like Cinderella. Like prancing around. I says, "You look fantastic." And she says, "I feel fantastic." She wound up buying four things. And she says, "I shouldn't've spent this money." I says, "For four things, you've come up with like 100 dollars, which comes like, to like 20 dollars apiece." The buys were fantastic.

But what was it, Patty? What was it that I called her up? Was it something that made me call Betty? What made me call her? I mean, she needed me. She was having a *really* bad day, and then on our way back, I said, "Okay. Now tell me." And then she proceeded to tell me. And we hugged and everything. But what is there that we sense something? Is, is there something like they say that identical twins could be miles apart but yet one senses the other is in pain or in danger or whatever? Can a bond have formed

so deep? Why? Why did I call her that day? And then it turned out that I was able to provide some support to her and maybe help her get through that day. That's memorable to me. And all we kept saying, "Oh, Joanne should be here with us."

And at the reunion she absolutely glowed. I mean there was that inner glow there and I've never seen Betty so happy. It's been a long time. Never. I've never seen her so happy. Yeah. I mean she just felt like she was the queen that day. And she deserved to feel that way, and people complimented her on it, and I mean you couldn't miss it. And she just said, "I don't want this night to end." She said, "I'm having such a good time."

Dolores reviewed the parts of her life that have brought her the most satisfaction. Club is among her life's treasures.

I feel that I've been fortunate. I've been blessed with a wonderful family, wonderful parents, good upbringing, values instilled in me, the ethnic background. I've maintained the traditions within my family. Marrying Steve. He's a very good man. We've had our rocky moments, the rocky road, but thank God that we've been able to work out our problems. I think we have a very good marriage now. I not only love him but I like him. I think that's very important that he's gone through a transition and he's been able to do that. And I have two wonderful daughters. I still have my aunt. I've really grown along the way. I think that's what has been most important. I've been able to grow as I've gotten older and learned from mistakes and have the hope to continue to learn. And then all through this. I have your sister as my best friend and Betty. And the Club. We've grown up with it. We've actually grown up with it. We've matured with it.

4.3 Anna

“You can’t pull out one thread but it’s attached to something.”

The first time Anna and I got together, we sat across from each other in her big family dining room. Silhouetted behind her on the hutch sat a large framed picture of Anna’s mother. Engraved on a small metal plate under the photo was her mother’s name, Isabelle Dellemonache, and the words, “Forever in our hearts.” Anna’s son Billy, the youngest of her three children, had given her the memorial picture of her mom last Mother’s Day.

In the center of the lace covered dining room table was a large Thanksgiving centerpiece made up of artificial autumn flowers and pilgrim figures. Terri, her middle child, and her husband, George, had given it to Anna for the recent holiday.

Anna and I moved to the kitchen table the second night we met. She pushed toys and children’s books to the side to make room for my tape recorder and the large family photo albums she had gotten out of storage for our interview. She told me how much she enjoyed having bits and pieces of her two granddaughters -- Angela and Gina -- around her. She baby-sat the little girls every day while her oldest daughter, Lisa, and her husband, Jimmy worked.

On both evenings, Anna’s husband, Bill, was home. When he came in from their garden, we chatted a bit about the weather, the tomatoes, and the neighbors. Then he went down to their game room to watch television.

Anna's house was filled with family. During the two evenings of conversation, I learned what "la famiglia" meant to Anna, a woman who still lived only a few doors down from the house where, Rosalia Derasio, the neighborhood midwife, delivered her in 1937.

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Anna's parents — Isabelle La Guardia and Paulo Dellemonache — emigrated to the United States at different times, and they met in McKees Rocks. The La Guardia family illustrated a typical immigration pattern for the times. Isabelle's father was a "bird of passage,"⁶ that is, he traveled back and forth between the United States and Italy several times before bringing his family to settle in McKees Rocks.

My great uncle, Uncle Angelo, was here already. He had come like, I think, about 1913. And he brought my grandfather over. And my grandfather went back and forth seven times. And every time he'd go back, my grandmother would get pregnant and have another child. We were laughing about that. You could tell by their ages.

But he worked here. He worked here at Pressed Steel, and he sent money back, and they lived very well because of that. After my grandmother had passed away, my mother and my uncle went to Italy, and they had to sell off the property because they had acres and acres of almond trees and olive trees and cherry trees and wine vineyards.

So my grandfather then came and stayed, and then he sent for my mother and her sister, Teresa, and my uncle Joe, and my grandmother. The oldest daughter Mary was married. She wasn't interested in coming, and there was a sister Lucy, and she was married, and she was going to come, but when they got to Naples, she changed her mind and she decided she didn't want to come. And my grandmother got scared and she didn't want to come. So they had a guardian for my mother and her sister and my uncle Joe.

We even have the piece of paper with their names on it, and everything. And then about two years later, my grandmother did come over by herself.

My grandmother was just afraid of the trip, period. And her oldest daughter, Mary, didn't want to come because she had had a child already and she and her husband didn't want to come. And then my aunt Lucy wasn't well, and she did end up passing away, but my uncle Joe came over and he was the baby. He was the only boy, and he used to wear the short pants.

My great Uncle Angelo went to New York and met them, and brought them back here. He took them around a little bit. My mother said they saw the Statue of Liberty. They didn't have to go through Ellis Island, because my grandfather was a citizen. So his children were automatically citizens.

So my uncle met them and then he brought them back here. And my uncle lived up on Mount Washington above the incline for years. And my grandfather lived down off of Island Avenue because he worked at Pressed Steel. So that's where they settled. They lived down on Island Avenue. They lived down behind Mancini's.

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Now my dad's parents died in Italy. My dad was one of eight boys and four girls. Four of his brothers were killed in the first World War. He was from Pescara in Italy and my mother was from Bari.

My dad boarded at Zapparelli's on O'Donovan Street. He must have seen my mother, so he asked if he could keep company with her. My mother said they never went anywhere alone, my grandmother and grandfather went with them everywhere.

They went to the show, my mother went in first, then my grandmother, then my grandfather and then my dad sat on the end.

And I think they only kept company about six months and then they got married. My mother and dad were 16 years apart age-wise. My mother was 20 and my dad was 36 when they got married.

My brother Dom was born in '31, Lou was born in '32, Amy was born in '33. They moved here in '33. And then I was born in '37. Paul was born in '45. My dad didn't call Amy, Amy. He called her Amelia. That's really her name and that was his mother's name. He followed that tradition where his first son was his dad's name. Dominic was his father's name. The second son was my mother's father's name. The first daughter was his mother's name, and so forth.

After the birth of his first three children, Paul Dellemonache looked for a bigger house for his family. The house that he found became a significant part of Anna's story, almost like another member of the family. It was the repository of family memories throughout her childhood. It is where she and her husband lived after they married. Today, the house is a source of pain and disappointment for Anna. After her mother died, her brothers and sister sold it.

Dom was born 10 months after they were married, and then Lou was born 13 months later. They were still living down on Island Avenue. And then my dad looked into buying this home and he bought it on a sheriff's sale. And they moved up here and they moved in.

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It was nothing on a Sunday for there to be 18 to 20 people there for dinner. When I worked, I would go to work and my boss would say, "Well, how many were at the

Dellemonache restaurant yesterday?” He and his wife had one son and they hardly ever saw him, and they never had any company. When I would say, “Oh, boy, am I tired! I washed dishes galore yesterday.” “Well, what was going on?” “Oh, nothing, we had about 18 people for dinner.” I mean, it was every Sunday and my mother cooked and I mean everything was homemade.

My uncle came from Ohio, my mother’s brother and his wife and the children came. He was like a magnet, and then everybody else just came who were family and lived around here. Like my godparents, they lived on Adrian Street, when they were first married. They were here all the time.

And there were also cousins. There was always people down there at the house. My mother would start with -- she’d make the wedding soup, homemade raviolis, and a roast or something, and this meal would go on the table by four o’clock.

I always make two entrees on a holiday, because I’m just used to that. My kids want red sauce and then I make ham or turkey or something. But I make the sauce the day before. My mother would do that all the same day, and in between all that, all these people would be coming and going. My dad had gotten her a big board to roll out the pasta, and he would roll that for her. I have it downstairs, it’s about this big.

She would roll that first and then he would roll that nice and smooth, and then she’d make the ravioli. She would cut them with a glass. She didn’t like the cutter, she would use a glass. And then I would go round and seal them with my finger.

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In the living room, my Uncle Dan, my dad's brother, made a sandstone mantle down there. It's gorgeous. White sandstone. He was a stone cutter and he chiseled the names in tombstones by hand. The only way you can clean it is if you sand it with a fine sandpaper. That was another heartache. To leave that in that house.

And then my father was a bricklayer. He made that oven in the basement. We baked the bread and pizza in there. There were just so many things down there.

Bill and I, after we were married, we lived upstairs. We had the second floor. There were four rooms and a bath up there.

Anna's father was a larger-than-life figure to her. He was a family-centered, hard-working man who showed his family how he felt by his actions, not by his words. Up until his death, Anna saw her father as a kind of mythic character who even defied death.

My dad worked at Carnegie Steel, Wheel and Axle Division in the Bottoms. He was a strong person. He worked too hard all of his life and he got pretty worn out. He worked down the mill and we didn't have a car when we were kids. My dad didn't drive.

He walked from here to the Bottoms every day and home after working eight hours. Until my brothers got old enough to get a license, and then he bought them a car, and then they had to go pick him up every day. But he was the only one that worked. We didn't take seashore vacations and things like that, but we had nice clothing, we had anything we wanted to eat, and like I said, they entertained. You've got people for dinner, that costs money. We did this all on this one man working.

He was a bricklayer down there. He would go into the ovens and re-line the ovens with the fire brick. He had to kneel and he ruined his knees. When he was older, his knees were so full of arthritis.

When he retired, he had like 37 years. He worked there all his life. They often tell me the story during the Depression when people weren't working and things were so bad. My mother's youngest sister, Teresa, had married this older gentleman from out in Imperial, Paul Bruno. He had a farm. My dad would go out there and help him work the farm and he would give my dad eggs and things so that we always had food. And then my dad painted that smokestack above Carnegie Steel for like three dollars a day. But that was big money then. I don't know if it's still there.

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He worked and worked in the garden when he came home. He was a no-nonsense type of a father. You obeyed the rules. He was a disciplinarian. But he wasn't mean or cruel. You just knew that he made the rules and you followed them. And by the time I came along, I knew. My brothers got a lot of what would have been child abuse today. They got a lot of lickings, but they were bad. They really did some naughty things. Of course, what one didn't think of, the other one did cause they were 13 months apart. But I just fell into line, because you know what's expected of you, and you just did it.

But he wasn't the affectionate type, and he didn't like my brothers playing football, he never saw them play. He wasn't the type that was always hugging you or anything. But I don't know, for some reason, you just knew that you meant a lot to him.

When I was 13 years old and I come down with pneumonia for the fourth time. I had it when I was four months old; I had it when I was 18 months old; and I had it when I was 13 years old. When I was four months old, my father had to go all the way to Imperial to my uncle's farm and get me goat's milk, and that's what saved my life. Dr. Goodrich said, "You better try some goat's milk." My dad would do anything for his children. But when I had pneumonia, he would come up to the hospital and he'd sit beside me in the bed on his days off. You just knew that you were important to him.

But when we got married, every one of us girls he walked down the aisle and he cried. We got pictures of him crying from the minute we started down the aisle till he kissed us. He cried for his sons too. Cried like a baby.

He didn't show a lot of emotion, we just knew that we meant everything to him. But he expected you to live and do things right. He didn't like any shenanigans, he didn't put up with them. There was a right and the wrong. He always told us, "I don't ever want a policeman coming to this door telling me my kids did this or my kids did that."

But yet my brothers will always tell the story of when they were going down the end of the street to play, and there were some older boys who were roughing my brothers up. A neighbor came running home, and said, "Mr. Dellemonache, Mr. Dellemonache! They're beating up Dom and Lou!" And oh, he went down there and he read them the riot act. The kids scattered, clear scattered. He was there for you if you needed him. But he wasn't the type that was always doting over you. But he never drank, never come home drunk. He walked through West Park every day, never stopped in a beer garden

after work. He lived for his family. Whatever made us happy was fine with him. He wasn't demanding of us. He wanted us around all the time.

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And then my dad took seriously ill. He had a real bad stroke and congestive heart failure, and Dr. Oshika says, "Take him home and keep him comfortable." He kept yelling at us, "What do you want from this guy? He's old, he's tired," that's how Oshika was.

We brought him home in an ambulance and do you know in about three months, he was out digging his garden. He made a liar out of Oshika about four times. Oshika would say, "I can't understand it," he says, "It must be the wine. It must be the dago red." He said, "He keeps acting like he's had it, and then he comes back to life."

Then his blood pressure went so high it ruined his kidneys. But he was still strong. We took care of him down at the house. They released him like on Halloween and they said, "Put him in a nursing home," and we said, "No way!" So we took care of him down the house. My sister and my mother and I, and we had a practical nurse come in. He lived two months. He died on December 22, 1974. He was laid out over Christmas, they did that then. But he had made a garden in that spring before he died.

If the father is the head of an Italian household, then the mother is the heart. So goes an old Italian saying. Isabelle, like Paul, lived for her family. Anna related a poignant tale of her mother's embarrassment at becoming pregnant at 36, an age that she considered outside of "normal" childbearing years. Throughout her life, Isabelle seemed to find joy when all was well with "la famiglia."

I can remember my mother, it's funny how you never forget. I didn't know what she was talking about, but she kept saying, "Oh! I'm so ashamed. I'm 36 years old and

I'm going to be having a baby." It was the end of the world in those days. It's not that they were ashamed, they weren't. But they didn't flaunt their pregnancies. They just went about their business, working in the house. I remember how she scrubbed all the floors and everything the day before she left for the hospital. She was in labor I guess. And we're waiting, my grandparents were there, and we're waiting and waiting, and then they called and it was a boy. Amy and I were so mad, because there was two girls and two boys. The tie breaker. The only one born in the hospital. The elite!

But he was like a joy for my mother later in life. He was the apple of her eye. And he was my dad's puppy too. Honest. I really spent a lot of time with him, he followed me everywhere. Yeah, he followed me. It was me, him, and the dog. Everywhere we went. Because my mother was 37, not that 37 was old, but she had raised her family. And it was easy to just give in to him, but he wasn't a bad child. I had a lot of patience with him, he was always with me. That's why we were always close, Paul and I.

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Her life revolved all around her family, her children. But she would maybe go to a PTA, or she might walk down to visit the neighbor or do stuff like that, but no outside activities. She did more after my dad was gone, and she really didn't even know how to have a social life, it's amazing. She just lived for her children, too. My mother-in-law said to her, "Oh, Mrs. Dellemonache, I go down to the Vet's, and I play pokeno⁷ with the senior citizens. Why don't you come?" And she started doing that, and she just looked forward to that every Monday. And then she started going down the FOR⁸ with my

mother-in-law, and they'd play pokeno. And once in a while she joined the Ladies' Auxiliary from the Vets, and she'd go to those meeting. But there again, it was always family-oriented. She didn't drive.

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My mom was just so happy with Terri's wedding because she had someone from every family in the wedding party. She had a daughter from my brother Dom; she had the granddaughter from my brother Lou, and then from Amy she had Larry, and then from Paul, she had Laura, and then from Bill's sister, she had Chrissy, and then George had his cousin. And then Terri had her best friend, Sandy Super.

Mom just thought that was the greatest because to her, family should be there in the bridal party. These days everybody has all these friends, but she thought it was great that Terri had family. It made her real happy that day.

Anna's family, like other traditional working-class Italian families, did not think education beyond high school was necessary. A girl did not need an education because she got married and became a mother and a housewife. Like other Rox girls in the 1950s, Anna graduated, got a job, and then got married. Anna talked about how she, like other girls from her ethnic background, learned very little about her body or sexuality, except the prohibitions.

My dad made a big deal out of signing those report cards. We'd bring them home, and they'd look them all over, and of course, I'm not bragging, but mine was always good, so of course there wasn't a problem.

My brothers both graduated and somebody was encouraging my brother Dom to go to college, and my dad said, "Well, it's up to you, you do what you want." But Dom and Lou both had jobs up at Bayer's Dairy. They had worked there for two summers

before. They worked every summer before school, so they knew they had jobs up there. Neither one of them wanted to go to college. My father didn't encourage them because it was a real minority that did go to college at that point. And Patti and I laugh about when my brother Paul went. Paul had that football scholarship to West Virginia. So after he was ready to graduate from college, we were laughing because the very first job offer that Paul got, my dad thought he had to take it. Just wanted him to get a job, make good money. That's what an education was for in his mind.

Yeah, by the time Paul came along, it was a different world. My brothers were drumming into him as he was growing up, "go to college, go to college." Because they hadn't gone, they had stayed, and as long as the milk industry was good business, they were doing very well. But then the milk industry started going down the tubes, and my brother Dom ended up down at the cement plant. And my brother Lou had a multitude of different jobs.

Amy wasn't interested in going to school either. And she started working right out of school for a car dealership, and then she went down to Pittsburgh Coke and Chemical. She got engaged for graduation. That was an ordeal too, because when she started dating her husband, my father was livid.

She had to sneak out. She wasn't allowed. He didn't want her out with anybody. He was strict, he really was. He wanted her to be older, and she was young. She was only 17 when she started dating him. And then she got engaged for graduation, and it was like a shocker. But then he went away to the service for two years, so they had a chance

to get used to it. But she was married by 20. Now, see I was 24, going on 25, when I got married, so it was okay.

The recruiters came to the school from Pitt, and I told Dr. Ritenour, I said, "Don't even waste their time having them interview me. I'm not interested in going to college." And I don't know why. I just wasn't. I thought about nursing, and it's funny that my daughter became a nurse. I think I would have been a good nurse, but I'm a little bit too emotional. You can't be real emotional. My daughter can handle anything without getting ruffled, but I get too emotionally involved, and I think that would be my downfall.

At that time anyway, no one was going to college. You could count them on one hand, who was going to college. There wasn't any encouragement. No one said, "Well, I think it'd be a good idea if you'd go to college." No, it just didn't happen. And I didn't go to work right away either. We graduated in June, I never went to work until September. I took it easy that whole summer.

Pat and I worked together at Westinghouse downtown. At the Union Bank Building, Fourth and Wood. We worked at Westinghouse for two years. And then she left there, and I left shortly after her. Then I started working for Taylor Wilson right on Thompson Avenue. I used to walk to work. Graduated in '55 and I started there in '57. I worked there until three months before Lisa was born. So I worked until '62. And then, I never went back to work after that.

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When I was younger like in my early teens, I can remember when I first started my period. My mom was sitting on the porch and she was patching. They patched

clothes all the time. I can remember we were sitting on the other side of the porch because the sun was on this side and I can still see her as plain as day. And she says to me, "Well, now you know you have to really be careful," she says, "because you can have a child now. Don't let anybody touch you." But that's all she said.

Anna had seen her future husband at one of the ethnic clubs in the Bottoms where she and her friends went for recreation after they graduated from high school. Bill and Anna dated, married, and moved in to the top floor of her parents' home. They lived there for five years, and when the time came to move, Anna clearly knew she wanted to stay in the neighborhood where she had been born.

Bill's brother worked at Taylor Wilson where I worked. And we used to have company baseball outings. And I knew him already from when we would go down the Ukrainian Club on Saturday nights. Patti, Angie and I were friends in high school. We were like Dolores, Betty, and Joanne would have been. So we would go right after we graduated and go out together on weekends and we'd go to all the weddings together and vacation together. We went to Wildwood a couple of times and we had a lot of good times. Lots of laughs.

There's nothing like being single. Marriage is wonderful and everything, but they're way too in a hurry to get married and they don't realize that that's a whole different lifestyle and so much responsibility. When you have children, you're responsible for them and the influence you have on them.

So anyway, we had gone to several baseball outings, and then I had seen him down at the Ukrainian club. And then his sister-in-law called me. Because her husband worked with me down at the plant and I had met her at picnics. She just called and asked what I was doing for Christmas Eve and Christmas Day and I just told her this and that, y'know,

general conversation. And she says, "Oh, I think my brother-in-law would like to ask you out," and I said, "Well, that sounds okay." So then he did call, and then that's what we did, we went out for Christmas the first time.

We went to see "The Alamo." I'll never forget that, downtown. Probably the Warner or one of those movie houses. And I'll tell you the strangest thing, he came to the door, and I knew him to see. So we're riding down West Carson Street, and I look over, and he has glasses on, and he never had them on before, I had never seen him in glasses. And I says, "Since when do you wear glasses?" And he says, "Oh, when I drive." That's funny, that stayed with me. And then, I kept telling him, the whole time we're going together, I says, "Don't be wearing those glasses all the time, because I read somewhere that if you need glasses for certain things, and you start wearing them all the time, then your eyes get relying on them, and you *do* need them all the time." And he thought I was goofy. But I still believe that. And that's true, that's what happened, he got to the point where he always needed them. He wore them constantly. But now he has bifocals, so he really needs them now.

We went out for Christmas, and then we got engaged for Easter, and then we were going to get married in October. I wanted a fall wedding, and his mother's niece and nephew were coming from Canada in August, and she says, "Oh, they're here in August, they can't come back in October," she said. "Maybe you could move the wedding up." Back 35 years ago, it isn't like today, where you've got to make plans a year in advance, two years in advance. We checked up at Mother of Sorrows, and that was fine, that was

open. We had the reception down the Holy Ghost, down the Bottoms, and that was open, and we had dinner at the Tap Club. So it all fell into place.

My mother's only brother; he's a priest, Father Ralph Coletta. He was ordained, 35 years ago. The first wedding he officiated at was Bill and mine. Nine o'clock morning mass. Twelve o'clock dinner at the Tap Club. And then reception at the Holy Ghost at night. Yeah, and then we lived upstairs of my Mom and Dad for five years. We were married a year in August of '61. And Lisa was born in November of '62.

It was fine. He had a steady job and we didn't have a lot of money, but we lived okay for one salary. After Terri was born, we had two children, and they were both in the same bedroom, and we had our own bedroom. And then we had a living room and a kitchen. Bill just said, "I think we better start looking for a house." Well, any time we'd get out past the hospital, I'd say, "It's too far." So when this house came along, it was perfect. I knew the neighborhood, and I loved everybody around here. I had known them since I was a little girl.

And you could always count on the neighbors for things. And yet they were not the type that plunked in your house and landed, never interrupted your life. No, if you needed them, they were there. And basically it's still that same way. It's a nice neighborhood, very nice neighborhood.

Like all the other women in the Club, Anna went through premarital classes required by the Catholic Diocese, yet still emerged with only a rudimentary notion of sexuality and reproduction. It was her mother who offered her practical information, dispelling one of the common myths of the era — that you can not get pregnant soon after the birth of a baby.

We had to take those classes up at the Point. We had to go to the Diocese for marriage classes, Bill and I both. They were like six or eight weeks. One week it was just the girls and then one week it was just the men. They talked about the rhythm method, not really birth control. They didn't discuss birth control. No, they were staunchly opposed. If you'd go to some priests and tell them you were practicing birth control, they would not give you absolution. That's how staunch they were at that time.

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My mother was a nursing woman; she nursed her children. And I was nursing my Lisa and you didn't talk that much about that kind of stuff with your mom. But she said to me, "Anne, don't be a fool like I was." She said, "Somebody told me as long as you're nursing, you don't get a period; you can't get pregnant. It's true you don't get a period, but you can get pregnant." So she warned me. So I knew that much. Because that's why my brothers were 13 months apart. And my sister was 18 months later.

Anna's husband Bill worked at Dravo Corporation for 32 years. In 1987, the industrial economic base in Pittsburgh collapsed. Bill Tapler, like other factory long-timers and union members, was not able to find other work that was as economically stable as the mills had been. Then he had a heart attack. Anna reflected on the economy in Pittsburgh and presented her views on why industry left the area.

Bill was down at Dravo and things were real good until '87. And then the bottom fell out of that.

Bill worked at Dravo when I met him. He graduated from St. Mary's and he was working in the gas station and his dad worked at Dravo. He's another one that should have gone to college. Really, he has a great math mind and that's like a mind gone to

waste. And now especially that he isn't working; it's really a waste. Terrible. But he had no encouragement and no funds and in those days, there wasn't the aid that there is today. But when he came home from the service, he should have went. He did go to drafting school, but then he never pursued it. He could have made more money at Dravo, but now drafting is a thing of the past anyhow.

So he worked in light metals. His dad was down at the structural shop. His dad and your dad were good buddies at work. Your dad always asked about him. His dad got him a job down there. He graduated in '53 and then he started at Dravo in '55. He worked there, went to the service, went to drafting school, but he went back to work down there. He was making more money than he could finding a job drafting. So he just let that go by the wayside. He was only laid off once for about three weeks, and then he worked there all those years. From '55 to '87.

Thirty-two years. And then in '87 the guys wouldn't sign a contract. What happened was that Dravo had sold that division so it was under new ownership. And they were threatening to move because most of the men were all getting up into the senior citizen category. They firmly believe that's what they did. They dumped them all because of their age. Because they moved that division up to Hagerstown, near Meadville. They're operating up there.

Bill became very active in the union. Local 61. I asked him not to but he had done it anyhow because I knew anything that Bill gets involved in, he does 110 per cent. He goes overboard all the time. He had gotten involved as the treasurer of the union, but by then they were already having trouble. They had a president of the union that the

company hated with a passion. He did them more harm than good because the company wasn't going to bend an inch for him. It really cost these guys their jobs. But at the time, nobody sees when it's happening. I said, "Bill, you aren't going to get anywhere with him." I said, "Please, just take your pension and get the hell out of that place because they're going to close it down and you guys aren't going to stop them." And that's exactly what happened.

The last eight or nine years that they were working, the company kept crying the blues that they weren't making any money, so the guys were never getting any raises or anything. They weren't increasing their pension. The company wasn't increasing.

And when they closed, the company lawyer told their union representative, "You made a big mistake. You never negotiated a pension, and you should have been negotiating it all along, whether you got a raise or not. Because that's your future." But anyhow, they took it before the Labor Relations Board, and they had a federal hearing, and the federal judge said, "I want this all settled today." So he insisted that the company give them their pension, and their hospitalization and severance pay. And they had an age discrimination suit against Dravo, but the judge made them throw it out. And that was the only ace in the hole they had, but that was the only way that judge would settle that day. So Bill came out of 32 years of Dravo with severance pay, that we had already spent, because when they went out on strike, they were out for a whole year and we were paying our own medical benefits. It was \$318 a month. So we already had \$3600 paid out. He got \$4,000 in severance pay. That was a joke. That was a disaster, that really was. He was 52. And he could not get a job that wasn't like minimum wage.

It's sad in this country, if you're over 50 and you're white, you can't get a decent job. But he finally landed one over at the hospital, where Lisa was working. And he started working night turn, and he was there, it would have been two years, when he suffered that real bad heart attack. And then the doctor told him, "You're going to have to get a pencil-pushing job." And he said, "Well, how about disability?" And he says, "You could qualify for that too." But, now with hindsight, he realizes now that that was a mistake, he should have made the hospital give him light duty or something.

He would at least still be working. Disability is just not good for them to stay home if they don't have real good pastimes. I think it bogs them down. If you don't use it, you lose it. Mentally he could have learned to do the computer, he could have learned a lot of things over at the hospital. And that's really what he should have been doing. But that's all hindsight.

My mother used to say, when men go on pension they get like old maids. And that comes to me constantly, because the least menial thing, he makes a big thing out of it. Now he's starting this thing, "Well, today's Thursday, I cut the grass on Thursday. Friday we shop." He's starting this regimen. Because he's a Type A personality.

There's a lot of maneuvering that goes on that just keeps things status quo so no one goes off the deep end. But, your patience runs short sometimes.

In addition to the financial problems Anna and Bill faced, another family crisis loomed large in their lives. Their eldest daughter Lisa made decisions about her future that Bill and Anna did not approve of. Anna's large extended family entered the picture and played a significant role in helping to resolve the crisis, reminding Anna of what was important in life and how to find meaning in the events that were occurring.

What happened to me six years ago was this: From the time we started making the wedding plans until the time of Terri's wedding this was going on. Lisa had been friends with a girl all of her life from St. Malachy's, to Sacred Heart, to Carlow College, and she always spent time with her. Lisa got involved with this girl's uncle, who is nine years older than Lisa. To make a long story short. I was very very upset because Lisa got pregnant. And she was 27 years old and she was a nurse. I said, "Lisa, you're too smart to get pregnant." Who would know more about the human body than her? She knew what she was doing because probably she would've gotten a real battle from me and her father because we had heard things about him; his family had a reputation. And none of it could have been true because he has turned out to be a wonderful husband and a fantastic father. He is so respectful of Bill and me. He loved my mother. He was good to her. But we were going on hearsay and we didn't want her seeing him. So I guess she figured, "Well, if I'm pregnant, they're going to go along with it." Now, I can't swear to that but I'm thinking that because that's exactly what happened.

They got married by Father Nick, but we didn't have anything because she was big already. It's not that I was ashamed. I was really really upset and I was really giving her a hard time. Because my brothers and my sister were giving me a hard time. And I didn't know what to do.

And then my Aunt Rose from Ohio called me one night, and she said, "Anne, hey, what are you doing?" They like scolded me. They said, "Hey, she didn't kill no one. She's not having an abortion, she's going to bring a life into this world. What do you want to do? You want to lose your daughter? Who do you have to answer to? You

don't have to answer to anybody." My aunt said, "That's been going on since the world started, Anne. And there's millions of couples live together and then they decide they're going to get married, and they have big weddings and everything. What are you doing?" Well, they brought me to my senses. From that day on, I stood firm with my family, I said, "Hey, this is it, she's pregnant, she's going to have the baby. This is what she wants, evidently, she's no dummy. She's 27 years old, she's my daughter, and I'm not going to lose her because I want to pacify the rest of you." And that was the end of it. It was over. Lisa did have the baby June 27th, and Terri's wedding was July 22. So it was a real wild time for me, it really was. But thank God it all worked out well.

My aunt just said, she says, "Anne Marie," she says, "Why are you making such an issue out of this? It's been happening since the beginning of time. A lot of people hide it." And she said, "You don't want to boast about it, but don't alienate your daughter to make other people happy. Even if they're your brothers and sisters. There's no one like your own children."

Oh, she is a gem, she's like my mom now. We talk all the time. She helped me through all that. And then I said to my mom, "Hey Mum, Aunt Rose called me and she just laid it on the line. There isn't anything anybody can say to me now to make me think that this isn't a good thing. It's not as horrible as we've been making it. She could have had an abortion."

Once I put it to my mother like that, it was a-okay with her, she was fine with it. She was always real real proud of Lisa. She always thought the world of Lisa, because we were real close. We lived upstairs for five years after we were married, so when she was

born, they were like her second parents. Then when she graduated from nursing that was like the cream to the coffee for my mother. She just thought that was the greatest. She was so proud that Lisa was a nurse. She was really really proud of her. She was like a little disappointed that that had happened. But then when I said to her, "Mum, this is what she wants because she knows more than anybody else how not to have a child." She knew that it would bring the maternal instinct out in me. And, it worked.

Now I always will say to her though, "Lisa, you made a really good decision here." I tell her a lot of times that he's a really excellent father. And, he throws clothes in the washer, he starts supper, I mean, he really pitches in, he bathes the kids, and he's very very family oriented, and he showed my mother so much respect. My mother loved him. She just loved him. Once she got to know him, she loved him. He's the old fashioned Italian. Family comes first.

With her husband's job gone, Anna found herself at mid-life facing an uncertain financial future. Rather than returning to work, Anna walked a tightrope between two generations of family commitments. She was committed to giving her ailing mother home care and she was committed to providing child care for her precious new granddaughter. The intergenerational pull reached a peak in 1994 when, within a few days, Anna's husband Bill suffered a serious heart attack and her mother went into congestive heart failure. Her two loved ones were hospitalized in different Pittsburgh hospitals at the same time.

When Bill lost his job in '87, that's when I could have went back to work. My children were all raised, but my mother had a mastectomy and she was in very bad shape mentally. She really didn't care about herself. I firmly believe that if I hadn't taken the kid glove care of her that I did, we would not have had her for another seven years like we did. She came home from the hospital and she stayed with us here for a month. Lisa

dressed her wound every day. And then when she went home, it was up and down checking on her and making her egg-nogs, strengthening her up, getting her going. She was so despondent. I would go down every night at 11 o'clock and get her ready for bed, put her in her jams and sit with her and relax her a little bit.

She said, "I never thought I'd have cancer." I said, "Mom, it's gone, they took it all off." She was scared. I went for a whole year, I went down every day, every night, went down two, three times a day, took her meals and bathed her, and whatever had to be done. There were nights it was below zero and I'd walk down there, and then I'd walk back up, an hour later, but no one else knew that. I really do think that's why I didn't go to work. So that took me through '87 and '88, and then here comes '89, and here comes all that hassle with Lisa.

Then for Terri's wedding my mother had bounced back. I got her a prosthesis, and she wore it for the wedding. Then the baby came and then I thought, "Well, I'm not working." There was no way that a stranger was going to watch those children if I'm not working. It's just not the same. I don't care if it's the best of daycare. It isn't the same.

He had gotten a job at the hospital. I would go up and get the baby every morning, bring her down here, so that I was here if my mother needed me because I knew she needed that security, knowing that I was here if she needed me. And then the baby and I would go down and visit her. In fact, my mum was in the hospital every other year after that for congestive heart.

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Bill went to the hospital first, he went to the hospital to have his open-heart surgery, cause he had a heart attack. He had his third heart attack, and they decided they had to do surgery.

Two days after he had his surgery, before I went to the hospital to see Bill, I went down to see my mother and I just looked at her and I knew she had to go to the hospital. She was having trouble breathing. She says, “Anne, I even hate to tell you that I don’t feel good.” I knew it was congestive heart failure back again. So I took her over to Ohio Valley and spent I don’t know how many hours there. Left there, went back to Mercy.

So the whole time that my mom was in, which was 10 weeks, Bill was laid up. I brought him home, and I would help him shower and get dressed and everything and then I would leave a neighbor with him and I would go over to visit my mother. And like I told him one day, “I took two people that I love to the hospital, and I only brought one home.” I mean you *know* they can’t live forever. But it just all caught up to me. And I had a real bad year. I’m very well-adjusted, but it takes something out of you, it does.

After her mother's death, Anna tried to make sense out of the single most troubling event in her life – her brothers' and sister's decision to sell the Dellemonache family house. She was inconsolable over her loss and angry that she did not have the resources to buy the house. Anna felt that her siblings misunderstood her desire to keep the family house in the family; she wanted to preserve the Dellemonache family history. She believed that her siblings were judging her as emotionally overdependent on her mother's memory, that is, completely missing the point about the house as a symbol of family's history.

They should have understood it from the beginning. I should not have even had to explain how I felt about it. All I had to say was “I really want the house.” I think that more than anything.

When I look down there, it telegraphs in my brain ever time that they would rather see strangers there than have me have the house. Now what sense does that make? I know they're going to regret it.

They say, "Hey, life goes on." But they're not here every day. And they don't understand. They say to me, "Anne you just have to get used to it." I know that. I have to get used to it, but it's easier said than done.

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I think they felt that I was holding on to that house, trying to like hold on to my mother's memory. And really it wasn't that. I knew how ill my mother was. I knew that her lungs were gone. I mean, she was too old for a transplant and what are you going to do? You know they're going to pass away. I'm not saying that I accepted it easily. No, I didn't. But that isn't why I wanted to keep the house. I wanted it to keep that for all of us.

I read in the papers about these people that go back to their family homes and buy them and restore them. And that's my only salvation. I think if we're ever lucky enough to hit the lottery, I'll pay whatever it takes for me to get that place back.

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The biggest disappointment is not only do I look at that house and think of all the memories, but also I see every day that they would rather see strangers there than me to have it, me who really wanted.

That's what I can't understand, that's really what bugs me. How can you be so misunderstood? It would've stayed in the family. It wouldn't have gone outside the

family. Not as long as I was living. It wouldn't have gone anywhere. So that's the heartache there. They have no idea of what they've done to me. In their own minds, they probably think they're right because I have never brought it up to any of them, anymore. I don't want to start because I'm afraid if I start, I'll sever the ties and I know that would never have made my mother happy.

I know I'm miserable and I'm not normally that way, but something's bothering me and I'm having a hard time handling it. It may come to where I have to let them know.

I haven't felt like I want to yet. There's still that little part of me that keeps thinking, "Well, this is my family. Maybe there is a reason for all this that I don't know what it is. Whatever it is, I don't know. Time will tell."

Anna and her daughter, Lisa, represent two generations of Italian women. Anna recognized that her daughter had the choice to care deeply about her children and home life, and at the same time, to care deeply about her profession as a nurse. She spoke about how women's choices have changed between her generation and her daughter's.

Lisa loves nursing and I know she'll never give it up. I know she'll never give it up. Her father always says, "Oh, maybe if she didn't have to work." I said, "Bill, I don't care if she was married to a millionaire. She would not give it up. She loves it." She was assistant head nurse. That got too routine for her, then she went to the ICU unit. And that got too emotional for her. So then she left that and went to the operating room. She was in there seven years, and then one of the orthopedic surgeons that she worked with all the time asked her to come and be his assistant, so that's what she's doing now. So she works right beside him. If he's doing surgery, she does surgery, if he's at the office, she does office.

I say to her, “Lisa, your priorities aren’t what mine were, but you are of a different generation.” And she says, “That’s right, Mom. You never did work out of the house after we were born. You don’t know that there are certain obligations that come with a job, and it’s not that I’d put my children second, but I do have obligations,” and then she said, “It helps a lot to know that I have you there.”

So I do make it easier for her. But I’m glad to do it, because they’re therapy for me. I don’t know where I would be now without them after the last couple of years. They’ve been good for me. And I enjoy it. It’s tiring, They’re seven and four now, so the hardest work is over.

Our roles are different. At my daughter’s age now, Lisa was born in ‘63, she’ll be 34 in November. I was already doing for my mom. My mom didn’t drive and it was a whole different generation gap, but I was doing for her. I was doing her cleaning, and I would take her to doctor’s appointments, and running for her, and doing, and yet here I am, I’ll be 59, I’m doing for my daughter. But that’s it, she’s not a home person like I was. And most women aren’t today. The younger girls aren’t.

Anna’s basic philosophical stance in the world is that everyone has happiness and everyone has sorrow; for her, that’s not the point. The point is how you handle what is in front of you. For Anna, the ethics of daily life are based in learning how to figure out if what you do will hurt anyone you love.

I’m proud of my children, our children, our grandchildren and a lot of good friends. I think of Patti immediately, I think of Girls’ Club too. I really didn’t expect much more than this out of life. I’m content with this type of life. I would have liked some things to have been different, for him to have been working. But basically, had those things not

happened, this would have been fine. I don't need expensive vacations and fancy things. That never impressed me. I'm not saying I wouldn't like them. Yeah, everybody likes to do things, but that wasn't a priority for me.

I feel that you have to make the best of the situation. It isn't always what you want, but it's what you get. And that's what you've got to deal with. And nobody ever said life was easy. Or a bed of roses. And everybody gets something. My mama always used to say, "If you take your troubles to market, you'll be glad to bring your own back home. Because somebody else's are always worse than yours." That doesn't make it any easier to handle, but everybody has something.

I think the best thing that you can always remember is how your actions are going to affect the people you love. And go from there. If you're going to do something that's going to really hurt the people you love, it's not right. You better change your direction. And if you think that way, you're not going to step on people. And if you sometimes get taken advantage of because you are like that, it's still better than to just think about only yourself. You can't survive like that. You're going to be alone if you do. Nobody's going to want to be around you. And who wants to live like that?

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Anna was one of the original members that met 40 years ago in the group that would become the Club. She recalled the beginning of the group, how things have changed, and what meaning the group has for her now.

We've called ourselves Girls' Club kind of like a joke, because, after all we're 59 years old, but we still haven't given into women's club. But that's just our way of putting some kind of a jovial spin on it.

We are a gathering of girls who were friends in high school, then just decided that we were going to get together. And through the years, it has become very very important to every one of us. It's a sounding board. And even if we *do* have like little things to say, we try to say it in a funny way, so that it doesn't really take everybody down.

It's just become more and more important as we've gotten older. I really don't think it started out that way. It started out more social. And it has gotten really like a therapy. And we've had our children, and then they all marrying and their children, and now it's a family gathering once a year, which is very important. Then we have our Christmas tradition, we go out to dinner and then we exchange gifts.

At times, it's been suggested that we do more things as a couples' group. That wasn't important to me, because I, *we are the friends*. And it is something that *we* do. Just the girls. I don't know why I feel so strongly about that. It's not that I don't like doing things as couples; that's nice too. But this wasn't meant to be like that, and to me it's important that we just keep that close-knit feeling among the girls. The men have gotten to know each other through us. But none of them were really friends before we started out.

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I think that when you have happy things happen in your life, you want to share it with some people, and when sad things happen you *need* somebody to share it with. If

you can talk about it, it just unburdens it a little bit, somehow it makes it a little easier to handle. And yet when you're really happy about something, you're just so glad to be able to tell somebody. And they share your happiness with you. And if it's sadness, some of them have been through it, and they know what it feels like. Some of them have yet to face it, and you don't envy them having to face it because you know that it isn't easy. But it makes me feel good that they understand. You have your family and you have your husband, you have your children, but even with brothers and sisters, it's different.

Like I can talk with say, like Patti, and I feel so much better after I've talked to her, because her input helps me understand how I'm feeling because sometimes I think, "Am I a downer, or what?" You need to hear another human voice say, "You're not losing it, you're just normal." You need some compassion sometimes and you know that it's there for you with the girls.

Deep down, we're not kidding about this being our therapy. We have a light-heartedness about it, but it's really not. We don't like to see more than a month go by that we haven't gotten together, because we really do need that. We've gotten so that we more or less rely on it. You joke and say, "Oh, we're going out and we're going to eat and we eat and talk and this and that," but it's almost like a crutch.

We need each other and you feel like something's missing if you don't get together. And you feel, when they have things that they're happy about, you're happy for them, and yet if they have a problem, then you feel bad for them, because you know what happened. It's like "all for one and one for all," y'know?

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We kind of grew up together. Really. And matured. It started very innocently, more or less for companionship. It really developed into much much more than we ever knew. Way back then, we never thought we'd still be together. When we graduated, I knew I was going to keep in touch with Patti, but look how many more of us stayed together. I don't think anybody could've predicted that. It's a tribute to us that it was that important to us that we keep this thing going.

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I had gone to visit with your sister after the wedding. Buddy went out for the evening. They were expecting, I guess Michael. Then Dolores had Valerie and Betty had Johnny. We went to the hospital to see them all. That seems so long ago, now. It really was quite a while.

I was one of the originals. Your sister Joanne, Dolores, Betty, Patti and myself; and then Angie and then Donna. Then Louise came later. Actually what happened was that every time Angie would have Club, Carole was a guest. After Angie moved away, we just asked Carole to stay in Club. And then Doris Fazio. Doris and Angie were like Patti and I at the time. And then Doris got very busy with her children and she just said that she was going to have to let Club go.

Like the other Club members, Anna described the preferred communication patterns in the group. Anna recalled how important the communication pattern of "respectful waiting" was to her personally when she was dealing with her feelings regarding her daughter, Lisa.

Joanne has scared us several times when she had that awful reaction to the anesthetic and that stuff. And I know when she's having to deal with some problems now. I can see it on her face at Club, and I don't even bring it up, because I figure Joanne doesn't want to talk about it, or she would say something.

We don't infringe on feelings. If they want to bring it up, that's their choice. Like I could not bring myself to talk about Lisa at Club. I just couldn't talk about it. Pat knew, I talked to Pat, but I've since found out Joanne knew because Lisa used to be down at Michael's and people knew, but no one ever brought it up to me. We're so respectful of one another. No one said a word to me until I was ready to talk about it. I would go every month with the intentions of saying something, but there was never, never the opportune time for me to bring it up. And Pat would say to me on the way home, "Well, Anne, it just wasn't the right time for you." And I'd say to her, "Oh, but I know the girls know," and she'd say, "Well, they know, but they're not saying nothing, Anne, they're waiting for you. When you feel right about it, you'll speak about it." So that's what I did. But that was the only one time I think that I really was uncomfortable because I wanted to say it, but it just would not come out. And I just wasn't right with it.

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It's just that we have respect for each other. We figure if Joanne wants to talk about it, she'll bring it up. Maybe she just doesn't want to deal with it tonight, maybe she just wants to forget about it for the evening. But that's how I felt about it. Pat would pick me up and I would go out of here, and Pat would say, "Well, do you think you're going to tell the girls tonight, Anna?" And I'd say, "I have full intentions because

this is ridiculous. I want the girls to hear from me. I don't want them to think that I'm trying to keep it under wraps, because it certainly can't be." Lisa was getting bigger and bigger and bigger, but I would get to Club, and it just never seemed like the right time. And we'd come home and in the car and Pat would say, "Well you didn't say anything tonight either, but that's all right, Anne." She says, "I guess it just wasn't the right time for you," and she'd say, "Well, you can tell them next month."

Even in families, people aren't that considerate. Because after my mom died, she wasn't gone very long and people were saying, "What are you going to do with the house? What are you going to do with the house?" I mean coming right out and asking things right away with no sensitivity! I wouldn't ask anybody that. When I see someone is hurting, I steer clear of that subject totally. When they're ready, they'll talk about it. And if they don't want to talk about it with me, that's fine. As long as they have somebody else that they can talk about it with. Because everybody does need somebody.

Because even like if one of us will say, "Wait till I tell you about this one." And then we tell a real anecdote, nobody comes out and asks if we are unhappy; nobody ever asks that. But we know because we can kind of read through the lines. Mental telepathy or something. There's a bond, it's hard to really put into words. It's just a feeling.

We really care about one another, and it's just understood. It's funny that nobody ever steps over that line and asks like an embarrassing question. But we don't. We just know our place. That's really something to be proud of, too. Because there aren't too many people in this world today that really know how to respect other people and their feelings.

Today people don't think anything of asking the most personal questions. They're *nebbby*⁹ is what it amounts to. People are so *nebbby*, nothing is too private. They'll ask anything. But we're not like that with each other. We've always treated each other like that. I guess we just take it for granted.

It's exceptional and I don't think anybody goes out of their way not to say things just to not cause confusion. It's not as if we're on guard and we're trying not to hurt somebody's feelings. I don't think anybody operates that way.

Anna commented on how larger regional economic conditions — as well as her husband's illness — have been hard on family resources. She is acutely aware of the constraints with which she lives. Her assessment of Club as "non-materialistic" helps her feel comfortable with her position in relationship to the other members. She also strongly believes that her deeply held values and those of the other "girls" are the same.

A lot of times I feel bad because all of the girls seem to be very comfortable and their places are fixed up real nice. And I said with our situation the way it is, I need new drapes, I can't -- I just can't go out and make a bill for new drapes. Because we're living on disability. And Pat always scolds me for that, she says, "That's not important to the girls." And that's true. It really isn't.

I know in the beginning we started out, and we were having Club, we would clean and wash woodwork, and wash, and now all we worry about is getting some food together. So I know that it's not important to the girls, but still, it's important to me that I can't do the things that I would like to do in my home. Go out and buy something. Because you're on a limited income. I like good stuff, but I don't have the money for it.

Nobody ever *makes* me feel that way. If I go to Club and everybody's places are so nice, everything matches, I like it, but it's not number one with me. I'm not like real materialistic. It's how I get treated when I go somewhere that's important to me. I've been taught this from when I was a child, when anybody comes into your home, the *way* you treat them is much more important than what your house looks like. It should be clean, but I mean it isn't important that it be a showplace. It's the way you treat people that's going to make them want to come back. But nobody has ever made me feel that way, that's my own personal thing.

I say it to Pat in conversation, but I don't want anybody's sympathy because it's really not that important. It's just that sometimes when you're in kind of a down mood, I'll just say to Pat, "Oh, jeez, I feel so funny, because everybody has this and everything," and she'll say, "Don't think about. You know the girls don't care." And I know they don't. I really do know they don't. But sometimes you just pity yourself once in a while.

Anna talked about the material help the Club provides one another, especially at critical life events. When Anna told the story of how Patti's husband took his own life, she suggested that all the memories within Club -- including this tragic one -- are interconnected.

Anytime that there has ever been like a death, we always send flowers, we always bake or cook something, and if it was the girls' immediate family, we always made a point to get to the services, mass, and to the luncheon. Just to be there so that they knew that we're there in good times and in bad. We've done it all and I can remember the day that my dad was buried, it was the day after Christmas, 21 years ago. He was laid out for

Christmas, can you imagine, we were down there. They don't do that today, but we were down there Christmas Eve and Christmas Day and he was buried the next day. A lot of the girls helped. My godmother made all the food for the dinner and the girls helped serve. And then when my mom passed away, they all came to mass, and then up to the cemetery.

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When Patti's husband took his own life, we all went to the funeral. That was so tragic; we all did something. We had been together the night before. That was the first time that we had decided to go out for Christmas and we went to Nello's. And it was December 13, because the next day was Patti's birthday. Let's see, Billy was two years old. So it was 1973.

I'll never forget, we had gowns on, we have pictures of it, and they were wearing these gowns they were wearing at the time, and we were going down to Nello's. Then we came up here and I had a cake, and we've got pictures, standing around here. And then the next day, she went to work, and she came home and the house was all dark. She said that she walked in and she's calling, and calling, and she went upstairs and he was sitting, like against the headboard, and he was cold already.

Her sister called. They had gone down to her mother's. And of course the whole Island Avenue was buzzing about it. Because he was a police lieutenant. And Joanne called, and she says, "Anne, is that true about Bob Borden?" and I said, "What about Bobby Borden?" and she told me, and I said, "Oh my God," I says, "I don't know," I

says, "Let me find out." So I made a few phone calls, and I called Joanne back, and I said, "It's true." They had only been married three years.

But that was a real tragic thing, and every time I think about that first night that we went out for dinner to Nello's, then the next day was such a tragedy. Her birthday is December 14th. I even hate to say it, but that was the first time we went out to Nello's, because that all goes together in my memory. It all goes together. You can't pull out one thread but it's attached to something.

But she's come a long way there. And she's a genuinely good person. Oh, really, really good person. She has a lot of important values and she's just full of respect for everybody, she treats everybody like they're someone special. Really good person. I'm really lucky to have her for a friend, I'll tell you. But like I say, I don't consider her a friend, really, I think of her more as family.

Anna recalled an incident that occurred over 30 years ago which, she believed, almost caused the group to split up. Anna stated that the Club has grown in sensitivity and that there is "no way" such a thing could happen today. Additionally, she attributed the original incident to the influence of someone who did not belong to the Club for very long and was not a true "Rox High" member.

We've had a few skirmishes along the way. What really stands out in my mind was Angie's mother had passed away, quite suddenly, from a heart attack. We were to go out, that's when we were going out husbands and wives. We were to go out to, what the heck was the name of the place, I think it was the Fountain Room out on Route 51. And they had these strip dancers but it was like, high class, it wasn't seedy or anything. But anyhow, we were going out for dinner with our husbands. Well, Angie's mother passed

away, of course, why Pat and I said, “Well, we’re not going out. We won’t go out.”

Well, jeez, how could we go? Angie’s mom passed away.

At the time we had a couple of girls, Gloria Zapka was one of them. But Gloria Zapka and Grace Mijalik, they had started coming as guests at Doris’ house. And then somehow they were in Club. And I always used to say, I don’t know why they’re here, because I like them, but they weren’t girls that we went to school with. We would be talking about people and they didn’t know who we were talking about, and, I mean they just didn’t fit like. It didn’t bother me, but I felt like they were invading our circle of friends. So anyhow, they were very instrumental in talking the girls into going out.

And the next month when we went to Club, I know I must have hurt some feelings, because I really told them that I was really upset that they had gone. I said, “Out of respect to Angie, nobody should’ve went anywhere.” And one word led to another. We almost really kind of broke up. And I can still see it. We were down at Dolores Kosko’s, down on Neville Island. I said, “This is ridiculous. Why should we be arguing over this? It’s over with, but all that I can tell you is that if it were your mom, you girls would’ve wanted the rest of them not to go out.”

I’m sure if they look back on it now, they would say, “Oh, what were we thinking of?” But I remember Gloria Zapka saying to me, “Oh, we’re going to go, because Angie, she wouldn’t go anyhow.”

But had it been like now, with me and my mother having passed away, I wouldn’t have been able to go to anything like that for a couple months, and I wouldn’t have gone. And I don’t think the girls would’ve gone either.

When Dolores' father passed away, we canceled Club that month because she wasn't up to coming. We just *know* now. We might have Club because we think, well, that girl needs that time to get there and talk but we would never go out, we just wouldn't. There's more sensitivity now and maturity.

But that's about the only big one that really stands out in my mind. We haven't really had any problems. Everyone seems to respect everybody else's wishes. That's the only time that I can remember that we were really on the brink of. . . where it would've been very easy for us to say, "Hey, let's just forget about it." But I'm glad we didn't. And I'm sure everybody else feels the same way. I can't even think of any time that my feelings have been hurt by one of the girls. No, I can't.

Because we're all the same, we're all vulnerable, we all have the same heartaches, we all have the same fears. It's just like a big circle, and you don't ever want anybody to drop their hands and break the circle. You want to just keep ring around the rosy.

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I'm sure things will maybe be said that don't sit right all the time, but it's too important. The friendship is too important to let a few words ever cause any dissension. So if anything was ever said, I'm sure it's forgotten because I never come away from Club with any hard feelings. Never, I never do. We always leave on a good note with each other. Where are we going next month and all that. That's our parting. We would like to do much more with each other but we're very busy with own lives and families. We just consider what time we do get with each other important.

Anna repeatedly referred to the importance of having an emotional release when you are facing critical changes in your personal or family life. Being able to turn to another "girl" who was facing the same issue as you was an invaluable resource to Anna.

Betty and I are similar right now, because her husband has retired and my husband retired. My husband's was more or less a compulsory from disability and John got an offer that he couldn't refuse, and he retired. But that made a big change in our lives. And we often talk about that more so than we do openly with the rest of the girls because none of them are in that situation right now. There is that stuck-togetherness that is just overwhelming. It's from early in the morning till late at night. It's just like they don't have their own place and it's not that they want to take over but that's eventually what's happening. They're moving in on our territory is what it amounts to.

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I can't imagine not being able to talk to somebody about it. Because it's not like that's all we talk about. But if something's really bugging me, I know that I can get it off my chest with Pat. Or Betty. Like she was picking me up for all the class reunion meetings and we would talk on the way down and we would laugh and, and she'd say, "Wait till I tell you this one." She and I have more in common now than anybody else because they don't really have to deal with it as much as we do.

Anna talked about the value of friendship bonds within the Club that are older than the Club itself. She described her very special relationship with her lifelong friend Patti.

It was a bond long before we started Club. It's like Betty, your sister Joanne, Dolores. And Donna and I were real good friends in high school. Donna and I were majorettes and I was the one that called her and asked her to start coming to Club.

Now Patti and I we became friends in 7th grade down in Hamilton. I had had pneumonia and I wasn't allowed to play gym, and she had a heart murmur and she wasn't allowed to play gym. So we were sitting there and we just started talking, and we just became the closest of friends. There have been times like when her husband was living and she was busy and I didn't talk to her as often as I do now, but still I knew that if I needed her, she was there, and she likewise. She was always involved, the birth of my children, everything, always there. Everything I've ever had good or bad, she was there. Happy things, she's been here; sad things, she's been there for me no matter what happened. When I would call her, she always came. And when something does happen, she's one of the first persons that I think of, and I'll say, "I have to call Pat," because I know that she's there for me, and that she'll drop anything and she'll come if I need her. And I would do the same for her.

It's very comforting, and it's good, because you have your husband, you have your children, but it is just not the same. She is like outside of that inner family circle, as far as blood relationship or anything, but she's just as important as if she was in the inner circle.

My children in fact always say, "Mom, we wish we had a friend like Patti." And my family even says, "You're so lucky. You have such a good friend in Patti." She has been around for us always, and I try to do the same with her. But any of the other girls,

if I would call them and say, “Hey, I need you or I have this problem,” I know they would respond.

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Patti really helped after I lost my mom. She still does. We talk almost every day. If I don't one day, then definitely the next day. But she called every day, and says, “How are you, and don't do anything you're not ready to.” She was always there for me, and I try to be that kind of a friend to her now, because she's dealing with her mom and she's saying, “Oh, what's happening to me? I don't have any patience.” And I try to say Pat, “You're human, that's what's happening to you, that's all. And don't, don't *ever* say that you're not doing the best you can, because you're doing too much. And that's why you're feeling bad about it because you don't think you should ever lose your patience, and we all do.”

At the end of our interview, Anna volunteered a description of the unique qualities of her friends in Club. She summarized a collective worldview that she believed the world needs more of. She contrasted the collective commitment she experiences in the Club with a culture where individual self-interest predominates.

I don't think this would happen in this day and age with today's society. I don't think today people look out for one another like we do. Not that we take care of each other, but we're considerate of each other. I think today unfortunately, society is “Hooray for me. And good luck, buddy!” It's more of a “I” society. It's not a “we” society. That's my opinion. I don't know if I'm right or wrong. I hope it changes, because I don't think there's anything more important than being happy with the people that you spend time with.

And that's another good thing, there isn't anyone in the Girls' Club that thinks they're superior to the rest of us. We're all on equal footing. Some may have a little more heartache than the other, but everybody gets their share sooner or later in life. We don't judge our status by material things. That doesn't even enter into it. We don't really care. I know there's some much more comfortable than others, but that really doesn't even enter into it.

And that's why I think there hasn't been any of that catty bullcrap women always get accused of. Because we're not envious of each other. If things go good for them, God bless 'em, more power to them. And if they're happy with what they're doing, then it makes us happy. Everybody leads their lives the way they want to. And everybody's responsible for their own actions. When it comes down to it, you can't really tell anybody else how to live. But we all kind of live the same type of life. I think we get along so well because we understand each other without even talking about it.

We live a good family life, caring for the people who are important to us, being a good friend -- well, being a good mother first, being a good friend, being a good grandparent. Family values are foremost. And more important, I think we have good *family values*, so then we have good *friendship values*. Because we put the two almost on equal footing, and that's why the girls are so important, because we don't think of it as "just friends." They're all, they're my family. We don't do as much together as we do with immediate family, but if we meet to do something, we do it. When the time is necessary or appropriate and we have to do something, we do it. We find the time to do what is expected for one another.

I think that's really what's wrong with today, it's too many "I's." And too many "me's." When you stop that and you start thinking "we," that's when you get somewhere. People who "I-I-I" may climb the ladder, but they don't have the things that money doesn't buy. They can never survive in a friendship like this, because they're just too self-centered. You can't be self-centered. If you can't think about other people and their feelings and what hurts them and what makes them happy, you're not going to be a member of a group like this. You're going to be by yourself. Because that's all that matters to you is yourself.

Sure you're always concerned for yourself, that's human nature, too. But you can't be a lone wolf, you can't say well, "Good for me and the hell with everybody else." You just can't function like that. Well, you can function like that, but you don't grow and develop like that. You're always going to be worried about yourself first. We worry about ourselves, we worry about our families, but we also spread a little thinner and worry about the friendships and what makes everybody else comfortable.

I'm sure there are some people today who really do develop real nice friendships but they're not as common as they were when we were growing up because it's a whole different society today. Growing up and with the same type of background and the same type of values. We all sort of had the same type of family life. We all had the same priorities. The same things were all important to each one of us. That's what keeps us together because we all almost all think alike.

Club is a part of us. It *is us!* You can't put any kind of a figure on it. You can't even evaluate it. The older we get the more important we realize it is.

4.4 Betty

“I think we’ve all learned to read between the lines of what people say.”

Driving to Betty’s made me very nervous. She was my cousin. I had known her all my life, but I was never going to know her like I was going to know her now. More than any of the “girls,” she had warned me that there was nothing about her life that would do me much good. Several months later, after we completed two long interviews, I think we both knew that talking about her life had just begun.

The thing I noticed when I walked in the house that first night was the overwhelming smell of cigarettes. Betty’s husband, John, has smoked all his life -- a lot. I wondered how she could stand that smoke-laden environment. My stomach was already sick. Later, she reminded me that you can learn to adjust to anything in your life if you have to.

After saying hello to John, who was obviously “in” for the evening watching the new large screen television he had just bought, Betty and I headed off for our interview. She walked me down the hall to the back of the house, into a room that was clearly in transition. The faded cowboy bedspread made part of the room look like a child’s bedroom that had not been used for a long time. Other parts resembled a sewing room with projects neatly stacked up waiting their turn. And one corner of the room was an unabashed storage space for some old lamps, picture frames, and winter blankets in plastic bags giving off the slight scent of moth balls.

Betty explained that she was re-doing this room -- in the process of making it her work and project space. She had rescued the big blue velour recliner from the dumpster and she had lots of plans for special touches that would make this room her own. I settled into the recliner and set up the tape recorder. She closed the door, turned to me, and said, "I hate that television."

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Betty's mother, Michelina, was born in Calabria, Italy. She emigrated to McKees Rocks with her mother and siblings as a 10-year old girl. She was raised in a strict immigrant family with a stern mother whom she was unable to please even after she was married.

My mother's background, from the recollections that I have, was that it was a strict household. Grandma and Grandpa's household was not happy or pleasant. I don't want to say mean, but that's the type of impression I get. Nothing ever was done out of love or compassion or consideration. Everything was just done in a certain way and if you did anything different than what they thought you should do it, you were like really ostracized.

I can remember to this day one time when my mother went to see Grandma. And of course Aunt Carmella. I think of Aunt Carmella and Grandma as a unit, because they were always together and they fought the same way, and Aunt Carmella just did what she was told and thought like Grandma did.

It must have been something like Mother's Day, because she had a gift for Grandma. And she came home with the gift. Evidently something had happened. I think she was in tears and very upset, and here she had this gift, carrying it back home with her.

It was rejected. Whatever motions my mother made toward a reconciliation, didn't work. But I felt sorry for her. It was like a slap in the face to her.

Grandma ruled that house and Aunt Carmella waited on her hand and foot, whatever she wanted, that's what was done. And it carried over to my mother, even though she was married, she still felt obligated to respect my grandmother's wishes.

Betty's father, Tony Leone, was born in the United States to Italian immigrant parents. The marriage between Tony and Michelina was arranged by their parents.

My father was born in Ohio and his mother and dad came from Vastogirardi in Italy. His parents lived in Pittsburgh when they came to the United States in 1899 or 1900 but then they moved to Roswell, Ohio. His father worked in the mines and farmed.

My father worked in the coal mines, but I wasn't even born then. Because my earliest recollection was that he worked at Dravo. And I know he worked hard. I know he worked outside in all kind of weather. And it was hard on him. But I know he went to work every day. Even though it was bad weather or whatever, and he was a welder. In a boatyard. I know he worked hard. I can remember him talking about laying on his back welding in the cold or in the wet, the rain or whatever. I knew that he had a hard job and he worked hard.

I never was ashamed or embarrassed by where he worked because everybody worked at some type of a mill. Your dad worked at the same place. So it was like he was just like one of the other guys.

Betty's earliest years were spent in The Flats, a section of McKees Rocks near the Pennsylvania and Lake Erie Railroad yards. The row house in the Flats was not big enough for five boys and one girl so the family moved to a house that they

quickly filled from top to bottom. Betty recalled moving in to the house and getting her own room, a room that she remembered as "nothing special."

I remember The Flats and my mother stirring the boiling clothes with a big stick and scrubbing things on the washboard in the big tub outside and rinsing and then going to the empty lot next to Grandma's house and hanging her clothes.

We had four rooms: the living room, then you walk back, the kitchen was toward the back, and then out the back kitchen door led to the alley between the two flats. The back doors faced each other, the little alleyway in between.

And upstairs were two rooms, just two rooms. The stairs went straight up, and there were two rooms. I slept in the room with my mother and dad. And I'm sure I slept with one of my brothers, probably Archie who was younger than I, and the other four slept in the other bedroom. In two beds.

There was a toilet in the one bedroom, and no partition of any kind. I think we put something up. Some kind of a wall, and I don't know if it was just maybe a sheet on a string or something like that, but there was no privacy. And no sink up there, just a toilet. If you wanted to wash your hands, or get washed, we washed in the tub in the kitchen. I know we got washed in a round metal tub.

I know I did feel a little. . . I don't want to say, maybe embarrassed would be the word, because we lived in The Flats. Most my other friends lived in houses, like right across the street was the Barbaros, they lived in a house. Michelangelos lived up the street in a house. And we lived in The Flats. It was kind of demeaning to a certain extent. I felt that we weren't maybe quite as good.

But I didn't feel any worse off, because we always had food, and clothing and basic stuff. And I feel that my mother and her friends were sort of all equal. They all had the same type of living. Their situations were all basically the same. They had kids and they all stayed home. No one worked in those days, none of the women worked, they all just stayed home and took care of their house and their kids, so in that respect, they were on a level playing field.

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We went from The Flats to Alexander Street. We got a house, although it was a half of a duplex, but it was still a house. I remember moving there and that I was young, and I had my own bedroom, which was nice because I was the only girl. It was only two bedrooms on the second floor and then the attic. It was large enough for a couple beds up there, a couple double beds, so that's where the boys slept. So we really had four floors, a basement, the first floor, second floor, and the attic. And we used it all.

We had a coal furnace with that little metal door that led from outside right into the coal bin, and from there it got shoveled into the furnace. Until they converted that to a gas furnace.

But there's a lot of good memories in that house, because that's where I lived, until I got married, and that's where my brothers went away to the service and came home to that house, and a couple of my brothers got married while I lived in that house.

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I had my own room, and truthfully, that was it. It was not that it was anything special, it was just your basic room with your furniture and stuff, we never had anything.

I can't remember it ever being fixed up frilly like for a girl. That it would be a special room. You would think my mother would put special frilly curtains up and with a matching spread or something. But they just didn't do those things in those days, and I guess the money just wasn't there. But even if the money's not there, you can show the interest, or be more verbal about things. And fix it up and maybe other ways that wouldn't cost a lot of money. But it was just, just my room.

Michelina Leone was consumed by the sheer amount of work needed to raise six children. Betty recalled seeing little happiness in her mother. However, one of the things her mother did enjoy was visiting friends. Michelina never went anywhere empty handed. Betty still follows this code of behavior, which she feels she inherited from her mother.

She had six kids. It was constant, I mean either washing clothes, cooking, ironing, and cleaning. That's all her life consisted of.

My mother never laughed very often, I don't think. I don't think she had much happiness in her life. It was all work. I think it was all work. She did enjoy like visiting friends. They would go visit friends, and especially if someone was ill, or had been in the hospital or something. They'd go visit, they'd always take something. Even if it was a can of peaches out of the cupboard, they had to bring something.

And I think that's where I get a lot of my habits today, like I can't go visit somebody without bringing something. It's just part of me that I just can't, and I don't want to not do it. I like to do it. I enjoy it. I attribute that to watching her go visit friends and making things like *champelli*.¹⁰ She'd bake that if nothing else. And that was probably just basic stuff they had, nothing fancy, just a sort of like a biscotti type with orange rind in it. Or fresh fruit. They just didn't go visit unless they brought something.

Canned fruit. Yeah. Canned peaches stick in my mind. When I see canned peaches, I think of my mother. Visiting her friends. Because if they had nothing else, there was always a can of fruit in their cupboard that they could bring and give to somebody. So I guess that's where I get that.

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I remember this was years later, my mother and Teresa Celetti and I don't know who the third one was, they would go on those pilgrimages from church to Ohio. There was a church in Ohio, and the ladies in the church would take a bus load and go there. Those other people would tell me that they had a ball with my mother and Teresa. That was a side of her that I didn't know.

When I think of my mother, it's just her being at the stove cooking or washing clothes. I feel she had a hard life, a life filled with work and obligations. And I didn't know the other side of her, if she would have liked to have done something else, but maybe she felt that she wasn't entitled. I think maybe the reason that they visited so much, was that was their way of getting out of the house and having a little bit of enjoyment or entertainment, if you want to call it that.

Betty's memories of Michelina are connected to work and food. She looked back at her mother's achievements as a cook. She acknowledged the domestic skills and abilities her mother had that were easily taken for granted.

She baked a lot -- pizzas and bread, of course, that was our staple food. You had bread to eat and pizza, and a lot of pasta, I don't really remember too much other food. I can't even remember her making like chicken or anything. My only memories are of spaghetti and meatballs and pizza and bread, and, for a treat, we would eat a bread that

was soaked in warm milk with sugar on it. That was like a treat, because it was sugar, served as a sweet thing to eat.

I remember when we lived on Alexander Street, everybody loved her pizza, and like my brother's friends, they would want to buy it. And she wouldn't want to take any money, but they would give her a few dollars for a pizza, insist that she take it, but she would be more than glad to just give it, but they wouldn't hear of it. So I wouldn't call that working for money, but she did get occasionally a few dollars from friends of my brothers that wanted her pizza, or bread or whatever it was. So she only earned a few dollars in her lifetime from her own labor.

Thursday was baking day. We would come home from school, Joanne and Dolores and myself and Joan Hrlich sometimes, because she lived down the Bottoms, and she would walk home that way with us. And we would go to my house, because that was the first stop, and my mother always had fresh bread and pizza, and white pizza, you remember white pizza? And she just fed everybody. Everybody that came in, she just had plenty of food, and everybody ate. That was our Thursday stop. And then they'd go on their merry way.

She enjoyed feeding people. I enjoy feeding people. It gives me just as much pleasure feeding them as their eating it. So I guess that's something else I've acquired from her. I think she truly enjoyed feeding everybody, I mean, the neighbors, the kids, I'm talking about everybody.

I can remember a story from her funeral that somebody told me. When they were paving Alexander Street, the workers from the township were out there; she fed

everybody, she fed all the workers. And I didn't know that. This was something that someone told me, and there I was living at home, and being right there, and I don't remember that. But maybe it was just such an automatic thing, maybe I didn't even think anything of it, because she did it so much.

She just had a knack with her baking, her pizza and bread and stuff. The closest you can come to it now is the pizza that you get from Mother of Sorrow's church. It's similar, but, of course everyone, I think recalls their mother's cooking as the best. So, it was special, yeah, it was. And we just took it for granted.

Italian was spoken in the Leone household as a "secret language," especially when the Leones did not want their children to understand. However, deeper in Betty's memory of life at home were the scenes of the weekend fights brought on by her father's pattern of working hard all week, followed by drinking hard on the weekend. She described what the house felt like when her mother and father were fighting. She reflected on the possibility that the fights may not all have been her father's fault — that perhaps things were not as one-sided as they may have seemed to her as a child.

They talked Italian in the house. Now they never taught us Italian. That was their secret language. That was their language to communicate between them and also with their friends that would come over. And we'd be playing in the same room, and they would be carrying on their conversation and we had no idea what they were talking about. It was their way of communicating, saying things that maybe they didn't want us to hear, or just their normal habit of talking in Italian when they got together. But I can just remember a few words. And I used to get a big charge out of saying them. *Aspetta*, it means "wait," and *sta ta zitta*, is "be quiet," or *sta ta zitta*, like "shut up." And of course, *affanguo*, which, I mean, that was to them such a terrible word.

And of course I learned how to count to 10 in Italian. I just picked it up, I guess because they used to play *Morre*, and throw the fingers out. The guys, they used to yell out numbers, they'd yell, "*CHIN-QUE!!!! SEI-ESSSS!!*" And they'd yell and so I don't know where I learned it in order, but I did learn to count to 10.

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I didn't want to do anything to displease her because she could get mad. Now that was with her, now my father was just, he was there, but there was no. . . I didn't ever worry about displeasing him.

It was just my mother that was the domineering person in the household I think. My father went to work. That's all he did. He worked and he came home. He drank some, and then they would fight. I can remember a lot of yelling and crying. But there again, that's a real confusing time.

I can remember the weekends. The weekends were the worst, because my dad would drink. And get drunk. And then my mother would holler and fight and cry and whatever. And then she'd, of course to us kids she'd just bad mouth my father, that he was a drunk and all that stuff. But at the same time he was going out to work every day and earning money. Maybe his escape was the drinking. But it created these problems every weekend. And I can remember just wanting to leave the house, get away from it. Because it was like, just always. . .

But then my brother Pete said to me later, he said, "Do you realize that he probably drank because of Momma?" That's why he drank, and it was like a catch-22

situation, y'know? He drank to get away from her mouth, and then that would cause the arguing, and she'd yell even more.

It was just like you just lived there and you just did your thing, she did what was expected of her, and he went to work. I can't remember any periods of or any situation where there would be a light-hearted atmosphere. Or any kind of fooling, joking around or anything.

Except maybe occasionally they joked around a little bit. My mother would always say, whatever many years it was, let's just say 30 years, she'd always say "Thirty years married to the wrong man." That was her standard thing. Or 32 years married to the wrong man, that's what she always said. So maybe in her heart that's what she felt, she was married to the wrong man.

I just think that her life was so hard and maybe she just felt that this was a situation she really regretted being in, because it was just all work and no fun, and then of course with my father drinking and stuff, maybe that's where the remarks came in.

Betty wondered why she, the only girl in the family, was not closer to her mother. Moments of feeling special were few for her. She reflected on how those experiences may have affected subsequent patterns in her life.

I was, I don't want to say afraid of my mother, but afraid to get her mad or displeased. My father was more, laid-back, happy-go-lucky. The only time he would like holler at us or something was when it was bedtime and we would be silly and didn't want to go to sleep. We'd be making noise and stuff, he'd come up and holler or maybe give us a smack or something. But that was when I was younger, then when I was older, I

don't really remember. It was like his opinion didn't matter. It was just like all my mother. I had to do things the way she wanted me to do them . . .

But not the boys so much because boys are kings in an Italian household. I mean, that's just the way it was, you just did for them. I was there to cater to everybody, I think. Because I can remember when Petey was dating. . . Oh!! We had to make sure his white shirts were ironed just a certain way and things like that. Just little memories like that.

I just think the boys were special to her. My mother never showed me any affection. I can't ever remember her kissing me or telling me she loved me. Never. It just wasn't in her. I don't think she did it to the boys either. But that was her. I think that's just the way they were, I mean, those people just didn't have a life of any kind of feelings or emotions, they just worked. That was their existence, and I don't think they knew how. I don't think my mother knew how to express any affection. I mean, she showed her affection in other ways by cooking and cleaning and being there, and all. But being that I was the only girl you would think that there would be a closeness between us, but I can't say there was like any special closeness.

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I think I just learned by living there that it was expected of me to take care of men. My husband, whoever I would marry, that was my role. Now she didn't say that to me. But I absorbed that from watching her. Cater to the boys and do for them, and they came first. I never questioned, I just did and was sort of subservient, I guess that's the word.

And never questioned my right to have feelings or considerations. I just went along and whatever crumbs I got I was thankful for. I think that's how I would put it.

I really think I just lived in a fog or something. I went along day by day and going to school and coming home and maybe doing what was expected of me, and not having again, not feeling I had the right to. . . I don't know how to say it. . . to expect things, like be a spoiled brat, throw a tantrum or anything. I wasn't, didn't even know what that was. And you would think being that I was the only girl in the house, that I would be spoiled rotten. But I wasn't. So I think I just lived and did what I thought was expected of me. Helping my mother as much as I could.

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Maybe it was the way I was brought up in the house with five boys. And my mother that took care of everybody. And it was just do for them, do, do, do. Y'know, I can't ever remember speaking up for myself in any way. I mean, I never wanted to, I never thought to do it. What would I speak up about? It was my duty, my job, whatever you want to call it, to help my mother do whatever it is I did to help her.

After we moved up to Alexander Street, what I did was helping with hanging laundry, and doing things around the house so maybe she passed on to me, without verbally saying, "Now, listen, you do what they tell you, you listen to your husband," that was never verbally spoken. But little things like that somewhere got stored in me. Because girls today are different. They speak up for themselves. They say, "Hey, you're doing this? Okay, now I'm going to do this." And that was never the case for me. You just had your babies and you stayed home and took care of them and you cooked and you

had the meal on the table and really I'm a clone of my mother. Well, now I'm not. If I would have died two years ago, I still would have been.

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I remember she used to have to go into town because in those days, you went into Horne's and stuff and you got fitted for body garments, like girdles. They were full, from the bra all the way down, and had all these hooks and stuff, because I used to have to help her sometimes hook those. So I know she'd have to go in for that. I imagine she bought clothes, but I don't really remember her coming home and showing me anything in particular. My memory is the goodies I was waiting for her to bring home.

She would bring me home popcorn balls from that corner store in Pittsburgh, now there's a McDonald's on that triangle shaped area, and that used to house this wonderful store that had roasted nuts and popcorn, and caramel corn. And every time she'd go to town, she would bring home a bag full of popcorn balls and they were the best things you could eat.

Betty's three older brothers -- Frankie, Eddie, and Petey -- were not around as much when she was growing up. She was closer to her younger brother, Anthony, known as Archie, and to her slightly older brother, Raymond, who was known as Cream. These two remain special to her. Betty reminisced about how much she enjoyed school. She felt that she had gained skills in school that have served her well throughout life. She especially excelled at basketball and other sports. She recalled holding herself back from more involvement in school because school activities cost money that she knew her family did not have.

I felt closer to Cream because he was only a year older and Archie was a few years younger. So the three of us were closer in age -- the bottom half of the six. The older boys were in the service and working and so they were a lot of times just not around.

And I think I was probably closer to Archie. Because he was younger, and he was the most sensitive person than the other boys were. He just had that side of him, and he still has it today. He notices things that other men don't notice. He might come here to visit me and he'll say, "Oh, you got a clock or you got this." Most men don't pay any attention to that kind of stuff. I think men are born like that. I mean, they either have consideration and compassion or they don't have it. He just leaned toward that. That came natural to him.

He's so observant, and so appreciative. Oh, feed him, your head gets like this. I could feed him every day. He just goes on and on. Bacon and eggs. I mean, what can you do with bacon and eggs? The man's eating his toast, he says, "Do you know what I would pay for a meal like this in California?" That's all I ever hear from him. And I said, "Archie, it's just bacon and eggs, I mean, y'know, what, what's the big deal?" But any meal you give him, he makes you feel like a queen. And then he'd lay on the floor after, and he'd unbutton his pants, and he'd say, like after a big meal he'd say, "I can't move. I can't move. That was the best meal."

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I can never remember not liking school. I'm sure I liked it. That's where I think I started being aware of forming friendships.

I'm glad that I took typing, that I learned typing, because it has done me well in all these years. Now my daughter Beth knows how to type, but she doesn't have any speed. Or, I don't want to say skill, but I mean, she's not real good at typing, but that was something I tried to instill in her. "Beth you have to take typing, because that is

something that you will always use.” And to this day, she regrets not being more skilled at typing. Because I do a lot of her typing for her applications and stuff for school. I still do a lot of all that for her.

And I think in high school, Mrs. Antonelli, it was Miss Antonelli, and then Mrs. Dudash. She was the gym teacher, and the health teacher, biology. And of course, since I had some ability in athletics, of course she was one of my favorite teachers.

I lettered in basketball when I was a sophomore. . . and to this day I could kick myself, I have no idea what I did with those letters. The first year, I was a sophomore, I got the small “M,” and she apologized, she says, “I really wanted you to have the larger one, but we don’t give them to sophomores,” but then for my junior and senior year, then I got the big “M.” Yeah, I was in basketball. I’ll have to get my yearbook out and show you. I enjoyed sports and stuff.

I was good at it. So I think anything you’re good at, you enjoy doing. I felt that I was capable of doing it, that I was strong enough and had enough energy to do it and enjoyed it. I enjoyed the crowd watching when we would play basketball games.

I was never anything like a cheerleader or anything. But that was my own fault. I didn’t go out for cheering. I wanted to go out. But for some stupid reason, I didn’t. The reason I didn’t try out for cheerleading was maybe the fellow I was going with at the time was going to be watching. It was really a stupid, stupid reason.

But I think maybe in the back of my mind, I thought, “Hey, I’m never going to be able to afford this.” Y’know, saddle shoes and uniforms and, and in those days when you became a cheerleader when you were a freshman or a sophomore or whatever, you were a

cheerleader every year. Not like today, you have to keep trying out. And my friend Gail was a cheerleader, and I was really jealous in a way. But in another way, she had a real hard time too, because they just didn't have the money, but she was able to stick it out. But I know at times it was rough for her, for her family, because that stuff costs money. And probably, I maybe thought my mother's not going to be able to afford this stuff. Just don't do it. But that was something I regretted not doing.

And I remember one time I got called down to Mrs. Simpson's room. And I thought, "Oh, oh, what did I do?" And here it was that she wanted me to read a passage from the Bible at the assembly. And that was a big honor for me, because I felt then, probably as I do now, which probably comes through in a lot of things I say, I felt like I wasn't worth, worth it, or worthy of doing that. It was like a big honor. Really a big, big honor for her to choose me.

I think I read the 23rd Psalm. I think I had a choice, and of course that was the most familiar, so I did that. What else, oh, I was secretary to Miss Ross. She was the guidance counselor. I would go in and type for her a lot. Which gave me a little bit of a boost of self-esteem. I was doing something important for a teacher.

Alexander Street, where the Leone family lived, was one terrace above Island Avenue. Betty recalled walking the "circuit" around Island Avenue and through Stowe Township. Her private memories revealed a picture of McKees Rocks as a thriving town in the early 1950s.

We used to walk down the Rox, I mean, those were the days when you could walk anywhere and not be afraid. The things I remember down in the Rox mostly of course are the shows. It was the Roxian and the Orpheum was down there. And Chartiers

Restaurant where we would go after the football games and basketball games, and get french fries with gravy on them. And then of course, the Rox was just like going downtown. There were several fruit stands where you get fresh fruit. There was Murphy's Five and Ten where you could go in and get anything you needed in there. A hardware store, and at that time the school was still there. There was a photography studio, Mahan and Wright, that's where everyone went for their pictures.

The Rox was a bustling busy place. It was nice to go down. And then we would walk, like in the evening. We would walk all through West Park, make that whole big circle through West Park and come up through the Rox back onto Island Avenue. And we would walk. It was just that's what we did in the evening, we didn't like sit and watch TV like kids do today. That was our entertainment.

Betty took a job right after high school graduation. Her memories of the work she did in admissions at Mercy Hospital provided a glimpse of the pre-computerized hospital office and non-automated hospital billing practices. She liked work in general and her job at the hospital in particular. Leisure activities for her and other young working-class girlfriends were fairly restricted.

First I went to the Martin Building on the north side and typed. It was so boring and so monotonous and we typed on these large ledger sheets. From what I can recall, to me they were addresses, maybe names and addresses, and they would go along that way. And the carriages were real long, they were special typewriters. And if you made a mistake in those days, you had to erase it with that real rough eraser that was on a wheel, and when you went to hand it in, you had to hand these sheets in to the woman that was in charge. Even if it looked nice, what she would do was she would take it and she would

hold it under the light and bend it, so she could see where all the eraser marks were. Oh, I hated that job. I think Joanne worked at a bank in the meantime.

And then somehow, my sister-in-law, Barb, was working at Mercy Hospital, and got me and Joanne applications to Mercy Hospital, which we filled out, and we both got hired at the same time. I think, very close to the same time. Joanne went into the records room department, and I went into the front office, which I loved.

I admitted patients, I discharged patients, I did United Mine Worker's Insurance forms. And generally answered the phones. And we had nuns for bosses. Sister Ferdinand and Sister Damien. They were pretty nice, and they weren't really hard to work for. But I enjoyed it.

I liked working in the hospital, I thought it was something special. I think I felt it was an important job, although it was just typing, but I was admitting patients. On Sunday we would have 20, 30 kids being admitted for tonsillectomies and adnoidectomies. And it would just be rush, rush -- pppfff!!

Bang those admissions forms out and then discharges. The people would come to the window, with discharge forms and you'd pull the card, and then you would go to the . . . oh, how things were done in those days, the drugs that were administered would be written up on cards, and you'd have to pull the card and see if there was anything else that had to be applied to the bill.

But I have to say, I enjoyed it, and as I said, I did United Mine Workers Insurance forms. And I can remember at the time thinking what a great insurance it was, because they would pay the bill in full. Always, there was never a question about any of the

charges, they just paid it. It was a wonderful insurance if you were a mine worker. They had good insurance.

And I liked the other girls, they were all pleasant to work with. We were all, I think, basically not married. I don't remember what I did with the money after I got it. I don't specifically remember saving or spending it. I can't say that I went crazy buying clothes or anything for work. I liked working and I liked getting paid to work, but I don't particularly remember what I did with my money. Not that it was very much.

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I was just working. I don't remember feeling any different or anything special, or liberated in any way that I was working. Because I was still living at home and stuff.

I was a very obedient person, I think. I think I just knew what I could and couldn't do. I would never go and stay out all night. I didn't want to do it anyway. That just didn't occur to me; that wasn't my lifestyle. So if that was the type of person I was, I'm sure there would have been conflicts.

I didn't choose anything like that. Anything like that kind of frightened me. I would never venture into that kind of a lifestyle because I don't think I could have dealt with it.

I know I enjoyed working, I enjoyed the girls. I know we bowled. I bowled on a team. We'd go into Oakland after work, one or two days a week. I bowled at the Strand, which is now an X-rated movie house. We went to dances with Joanne and Dolores. But I wasn't the type, and none of us were the type, to go like to bars and drink. Well, my brothers, if they would've heard of me doing anything like that, they would've not liked

it. They would've. . . put a stop to it. Or they would've told me about it. They were protective of me, I think.

Like many other young women in the 1950s, Betty graduated from high school and stepped into a fast moving stream of gendered expectations. She met a man who liked her and who wanted to be "serious" with her. She married him, and before she knew it, she found her life "all laid out in front of her."

Gail and I mostly would go up to the Chateau Roller Rink in Kenmawr. And at that time they had dances there. They had skating and then they would have dances, and we would go up, and then we got to know the owners, and it was just like a place to go. We'd get in free and stuff because they knew us. We would go up so often, and it was kind of cool. We got to know the people that owned it and, we would just go up there and sort of hang out, and that's where I met John, and from there on, we started dating.

He was talkative and trying to be impressive. You know what I mean -- like when you're young and you try to impress somebody? I guess from there we started dating. There again, I think this thing, I don't know what I want to call it, my wanting to please, my wanting to. . . to this day I have a bad habit, I can't say no to people. And so to a certain extent, when I think back, he liked me, and so I didn't want to disappoint him.

I just liked him. It's just that it probably was a crush or whatever you want to call it. But I just know I liked him a lot, but I think it was more that he liked me, and wanted to be serious, and then I didn't want to say no or disappoint him. Isn't that terrible? It was just get married and we bought a house right away. So there was something that I didn't have to like really strive for. I mean, he went into the service

shortly after we were married for a short time, and I lived at home. I hated that. And I was pregnant too. And I slept in the bed with my mother. Oh, I just hated that period.

Well, it was just about maybe three months or so. Four months. But we were able to get a house, because John was very conscientious about spending money. We had enough money like for a down payment for a house, so we just had that, and I got pregnant right away so there was my life all laid out for me.

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John always was a very conscientious person when it comes to working; he'd never miss work, too. There was always a steady paycheck. I can truthfully say I never had to worry about money, not that we had a lot, but the fact that he worked, and our bills were always paid on time, there was always food, always clothing.

He worked for Bell Telephone and then he worked for AT&T. So that's his whole work history right there, he just worked for one company. At that time he and many other men, they had one job for life.

He was a good worker, he was always well thought of, I think, by his bosses because he would produce work. I mean some men can work eight hours and do half the amount of work that someone else would do. But he's a very conscientious worker. And he would never think of not going to work and loafing or not doing his best.

John has been work oriented all his life, so he just, to this day he doesn't really know how to relax and enjoy himself. And me, dutiful little girl that I am, I just fell into the role of being a mother and a wife and staying home and taking care of kids, and then

the next one came along and I just didn't think anything of it, I mean, it was just natural.

Just continue to do what you normally would do -- take care of your family.

Betty, like the other "girls," had little knowledge about sexuality and practically no knowledge about birth control when she got married. Her mother-in-law gave her unexpected advice after the birth of her third child. Betty and John had three children -- two of whom their worlds have revolved around and one of whom was and is until today almost a complete unknown quantity to her and John.

Well, I got pregnant immediately. I had no planning birth control at all. Not until my third child did I seriously go to Planned Parenthood. Well before Barry was born, we were practicing, I think what you call the rhythm, trying to avoid those few days that you think you're going to get pregnant, and I think I got pregnant with Barry somehow. We don't know how it happened. So after that, my mother-in-law says, "You better go to Planned Parenthood." My mother didn't say it, my mother-in-law said that. So I went. Got that stupid diaphragm thing.

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I try to be considerate of other people. And I hope that that has had some influence on at least John and Beth. But Barry, he's another case. But I know Beth definitely does. She very much has absorbed some of my qualities. I don't know if that's good or bad. But I'll say things to her like, "Beth, you're stressing yourself out, or you're saying yes when you shouldn't be," and she'll say, "Mom, where did I learn that?" She means from me. So what can I say?

Johnny is very, I like Johnny. He's my firstborn, which they're the ones that try to please the most, I think. And he's always tried to be the kind of person we want him to be, and he has been. He's a hard worker. He's very involved and he loves his family,

his children. He's involved with the girls, even though he has two girls. He is involved with what they do. He's conscientious. He's helpful around the house. When he first married, and I would hear that he's doing the dishes or that he was cleaning or something, I thought to myself, "Hmm. He shouldn't be doing that." But then I changed my attitude about that. That's his way of helping. And he doesn't mind it. He pitches right in and helps do whatever is necessary. He cooks, he bakes, gets the girls, puts them to bed, and he does a lot of things that the men don't do. So my son is teaching me some new things. And Beth too. They made me change my thinking.

Betty went back into the work world after her children entered high school. She felt challenged by the work and found the change of pace what she needed. She was proud of what she was able to accomplish going back in the work force as a bookkeeper after so many years of not working outside the home.

The first job I had after I was married was working for Singer Sewing Machines and that came about because the lady who managed a shop up here knew my son John from high school, and I was in the store one day and I think she just said, "Do you want a job?" And I thought, "Oh, a job! How nice! I'm going to go and work!" And I think I worked there for a while at Kenmawr and then I worked at the Singer store in Crafton. Then where else did I go after that? That was when the kids were in school. Johnny was still in high school. So that was just a little extra money that probably I spent on groceries or something.

It was a challenge, not that it was brain surgery or anything, but to me it was learning something new and doing the job. At Singer I did book work and I also waited on customers. So it was a change, and it was time for that.

It was difficult for Betty to talk about her third child, Barry, a child who has taught her the meaning of the word "enabler"—a child who has left her with no more tears to cry.

I just had kids and I had to learn how to take care of them. I knew I wanted them to be good children and honest and hard working. You try to teach them by example. If they did something wrong, of course they got lectured, and, and whatever punishment was appropriate. They just knew that we wouldn't allow it, we wouldn't permit it, certain behavior. Which has worked well for John and Beth, but Barry is like another. . .

We feel that we were naive parents. We want to say he fell into the wrong crowd, but looking back, we were so stupid. I'm sure that he was in this very room sitting by that window smoking pot with a friend, and I came in and they sort of y'know. . . . And I just, like they weren't doing anything . . . not that I knew they were smoking, but I should have been smart enough to know, something's odd here. But I suppose like most parents, you don't want to see things or you don't want to know things. But gradually we realized that he must be smoking marijuana. And he just didn't have the ambition like say that John had. He was smart, I mean, he's not dumb. But he had this attitude that we should do for him. And so we put up with about . . . I would say at least 15 years of unacceptable behavior.

He had opportunities to go to school, he did go to Penn State for. . . I don't even know if he lasted a year. You might as well say he got thrown out. And then he started in the youth group of the Civil Air Patrol. Got thrown out of there. Went to the Air Force, got thrown out of there for misconduct.

I've never seen any signs of anything more serious than marijuana. If he was into anything more heavy, we would have known it because he would have been stealing all kinds of stuff out of the house. But he didn't. Although he would take money that he thought he could get away with. Money laying around or something like that. After the Air Force, then he came back, and we were truthful, we were here to try to straighten him out. He'd get jobs, and hold them for, hmm, three months, six months, lose it.

I don't think he wants to work. I think he wants to not work. He wants everything, he wants a car, he wants clothes, he wants a nice apartment, but he doesn't want to work. And he gets a job for a short amount of time, and it's always the same story, he gets his job, menial jobs, low paying jobs, but, "Oh, the manager said I'm the best worker they've had in months" and this and that, and then he tells me a story about somebody else that got fired, and but he's. . . they really like him. Then, a matter of time, few weeks or whatever, a month, and then he'll say something like, "Yeah, the manager's really picking on me. I didn't do nothing wrong. I don't know why he's mad." Then a couple jobs he lost over discrepancies, money missing.

And we were, I found out later, the terminology is "enablers." We just kept believing what he was telling us. And we'd let him stay here. And I'd run him everywhere because we wouldn't give him a car, we wouldn't let him drive our cars, he wasn't insured. We just wouldn't let him have a car, so dummy Mommy here would get up like at six o'clock and take him if he was working somewhere, take him, pick him up, then I'd bring him home from work and he'd say, "Can you swing by West Park? Or, can

you take me over here?" And I was doing it, like a dummy. John and I, we were both doing it.

I just think he was born that way, maybe that's what I want to think, because we say, we don't think we did anything different with him. He wasn't given any more privileges than the other kids. He had the same opportunities. I don't know how to explain it. He has been given several opportunities to better his life. And he is not interested, or he's not committed or he doesn't have this drive. To me he would sponge off of us, let's just say we let him live here, and didn't care if he worked or whatever. He doesn't have the self-discipline or I don't know the word I need to say? He wouldn't feel guilty. He would sponge here as long as we would let him. And when I think we finally realized that he could do that and not feel the least bit guilty or remorse, then we said we're not going to support him all our life.

Truthfully I don't have any feelings left. It's like he's our son, but it's like he doesn't exist. And when he calls or something, it's like, oh, Barry called. It's not like, oh, our son called, our long lost son, and what's he doing now, and I, I have ceased worrying about his day-to-day life. We have said, John and I have said, that we wouldn't be surprised if something would happen to him, because of his association with people that we wouldn't have anything to do with, but that's the type of people that he associates with. So right now, I just feel like an emptiness where he's concerned. And it's sad, I mean, he's my son. I just don't understand, because Beth and John both have strong work ethics. They have self-pride and like I said, they would never think of doing

what he has done. And I don't understand how he's like that. Or how he got to be like that. But I truthfully don't feel any guilt that I did something wrong.

Betty described the simple pleasures she has been able to create in her life today. She expressed a new determination to enjoy her life and to talk back to the voice inside her head that tells her she is not worth anything. She wants to leave a different legacy to her grandchildren.

I just drove the girls crazy in Club with pictures of Meghan, she was the first grandchild in Club. Of course I thought she was the most beautiful thing. I just enjoy all my grandchildren and doing what I can do to help in any way that I can, whether it be baby-sitting. I find myself like with Meghan and Caitlin when they come, I try to involve them in something in the kitchen, cooking, or baking. If I'm making dough, I give them a piece of dough to work, or, I taught them how to crack eggs. And I think to myself, "If nothing else, I hope they remember that I taught them how to crack eggs." Y'know, it's nothing big, but it's, it's just a little part of me.

And just watching them grow and seeing their personalities come out. It's been fulfilling. I think our lives would really be empty if the grandchildren weren't here. It's like the way things are meant to be, are supposed to be, like this whole cycle with the kids, so it's been very enjoyable.

* * * *

When I was young, I didn't have any expectations. I just went with the flow, whatever happened to me happened. I can never say I wanted to be a writer, I wanted to go to college. But then I got married, I had kids, and I didn't have any aspirations to do anything specific. Looking back, of course I would have maybe done things differently.

I would have been more assertive. But see, I always felt that I wasn't entitled to any special considerations of any kind. That I wasn't, I don't know, worthy or however you want to say it. I just didn't expect a lot for myself. So whatever I got I was grateful for. I thought it was maybe a big deal or something. But I didn't know enough to say, "Hey, I have feelings, I want some consideration for my feelings brought into this situation." I just didn't do that.

Now I say to myself, I'm not going to let opportunities go by. I'm not going to, I'm not going to sit home and not do things, because hey, I'm 58 years old. How much longer do I have? I already regret a lot of things in my life, so I sort of have this determination that I'm not going to waste the rest of my life.

I have finally realized that I deserve to have some considerations, to have my thoughts or my feelings heard. I feel that finally maybe I deserve it. I lived my life thinking that I wasn't worthy or I didn't deserve to have anybody consider my feelings about things. And even if it's little things, I'm going to do my best to make it happen.

I'm not talking anything big, like starting any kind of a career, that's not in my mind at all. I don't want to go out into the work force and prove anything to anybody. I just want to do what I want to do without any disapproval. I think I've come a long way. I don't know exactly where the change came about, but I think it finally dawned on me that I've been a horse's ass for a long time. And I deserve better. And I'm surprised at myself that I have arrived at that point in my life.

So I think I've progressed some. I'm happy with that. I don't feel like I'm being deprived of anything, any major accomplishments that I want to do, because I truthfully

don't have any major accomplishments. I just want to be helpful when I can be, I want to be available to the kids and grandchildren when they need me and then I want to enjoy myself some too. That's all I want. Take advantage of any opportunities that come up. That's all.

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When I'm grocery shopping or I'm shopping, and I see other couples, and he's talking to the wife in a derogatory manner, it's all I can do not to say, "Hey lady, you don't have to take that shit." Because that's the way I feel. And I feel sorry for the woman, because I figure she's living this life. She's been suppressed. I feel bad for her because I know that that person is living this suppressed lifestyle and the man is a bully.

Betty's brother, Cream, operates a small catering business out of the old family home on Alexander Street. Sometimes Betty helps him with catering jobs. She spoke about what it was like for her to be cooking in her mother's old kitchen.

It gives me a lot of satisfaction. I love to go down the house and cook the cabbage, and we make it all down there. The kitchen is part disaster, part my mother's still there. Because the stove is there, the refrigerator, the old buffet with the drawer, where underneath the sliding part are all treasures in there that you can look through.

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Like the other "girls," Betty has found the Club a reliable and dependable part of her life. Club and her women friends are central, not peripheral, to her growth. She described the Club as her therapy, and she reflected on what that means.

If someone were to say to me, where are you going tonight, and I say, "Well, I'm going to my Girls' Club," and they'll say, well, "What's that. . . do you play cards?"

And I say, "No, we don't play cards, we talk and eat." Those are the two things that we do. And if they're interested, if I feel they're interested, then I tell them, we've been meeting for 40 years, and generally they can't believe it.

It's hard to say what all the years have meant to us, to me, just having friends that are just so, what's the word I want, not dependable -- reliable, they're *there*. They're like rocks, they're, they're always there. And you can call any one of them up.

It's just such a wonderful feeling to know that I can call almost anyone of them and just say, "Oh, I'm having such a rotten day." And tell them about it, and they listen and they say, "I know what you're going through," and give you a few words of encouragement. And the same on this end, like if I call someone -- Anne or Dolores or Joanne -- and they're having a bad day, just hit them at the wrong time and they tell you a little bit about what's going on and you're there to just give the few words of encouragement in the hope that it helps. Not that we're doctors or psychiatrists, we're friends, that's all I can say, we're just friends there to support each other . . . although I think we've saved a lot of money on psychiatrists.

This is our therapy group. We call it our therapy group. Because we go and we don't get into anything real heavy. But if someone brings up something, anything about one of their children or something, we all put our two cents in and it goes around, we all say a few words of encouragement or whatever.

And sometimes it helps and makes the person relax and laugh and see that it's not such a big problem that maybe that they think it is. So in that way, I think being able to

just call and talk to anybody, any of them. . . Well I think I had mentioned this to you before, that there within our group, there are smaller groups.

Betty talked about the importance of being with people who are facing the same life issues, such as husbands going into early retirement. For her, like other women in the Club, shared practical experience is invaluable because you cannot know someone else's spot until you've stood in it. Betty also talked about the way she and others used humor in the group.

I think lately with life changes, with us getting older and our husbands retiring, and health problems, I think it's brought us closer together really. Because all the years we've been together, it's been more of a fun thing. We meet once a month, we talk, we eat, we laugh, we talk about old times, talk about school, who we saw in the grocery store, and how they looked and it's been that way for a lot of years.

But especially the last five years on my part, and maybe even the last 10 years, I think our lives have just gotten more serious, if you know what I mean, more complicated. And so it's drawn us closer together and I mean, we still look forward to going to Club and talking and laughing and eating, what are you having, y'know. . .that's the big thing. Dolores will call me, and she'll say, "What are you serving?" And Joanne will say, "Is that all low calorie," and I'll go, "Yeah!"

But I think lately it's taken on a more serious tone because the majority of our husbands have retired. And it's created changes in our lives. And a lot of it frustrating, like the kind you want to just say, "Oh! I was so frustrated today, or we're arguing or we don't agree on anything." I'm laughing now, but it's not funny a lot of the times.

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It's like the first 30 years of our Club, they're there and pleasant memories and stuff, but the last 10 years, it's become more intense or deepened our awareness of other situations. But maybe because these situations have come up in the last 10 years with the different retirements and different things that have happened, that have made people react the way that they're reacting. They're being more forceful and more standing up for themselves type thing.

All I can say is, I think I've become stronger in that way. And the fact that I have the girls to confide in, even tell a funny story, like my paint story, everyone laughs and gets a big kick of it. But in a way what I'm saying is, "He does some really stupid things, and it really drives me crazy," is what I'm trying to tell you. And I think they've gotten it, because they'll say, "Well, what's he doing now?" And I'll say, "Oh, you wouldn't believe it. He's doing this now, he's doing that now." And they laugh and they know.

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In terms of the girls, I think we've all gone through a metamorphosis. Dolores has. She tells Steve, "Hey, I work. You have to help clean around here." Whereas years ago, she would never have done that. And Donna works, Donna has a very good job. But I think she's always been a little more assertive, maybe a little more verbal. She's a go getter. She's very ambitious and very hard working and she just does things. So that's what makes me think that.

I certainly don't profess to know everything that goes on in each one of the girls' houses. We know a little bit of everybody. But if someone has a problem, she'll talk

about it, but it's more like she's relaying a story. And I do the same thing. We'll tell a story, they turn out to be funny, We laugh about it

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I'm hoping that by being there for Anna, and she for me, we're supporting each other. . . She sort of makes a joke of it, but at the same time, it's suffocating her. So the light airy parts she can relay at Club, but then the more deep feelings we can talk. In fact, a lot of times I'll pick her from Club first and she'll tell me something, and then the same thing will reverse on the way home, I'll bring her home last after I drop somebody else off, and then we get a chance to talk a little more. It's like a little Club within the Club.

I need to tell her some things and she needs to tell me. She needs to tell somebody the things that are frustrating the hell out of her. When you have somewhat the same type of problem as somebody else has, you can understand more. But we have something in common, more so now than we did years ago. Not that I didn't want to be closer years ago, but we didn't have that connection that we do now.

Betty articulated the importance of timing a communication when you are trying to be supportive. For her, a more direct communication style would be disrespectful and ineffective. She also explained that there are some things that none of the "girls" want to talk about at Club.

There are times when one of the girls will say she just can't talk about it, and she'll say, "I can't talk about it," so we don't talk about it. We let it drop until another time when she's more receptive. We've learned when to talk and when not to talk. Because if you don't want to hear what someone's telling you, you're just going to tune them out anyway, so I think we've learned that much anyway.

Same with me, they call me and I'm upset about something and, in fact, I know just recently Dolores says, or Joanne, "Do you want to talk about it?" I says, "No. Not right now." And other times I'll talk and cry. And so if I says, "No, I don't want to talk about it right now," they'll say, "Okay." And that's good too, because I don't feel compelled to talk, if I don't want to talk right now. I don't feel like that I have to.

So I think in that way, I know I've become more. . . I don't want to say thoughtful, but thinking more of the other girls, like what Patti's going through with her mom and frustrations there, and I'll think to call her up and say, "How you doing today?" Whereas maybe years ago, I wouldn't have. I don't know. Hopefully what I've learned is when to try to be supportive and when just to lay back.

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I think we've all learned to read between the lines of what people say and what they don't say. I know over the last few years, I'm sure we've said things, and we'll laugh and then say, "Oh, we never would talk like that years ago!" I'm sure I relate some stories that have made them think that maybe I've changed. And maybe the little seed was planted by listening to the other girls go through their little problems or situations, and how they've handled them

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Have you ever like listened to a group of women talk explicitly about sex? It's the most disgusting thing, and we've never done that. I have to say that we've been very. . . the only word I can think of is thoughtful, but that's not the word I want, considerate. Respectful. Because that's a private, real private part of women's lives. I

mean, we've made jokes about going home and "Oh, so and so's waiting up for you," just little things like that, but we've never ever ever discussed anything intimate. And that's the way you want it, because when you tell somebody really something intimate, then the next time you see them, that's all that comes back into your head. That's what you remember. And, none of us have ever done that in Club.

Betty had a particularly wonderful evening at the Rox High fortieth class reunion. She looked and felt great and the "girls" all noticed a joyful change in her demeanor. She talked about sharing that wonderful evening with her old high school girl friends.

It's not that the dress was anything special, it wasn't, it was just like I felt so free and so, like I didn't have to worry about what I looked like. I didn't have to worry about standing straight and pulling my stomach in, I was totally comfortable. And, I felt totally free that night. Totally free.

Dolores said to me, "You were flying. Your feet never touched the ground." I says, "Yeah." I says, "That's exactly the way I felt." She says, "Y'know," she says, "you were radiant. Radiant." I says, "I don't know, I just was flitting around like a butterfly." The girls all were smiling and looking at me. It's like they knew I didn't have to worry about anybody. Except myself.

4.5 Donna

“It’s an investment.”

Donna’s story was different from the other “girls” in several significant ways. She is the only member of the Girls’ Club whose parents were born in the United States. I remember coming across the name “Hufnagel” in my historical review of the early German settlers in the McKees Rocks area. According to these accounts, the Hufnagels played a prominent role in both farming and industrial development of McKees Rocks.¹¹

Donna did not follow the typical 1950s path that most Rox girls took. She was the only one of the “girls” who had worked throughout her entire married life. Except for about 18 months after the birth of her second child, Donna worked her whole married life.

In addition to working outside the home while most other women in McKees Rocks made the choice to stay at home, Donna defied other gender stereotypes. She took over the management of her family household when other women deferred -- or appeared to defer -- to their husbands. And she took an active role in community-based volunteer work at a time when mostly middle-class women dominated those positions.

Before our interview started, she showed me a Junior Achievement Leadership Award plaque that she had just been given that afternoon at an awards luncheon. I asked her how Bobbie, her ex-steelworker husband, responded to this and other public acknowledgments that she has recently received as a professional and as a community volunteer. She replied that he might say, “What’s this?” but that mostly he would ignore

it. She reflected that deep down, he probably resented her “a little bit” because her life seemed to be on an upswing while his was on a downswing.

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Donna spoke about the early Hufnagel settlement of McKees Rocks. Her descriptions of her ancestors were more colorful than those I found in the local community histories. Her great-grandfather, Nicholas, was the son of Lorenz Hufnagel, one of the original German settlers in the McKees Rocks area.

We could date our family back to like the 1700s when they came over from Germany. They settled all through the land around Chartiers Creek. In those days, they had riverboats. In fact, that’s how my great-grandfather Nicholas Hufnagel died. He was gambling on one of those riverboats, and I don’t know if was cheating or what, but he dove into the river and it was cold and during the winter months. He got pneumonia and eventually he died from that.

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My grandfather Ulrich lived there on that Creek Road land and he had a big huge three story house. Now when he was younger, they had money because they had like 17 oil wells pumping down on Creek Road, but they weren’t good money managers. They squandered their money. They’d buy a whole beer wagon full and they had every freeloader in McKees Rocks sitting out at the farm all the time.

My grandfather owned most of the property on the whole road. So he would sell off little pieces of property to his children. There was all Hufnagels that lived there and they called it Hufty’s Hollow; that’s the nickname for Hufnagels. And he had a beautiful house down there; it had handmade banisters and everything.

Donna identified her family and her roots as “farmers.” Her parents met at Pittsburgh’s truck farmers’ market. Donna described the experience of growing up in a family farm economy where work united everyone.

My mother is from Myrtle Beach, South Carolina. She was raised there and she was, oh I guess, 15 or 16, when her father got sick. He had a brain tumor. They moved to Pittsburgh -- actually to Butler -- with the relatives for him. And they were all farmers. So they would go into Pittsburgh and sell their produce at the Farmer’s Market right along the river. And my father’s family were big truck farmers and they would grow all kind of vegetables. They’d get all their produce together and they would take it into the Farmer’s Market to sell. And lo and behold, that’s where my mother and father met one time. Down in Pittsburgh, selling their vegetables.

My mother could work rings around anyone out in the garden. Picking green beans and canning. And she worked in a little grocery store up at the Five Point by the Windgap Bridge. She always did work. My father worked in the mill, the three shifts.

Out of the clan, nobody would go to Pittsburgh when they needed seeds or when my grandmother needed something. My mother would get her one blue suit on and get on the bus and go to Pittsburgh. That was her job. I think she was more in tune with things.

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We all worked. We always had to work in the fields. Hoeing, weeding, and we’re all German, so it was all organized and I have those skills till today. We had tractors, we had a horse, and needless to say, we were all pretty dirty all the time from being around the dirt.

But they had a system. The older people would go along and drop the plants after the row was made. The young kids would have to come along and plant, and while they were growing, we'd have to weed -- after school, mind you, and all summer. We'd go up to the farm -- that's what we called my grandfather's big house -- and work in the garden. The older kids would weed and you'd have to put the weeds in piles along the path. And the younger kids would come and pick the weeds and carry them to the truck. And then my father and my grandfather had pigs. They would feed weeds to the pigs.

We didn't do anything but work. Actually, my kids laugh. They say it was child labor. But we had fun. We didn't know any better and then when the stuff was ready, we'd pick the broccoli, beets, radishes, cucumbers and we would clean it. We'd sit around my grandfather's big front yard and he had a knife you'd have to use to clean the different vegetables and put them in chip baskets and then that's when they'd take it up to Smallman Street and sell it to the dealers up there.

And then my grandmother, the poor thing, she was married at 14, had 13 children, so it was a huge family. She would cook for everybody and we'd eat in shifts. And in those days, the adults ate first. And then the kids went. And I can remember sitting there waiting, looking in, wanting to eat, and we'd have to wait, we'd be afraid that there wouldn't be anything left. But we never had desserts. It was strictly meat, potatoes, soup, that type of thing. I think that's how I developed my sweet tooth. I never had anything sweet.

My grandmother's name was Lorina, Lorina Bradley. She was a twin. She hardly ever left the house. She stayed in all the time washing and cooking. And I found out later

years, she was drinking. She would drink wine. They'd make homemade wine and she'd sit and drink the wine too. She died in her 60s, but my grandfather lived into his 90s -- in that old house down there by himself.

Everybody, all his daughters and sons, would come bringing food, helping cook and so forth. Now the boys, they raised cows and they sold the milk and they sold eggs, and they had chickens. My dad and his brothers, they could rip any truck apart, machinery, and put it back together. None of them were educated. In fact, my father went to, I think, fifth grade. Then he was too big to sit in school, he had to be out working in the fields. None of his brothers or sisters graduated from high school. They didn't push education then.

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Growing up with all my cousins along that road, we were like a clique, we had our own gang. My grandfather would give us all maybe a nickel or quarter so we could go to the movies. And we would go in our gang, Now picture 20 or 25 kids together walking down the Rox. Dirty, we never washed our face or anything and we'd go to the movies.

Every funeral home, we'd line up and walk in, we were all Catholics and we went to the Catholic school. We'd fold our hands and we'd march in like a class up to the casket, get a holy card, and say a prayer. Just imagine how many people come up to us and ask us who we were and did we know the person. No! We were just stopping in!

One of my older cousins, Kathy, was like the ringleader. She'd line us up and we'd do anything she say. We'd have a parade. Go marching down through the Rox. We made our own fun.

I consider myself a hard worker and there's no shame in that. I like to paint, I like to clean, but I've worked all my life. I've worked since Robert was three months old, and he's going to be 39, so . . . I guess that's where I got my family values, from growing up like that. I really loved working in the dirt, and you can see, I have a lot of flower beds around here, and I still do work in the yard, and my daughter is a fanatic. She's constantly planting, and digging and doing that type of thing.

Donna recalled the influence of one particular woman in her life, her Aunt Bess. Her aunt was a woman with many skills – someone who could keep a group of kids active and get work done at the same time. Donna admired her aunt's creativity, her natural business sense; she adopted her as a role model.

All the while I was in high school and even younger, I would go up to my Aunt Bess up to her farm, up at Cochranon. We would pick berries, she had wild berries that grew up there. There would be two or three of us, plus her three kids, which wasn't easy to take that many kids with you all summer. We would get up early in the morning before the sun was hot, I'd say seven thirty, eight o'clock, eat breakfast and then go over to the berry field. We had these coffee cans with strings around our neck and we'd have contests, me and my cousin Kathy, to see who could pick a can full the fastest. We'd time it and everything. We kind of made it a game..

We would pick those berries, the blueberries and then blackberries. And every second or third day, you'd come home and have to sort through them and put them in nice berry boxes. And we'd take them to town to Franklin, into Cochranon, and sell them door to door.

We'd practice at night, and we'd knock on the door, we'd role play, y'know. We'd knock on the door and say, "Good morning, ma'am, would you like to buy some nice fresh berries?" We were selling those berries faster than you could think. And we were learning sales and confidence and everything. My Aunt Bess made everything fun and was always thinking of things for us to do and encourage us. Then she'd feed us these wonderful breakfasts and tell us to talk about our adventures

One of the boys that would come with us stuttered, and he couldn't get out, w-w-w-would you l-l-like to. . . so they put a sign around his neck. "Fresh Berries!"

In high school Donna was a basketball player, a majorette, and a class officer. After graduation, her parents did not support her idea of becoming a nurse, so she went to work. She was the first of the "girls" to marry and by 21, she had two small children.

My mother, she didn't care, if you got a B or a C or a A, that was fine with her. My dad never even saw a report card. You kind of just went your own way. I know when I was graduating, I wanted to go to be a nurse, and they wouldn't let me. I had to get a job. They said, "You're not cleaning any bedpans." I thought I would have been a good nurse. I'm compassionate, and I do a lot of volunteer work. I like to take care of people, but no, that wasn't it. Their big thing was getting you out and getting a job. And then always bring your money home. I gave my mother my pay until I got married.

Your parents -- they just told you what to do and you did it. We never talked back or we never really doubted what they said. They were god and that was it. And my father was the big boss. Unlike today, most women are head of the families, me included.

But anyway, we didn't even think of going to school or anything like that. That,

to me, that was just for the rich kids, and people like that. But I just thought that I would like being a nurse, and no, they quenched that fast. But, I never had any regrets about it. I've taken classes and gone to school, now that I'm married and everything, and I like it.

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I think my first job was Bell Telephone, I made \$37.50 a week. It was far. I had to go to Dormont and East Liberty and all around on the streetcar and I get carsick. So I decided to quit and instead of letting me quit, Bell Telephone gave me a job downtown as a long distance operator till I got married. Then I got a job at Southwest Steel. They needed a switchboard operator and so my aunt worked in an office there and she called and I got hired.

And that was in the Grant Building and then while I was there, working, I met my husband and we courted and got married. And then I worked there until I was pregnant and then had my babies and then went back again. I was only off maybe a year and a half and then went right back to work, so it worked out pretty good for me. And then I got a job at the Hilton when it first opened in 1959 being a telephone operator.

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As a young woman in the fifties, the responsibility for controlling sexual situations was squarely on women's shoulders. Like most of her peers, Donna's knowledge of sexuality was minimal, and her models for how men and women related to one another were limited to the family. When she met Bobbie and fell in love, she made the best decisions she could with the resources she had available.

Bobbie went to Stowe and he was from Presston. I never even really knew Presston was down there. I knew the Bottoms and I knew where the Bottoms was, but I never heard of Presston.

Bobbie was very handsome. Now I know looks are only skin deep. I saw him at these street fairs they used to have. I was engaged to someone else at the time, a boy I went to high school with, but when we got out of high school, then I just found out that wasn't the right thing for me.

Then I met Bob and I fell in love with him right away. He was a good looking fella. He still is. He was so different from my brothers and my relatives. He's Ukrainian.

In our house, the house was women's work and the men didn't do the dishes, didn't do anything. Bob would come and I'd have to do dishes and he'd dry them for me and the guys would say, "Oh boy, what a sissy," and all this and that. But he did that at home. In our culture, we never heard of it. But in his culture, they all did it.

And it's the thing to do. You should share the responsibilities. Now, he cleans for me today and many a day he'd be cleaning and I'd be out cutting the grass.

We were only 18. We were young when we got married. It was stupid, but no one prepared us.

All I knew was my mom and she waited on my dad hand and foot. Plus when I met Bob, then I got pregnant and had to get married, but it worked out fine for us. Because we were really in love, and well, we still are, after 39 years. Things calm down, y'know. But it didn't affect anything.

But I didn't talk about it then. I never. I didn't tell my mother but I think she knew. And she wouldn't say beans. And I kind of resent that she didn't help me,

y'know? My mother is not real open. She was raised real southern Baptist, real strict, you never talked about anything.

Nothing! No one, no one ever talked about it. In fact, we still don't talk about it at Girls' Club. You just had to kind of learn on your own. Which now the kids know a lot more. We didn't know about birth control or anything or nothing! Just kind of learn on your own.

Anne was my best friend at that time. I didn't even tell her. She was in my wedding. I'll show you the pictures. But we never, we didn't tell anyone. And luckily I was skinny. For a while.

I remember when I was getting married, that day, my mother says, well, "The only advice I could give you is give it to him whenever he wants it." Yeah, so I mean that was her sex advice to me.

My brother and his wife had to get married, so I guess it wasn't a big deal and a lot of my cousins did. In fact, a lot of my aunts did, so I guess it just really wasn't a big disgrace or anything. In fact, I found out years later that my mother-in-law had to get married. One of the relatives told me. I never even figured it out, thinking when she got married or when Bob was born or anything.

When Donna went back to work in 1959, job discrimination against women with children was blatant. In spite of the obstacles, she began a steady succession of jobs. She was able to go to work because Bob's shift schedule at the mill allowed him to help with the children at home. When he could not, his mother and father helped. These extended family supports allowed Donna to continue to work. In almost every job she held, a supervisor or co-worker noticed her outstanding qualities and abilities.

When Leslie and Bob were young, I went back to work just doing whatever I could. When I first went back to work, there were not too many women with children. I didn't tell the employer that I had children because in those days, they wouldn't hire you if you had any children. So I lied and said I didn't. So here I'm working there and how to "fess up" that you have two children.

But my boss, who I became good friends with, Miss Allen, she said, "Well, hey as long as you have someone to take care of them." So it worked out well for me. Because Bob was daylight then in the mill, eight to four, and I worked five to one at night. Then if he would have to swing, my father-in-law or my mother-in-law would watch the babies. And then once Leslie went to school, I got a daytime job, and my mother-in-law, she watched the kids all those years and cooked supper for us and everything, so she was good to us. Because it was like her job.

When Jon was a baby, I went back to work down at Fesco, which was old Federal Enamel and Stamping, down at the Rox. I was a switchboard operator there, and then I worked in the stainless steel sink department, taking orders and this and that, like an order entry clerk. I worked there six or seven years and then while I quit there and went to Westinghouse Air Break, as a secretary. Oh, let me backtrack. While I was Fesco, they had a strike, and I went to school for six months and brushed up on my shorthand and typing and skills.

It worked out good for me. I went to Miss Henry's Business School out in Edgewood. It was a private school for the state and the boss down there at Fesco at the

time was a Jewish fellow and he looked it up for me and said I could start in right away and it was nothing, but like a business school.

Actually it was the boss' idea. He said to me, "If you're going to work, why don't you go to school and make the most money that you can." And I thought, "Well, gee, that makes sense." So I did, and I've done well by it.

I wanted to learn. I had a record and I'd be practicing at night after the kids went to bed. And it worked out well for me.

As Donna's children grew, being a good mother was central to her. She actively participated in all parts of their school and recreational activities. She also became more involved in community work. And all the while, she kept on working.

I always cooked the meal. We always had home cooked meals. We never went fast foods or anything like that. I learned to cook on the weekend, two or three meals, and now I'll cook one big thing, say a roast and have it for two days. But my husband likes to cook also so lately, I'd say the last four or five years, since he retired, he'll go in spurts. He'll cook a lot and I'll come home and the meal will be ready. But a lot of times, I don't know exactly what time I'm coming home, and that makes him mad, and I thought to myself, "Oh! all those years that I sat here waiting for him," then we'd finally just start eating without him.

At first, when I was raising my first two kids, my husband was never around. Everybody thought I was a widow with two kids. Now my husband Bob has watched Leslie's baby since she was three months old. Which floored us.

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I always had to rush, because besides working, my kids were always involved in sports. They were on every team you could think of. There's uniforms to wash, you have to take them to the events, and I never, Bob and I never missed a game. We always went with them to the games. The boys went to St. Malachy's. They played basketball and there's like thousands of games so we went to all the games. Both my boys played college football. We never missed a college football game. One went for four years and the other one went four years. So there was eight years of trips that we took. I was almost in the poor house.

We never said to the children, "Are you going?" It was always, "What school are you going to?" They knew all from the beginning that they're going. And they wanted to go. They enjoyed that and they had nice college careers, and did their partying and all that good stuff, now they're settled down.

Bob went to Cornell University in New York and he's an electrical engineer. Jon went to the University of Virginia, down in Charlottesville and he's an economics major. Leslie went to the University of West Virginia. She's a chemical engineer and she does better than the boys. She has a very nice job. She heads up a sales force; she sells chemicals for Alcoa, the bauxites. She's mostly in the separations group. She's very successful because she's good with people. She's a good people person.

I've been a volunteer, a fund-raiser at Ohio Valley Hospital for 30 some years. One of the neighbors here in 1968 asked me and I just thought it was great. In those days, you'd get all dressed up and go to a meeting and everything was by the rules. I started

getting into things, and I was only in there I think three years and I was the president of it. So I really adapted to it quite fast.

And then we got our kids into it. My daughter Leslie and my daughter-in-law Kim, we all do work at the hospital. It's called the Junior Aide Society. We would do events, fund raisers, like a fashion show and a salad luncheon.

I like the challenge of making money and having a good event and just doing good for the hospital. I guess just the respect of the community, I like doing community work. Of course, I was president of the Boy's Boosters for nine years. And I started the Mother's Club up here at the Little League field, and once people know you do stuff like they, they get in touch with you. But I like doing it. I guess I'm a good organizer.

Well, with all this volunteer work, it really worked out good for me, because my boss thought that I had really good people skills and he asked me if I wanted to do this events planner job for other marketing communications groups. Now I do events that are three and four hundred thousand dollars, and it's just putting on a big party. And somebody else is paying for all the details. In fact, I was gone on three events in May. I go out and pick out the suite, pick the food, the drinks, and then go there when they have the event and be like a hostess. Talking to the people and putting them with the right person that they should be talking to. It's fun!

Donna talked about her job at one of Pittsburgh's and the country's biggest chemical companies. She contrasted how her work life over the last 20 years had expanded, while her husband's work in the mills had virtually disappeared. While Donna understood the economic implications of the Women's Liberation Movement, she did not feel any formal association with the movement. Donna's working life plus her own innate sense of independence contributed to her feeling self-sufficient.

I always worked for upper management which I was proud of because it was just the types of jobs that I applied for. And got them.

I did work 10 years for an oil company that dug oil wells and I got to go out on the sites a couple of time and see the oil wells drilling. That was quite interesting. I liked that and I'd probably still be there, but in '87, this Appalachian region, the economic values went really down on the oil fields, and they lost a lot of the offices. The economy went down.

I was really nervous because here I was 49 years old, and I thought, who's going to hire me? Well, I worked temp for two weeks for two directors and they hired me, so I hit it lucky. I was proud of myself because I typed about 93 words a minute on the computer and you have to type 45 to pass, but I liked doing it.

I work for like a self-directed work team. In my communications group there's three people. And we all do our own work. Now I'm doing all the volunteer training for the United Way at Bayer this year. And I just ran a bowl-a-thon for Junior Achievement. And rounded up 20 teams to bowl. I like doing it. I do a lot of computer work, on the Internet, corresponding for our division. We're in the process of making a home page and I just got assigned it. Now in March, I went on my own to Washington, D.C. and did a congressional product show. So I've done several trade shows. Now I'm going to Philadelphia in September and do a wire and cable trade show by myself. Usually the big events like a grand opening or something, the whole group of us work on it. But it's fun.

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I'm proud of myself. I mean no formal education. I did go to real estate school for three months and got my real estate license. I've taken a lot of courses over the years, but not. . . . I should've done what Dolores did, just kept at it and got my degree. But oh, I don't really regret that I didn't do that.

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Bob worked all his life at U.S. Steel down in the Bottoms, Wheel and Axle Division. So he worked there 30 years, and they closed. He was only 48 and he retired and he had his pension and everything. So he was off for 10 years, not doing anything, but just helping around the house, being the go-fer with the kids, watching the baby, helping with the store and different things. He liked it and I didn't care because I had always, y'know, worked.

When the mill closed, it wasn't so much the work that Bob missed. It was all of his friends. He always worked and ran the credit union down there and it was busy, and he's been going through a bad time, the last three or four years. He's lost like five or six of his good friends dying, from heart attacks. He had one that committed suicide. He went into the creek and drowned. I notice as he gets old now, he cries a little bit more. He never would before but now he does. He just feels so bad about different things.

My husband thinks it was the unions and the big companies. Now I'm against the unions, me and the kids, but Bob is still for it. He's a union person. And we just thought it was the big companies trying to cut down on everything, because the same mill has opened up now at a really low rate of pay and it's running under a different name.

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In the meantime, he was losing his job, mine was upscaling. He resents it. If I go on a trip, he won't ask me about it, and a couple times, I've taken him along and he likes it. But he always would say, "Oh, I could do that job better than you." It's so male. He's so with the male ego thing. Oh, sometimes he'll say, it's nice. It depends on what mood he's in.

I definitely am the backbone of this house. Everybody'll tell you that. My husband even knows that. At first he tried being the big boss. And I went along with that. And one of the guys that worked with me when I worked down at Fesco, wised me up and says, "What's the matter with you? Don't let him tell you what to do." Now I didn't have much to do with the women's lib, but he said to me, "You make money, you earn your own way. Be independent!" And I thought "Well, he's right," but then my daughter, when she came back, she's really independent, wisened me up a lot. You just think, like other women in the Club, you take so much of it, then you think you have your own life to live. I guess our whole Girls' Club discusses this, y'know.

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When they were having their bra burning, I remember at Westinghouse Airbrake, that was a big laugh that day. They had a big bra burning down in the park. I just never really got into that and I thought it was kind of who cares one way or the other.

But I heard many comments about, "If they were my wife, they wouldn't be doing this or that." And I'm thinking, "I wouldn't be your wife." Oh boy. But in the job market, as I see it today, women are moving ahead faster than the men. But there still

seems to be that glass ceiling. You'll go up so far and then that's it. At jobs that I had in the past, I had access to salaries and different things and there are always women that do many more jobs than men equal or better and their salaries aren't equal.

But I think they're doing things about it. But I notice that the younger people, they won't work as hard. And they don't care. If the boss says, he wants this, vroom! I'm the type that you have it and that's it. We do it.

Donna reflected on the life she has made for herself and her family in McKees Rocks. She is a long way from the Creek Road farm, yet she still values the spirit of a family team, a community team, and the idea that people still care about each other enough to pitch in.

One time, before we bought this house, my husband was bugged up and wanted to move to California, so he and I took a trip out there. And left the kids here. My sister's husband was in the service, so she stayed at my house. We went two weeks and I cried for a whole week because I missed the kids, and I didn't like being away from home. Forget that moving. That was it.

So within five miles are my husband and myself, my two brothers, we've all lived here all of our life. I like the part of going down the street and knowing a lot of people, or having contacts, or people calling you or stopping by to visit, knowing their kids and everything. Leslie lived in Texas 14 years. She said the worst part about it was walking and not knowing anyone. And she moved back here, she was transferred back here luckily, and she said she'll never leave. She'll leave her job first before she'll leave here.

It's the familiarity and the family. My mother's living and so's my mother-in-law. I'm proud of having a nice family. And I'm proud that they want to come here.

You'll see people that don't want to be bothered with their family today. I've organized our family reunion. It's the seventh one we're having now. And we get 100, 130, 140 people that come.

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Well, I feel lucky. I mean I have a good job. Bob always had a good income, we've saved money, had good deals on our real estate and everything. I just feel lucky and blessed and I don't mind sharing. I want to have enough money to live comfortable, but I feel better helping my family or my friends or somebody that needed it.

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Once, in the case of my husband, he had a friend that his house burned down. Well, he went around and got say 100 dollars off of all the friends, and they had like 5,000 dollars to give him. Another one, his friend, his son was in a wreck and he's like a paraplegic and he needed a van. Well, he went around the township and gathered 100 bucks off of everybody and got another 5,000 thousand dollars to give this kid towards the van. I mean if someone has a real necessity like that, we all help. The helping hand, helping each other out.

Donna talked about the presence of strong women in her life. She looked up to her mother and her Aunt Bess, and she was close to her mother-in-law. Additionally, Donna and her daughter Leslie have a strong adult relationship.

I'm a strong believer that women are the stronger sex. More dependable, more persevering, more compassionate. I've witnessed it. And I've lived it. My mother was always the strong point in our family. Of course, she claims that my dad was her backbone, but I never saw it that way. She's real proud of me. I'm her secretary, her

advisor. I handle her money and she's real happy. She always says she doesn't do anything without asking me first. And in my own life, I could see how I've taken control and kind of handled everything. And I see my daughter doing the same thing.

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My Aunt Bess taught me how to paint, and iron and cook. And her daughter, Kathryn, my cousin, I really looked up to her and admired her. And my mother-in-law really taught me a lot of the better cooking I know how to do.

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I think my daughter, she admires me because I'm a hard worker. She admires that quality. She admires my outgoingness and friendliness and the compassion I have for people -- the caring part. I think she probably thinks I'm an enabler too in some way with the kids.

Leslie's non traditional. She doesn't see the role between the men and the women. I mean she's an equalizer. I don't know about your family, but my family were all very prejudiced. In fact, there were a lot of Blacks that lived down at the end of Creek Road and my grandfather, and my parents, everybody, they had no respect whatsoever. Now I realize how wrong that was. But my kids, well, the boys not as much as Leslie, she's really equal. She doesn't seem to have the race lines. She and I are best friends. And she's, oh, I'm so proud of her.

And she has her own girls' club too. They call it their hen's club though. She thought ours was such a neat idea that they've been doing theirs now for about 11 years.

There's a bunch of them. And they love it. They all stick together and they just "b-s."

And eat.

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Donna credited her experience in the work world with the changes in her attitudes toward race. She "joked" that her extended family could benefit from the diversity experiences she has had in her job.

I can still remember a lot of Black families that lived at the end of Crick Road. We used to fight with them all the time. When my son Robert was maybe three or four, I met one those girls I grew up with in the grocery store and she had these two little twin boy's about Robert's size and they kept looking at each other. Finally my Robert reached over and rubbed the black hair on the top of the little boy's head, and I was so embarrassed. And she said, "Oh, don't worry, my boys probably think he looks strange too." Times do change and I think it's good.

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My husband still needs diversity training as much as my brother and my mother-in-law. The big scandal in our family was that one my cousin's daughters married a Black guy and had three Black children. That was a big disgrace, but another cousin said, "Why? What's the difference?" And we all thought, "Boy, she's weird," but now, it's changed. It's their choosing. It's too bad about my cousin because she quit coming to the reunion and she's still with that Black guy. I mean you can see it all over the Rox, in West Park. There's many biracial babies. That's the way it's going to be, don't you think?

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It's hard to walk in their shoes. We had this diversity training at work and I was guilty of saying, "They're running around like a bunch of wild Indians." Well, there was this Indian girl there that said how sad she felt about that. And I felt so bad because you never even think of a thing like that. You don't even realize it.

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Donna was invited into the Club by Anna very early in its first year. During her first few years, work and tiny children prevented regular attendance, but she went to Club as much as she could. She compared the early years with the present and commented on how the "girls" have grown a lot more comfortable with and committed to each other.

Anne called me and said that the girls, a couple of them, had got together and would I like to join them. And I said, "Well, yeah," and I went and the first night I went it was down in the Bottoms at Angie Verlinich's home. I didn't know Carole too much because she was a year behind us.

Then we just started meeting and we said, all right, "We'll do it again. We'll come next month to your house, this or that house." And there were more at the beginning. Then a few moved away, a few dropped out along the way, and a few have come and gone. But the oldies but goodies stick together here.

I really enjoyed it and then when I went back to work and when I had Robert, he was three months old, but I worked five to one, so for about a year and a half there, I couldn't go to every meeting.

Because I worked and a lot of times, I'd try to go, get off work early, maybe 10 o'clock but not too often. But I'd go to the outings with them, Bob and myself. We used to pay our dues and then take the husbands out to dinner. What fools we were! But it was nice, it was fun. I enjoy all the guys.

But we just started going, and then each one started buying their houses and that was fun. We'd go to each other's new houses and everything and having the kids in between there. I guess we started having the picnics and getting to know the kids a lot better -- other than pictures, and we always brought pictures.

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Here at the beginning, I think we were all anxious to impress each other and let them think that everything was wonderful and that we were doing good and that we had our house, our house was always clean, which it wasn't. We'd clean for days if you were having Club and get everything organized. But now I mean, they could come anytime, who cares? We used to eat a lot more and we still eat a lot, but mostly desserts and light fruits and different things.

I think we're at a very high comfort level with each other. And I guess years ago we wouldn't tell each other things that we thought would be embarrassing. Now I mean we could talk about anything and it just doesn't matter, you feel comfortable with it.

Years ago, I don't even think any of us would even swear. Well, then couple of times, I learned how to say that "f" word. And it's really funny, but I think years ago if I would have said it, I wouldn't have admitted it. But now I mean, hey, you are what you are. If you make yourself feel better, say it, y'know.

Donna described what a typical meeting is like. She described some of the topics that have been discussed in Girls' Club and the effects those conversations have had on her.

We'll get there and if anyone has pictures, you show your pictures and "b-s" anything new that's going on. Then we eat. And just "b-s" and check in on each other and if there are any deaths or if anything in the township happens or the Rox. We usually hash out everything and some people know about it, other people don't. Sometimes I feel all guilty about Dolores because she doesn't know a lot of people that we know around the Rox and Kennedy, but she is always a good sport and just listens.

We sort of kept up on each other's relatives, who was coming who was going. We discuss everything from the news on down to the school board on down to family and neighbors and friends, and it's funny because somebody always knows somebody and it's, "Oh, you remember this person, they were this or that," and it brings back memories.

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A true friend knows all about you, and is still your friend, and I think that's a good saying for our Club. We've told about divorces in our kids; we've talked about that and kids are having other problems. We talk about health problems or anything like that. Mostly, I think mostly you try to listen and offer any positive thoughts you think might help. The listening is probably the biggest part; to be able to have someone sit and listen to you. I think it is good for all of us.

I never came away feeling sad or emotionally spent or anything like that. Like when Anne's husband had his heart attack and all, you'd talk and talk and talk, and then

you'd come away feeling sorry that they're in that situation, but I hope that something I said helped a little.

The thing I like best with the Girls' Club is when we laugh and have a good time. That's good for you. You get things out and talk about them. But we could act silly around each other and don't have to worry about what your kids and your grandkids would think of you.

Donna's level of commitment to the group has deepened over the years. It is part of what helps her remember who she is. Like the other "girls," Donna agreed that no one misses Club casually.

I guess maybe when I was younger, raising the kids, when I missed it, I wouldn't feel bad. But now I, we all try never to miss. We always try to work it around where everyone is able to come.

I would never casually miss. Not go. No. Oh, one day, I even showed up the wrong day. I went to Anne's and she says to me, "Oh, hi, come on in." I'm thinking "Gee, I'm the first one here?" And she said, "Do you think Club's tonight?" And I said, "Well, isn't it?" I said, "Don't mind me." We changed the day or something and I probably got mixed up.

Once I join an organization or do something, I really am committed. But with Girls' Club, it just seems like it's, y'know, part of your life. You have to do it. Not have to, but you want to. I guess it's your ties with the past. It takes you back to when you were younger and you just want to feel good about things, about that time.

A lot of people I've worked with, people from out of town, like if we've gone out to lunch or down the street, they never could get over how many people I know. And I

says well, it's from living in the same area all your life. And they said, "Gee, that must be nice." I don't know too many people who stay in the same area. And then if I tell them about our Club, oh! They can't get over that. They think that's really terrific.

Donna spoke about some of the people who have left the Club. She made clear that some of those who left did not understand and did not subscribe to the unwritten rules that guide the group's behavior and protects its continuity.

I think at one time Patti wanted to drop out and at one time Carole wanted to drop out. I think Patti felt funny that everybody had kids to talk about and stuff like that. I think it was around the time that her husband died, and she felt bad. Oh, we encouraged her not to. And to come. And I mean, we would try to talk about her church because that was the big interest in her life. And I went to her church for a long time.

And Carole recently thought that she'd drop out because she hasn't been feeling good, and she thought when that was her turn, that she wouldn't be able to entertain us. And we said, "We don't care! You could just skip it." So that hasn't come up anymore.

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Louise moved away, but she came to the reunion and there to Joanne's. It was fun having somebody new there. She was a lot of fun just to hear her comments and how her attitudes on life are and different things. Now then Arlene Vaskevich. She came a lot and she really liked it. And then all of a sudden she came here to my house and put on this crying act about her sister was dying, that she wouldn't be able to come to Club anymore and we found out later we saw the sister, she wasn't even dying at all. But we didn't appreciate that because we thought she should have been honest and just say that she doesn't want to come.

A couple of times Janet Krieder came for a while, but I think she wasn't in our lifestyle at all, she was faster than us and had more things going on and we probably were maybe entertainment for her for a while. But nobody really cared one-way or the other.

Now Doris, we always enjoyed Doris. She came for years and then as her kids got older I think she ran more with them. She would have the funniest stories to tell. She got religion and she would say, the lord will provide, and we just got hysterical and maybe she didn't like that, I don't know.

She made us this scroll and she was reading us this religious thing and Anne and I started laughing. And it went on and on and we were trying to be serious. I don't think it was appropriate. I think we have different religions and within the group you don't try to push your beliefs on anyone else. I think that's a private thing. Just like politics. I don't think we really discuss politics, who we voted for or stuff like that, I mean locally. It's like everybody's own business.

Besides politics, Donna listed other topics with which the group does not feel comfortable. Additionally, she explained why she thinks not giving advice has been a good way to keep the group intact.

We never talk about sex, unless it's a joke or something. We're not prudes. We don't really discuss politics. Or money. It's sort of personal things, private.

If someone is having a problem, I wouldn't volunteer to say, "Well, I think this or that." We don't do that. I never have seen or heard us do anything like that. Unless somebody says, well, what do you think I should do? But I never even really then. I don't think anyone really asks for advice. I think it's mostly talking to get it out of your system type of thing. *That* we do.

I think it holds friendships this way. I mean, if I tell you to this or that, and you don't want to do it, then you're going to feel funny coming back and saying, "Well, I didn't do it that way. I did it this way." You're going to feel guilty around me.

Now one time Anne was talking to me about how bad she felt about her mom's house being sold and she wasn't ready to sell it, but the rest of the people were. She said they don't realize that she sits there and has to look at it every day. And she felt really bad because the real estate agent didn't treat them right. He knew it but he didn't tell them they were selling it as a home for the elderly like a daycare.

And she talked and talked about it at the picnic and I really felt that it did her good to let her get it out and talk about, because she says that her husband doesn't understand and when she starts to say something, he'll say, "Oh, forget that house." And I think that was good for me to listen.

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Now say you need a good wallpaperer, like Dolores called and asked me if I know a good painter. I gave her a recommendation and she's been using him for a lot of people. I don't mind doing stuff like that. That's a resource. That's real different than saying, "I'm having a problem in my marriage or whatever." But we do cut up on the guys all the time.

Donna spoke about jealousy in the group. She stated that the girls recognized each other's differences without envying those differences. She and the others believe that everyone has something positive in her life. It is easy to celebrate each other's successes and joys because they are well aware of the burdens that each of them has had to bear.

I think we all have the same roots. Basically the same characteristics. Some have broadened out, and some have gone different ways. All of us aren't the same. We've married all different mates. There's something positive and something good in each of our lives. If one of the kids gets a raise or someone gets to go there, we're always sharing that with everybody and they all seem to be happy about it. I don't think that there's any jealousy associated with anybody. We take everything in stride and you're happy for each other. So it's just like they're an extended part of the family.

Donna described the communication pattern that allows people to say what they want and to keep their dignity. In her view of the Club's future, the "girls" will be "good" for each other in their old age, when so many older women, like her mother, are lonely. Donna talked about the Club as a good investment.

It's just from over the years, discussing things and talking about it. Just like, they're just like relatives, y'know how you know all your relatives' goings-on. But yet there's a privacy there that still keeps everyone high in esteem with everyone.

I'm honest, but I think if it's going to hurt someone's feelings, I'll beat around. I won't come right out and say something. I wouldn't hurt anyone's feelings. I'd say nothing. I think the girls, they're all honest. I think if they didn't want us to know something, they just don't say anything.

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I think in happy terms that by the turn of the century, I'll be 62 in 2000 and I could retire and everything, but who knows, in a couple years, what could happen. And I think I'm prepared like if I would be a widow. Y'know, God forbid, I think I could

probably handle that, and live my life and not be a burden on anyone else. I feel that I'm really sufficient, self-sufficient and that I could take care of myself.

I think more about Bob, what could happen to him. Now we, Dolores and I were talking. We're all hitting to that 60 mark soon. I think you have to take care of yourself, because nobody else is going to. You have to have checkups and take your medications if you need any or adjust your lifestyle. I think your life's in your own hands, more or less, but if you have an illness, of course, that's not in your own hands, but you have to do the right things for it.

I think our girls will outlive all their husbands. And I think we're going to be good for each other. Now, I see my own mother. She has no friends whatsoever. She is by herself, all week long because everybody works. So she comes here every Saturday and Sunday or to my brother's. But I don't want to put myself in that spot, where I don't have any friends to go to a movie with or just to go to Club and sit around and talk.

And we've talked of this in Club, we're laughing and we said, "We all have to go to the same old age home together." Now I think this friendship that we've built will last and last and it'll help us as we're in our really old age. Just to be able to call someone who like knows you, because we'll be right here, hopefully.

It's an investment. I think all the time that we've invested and our do goodies, good doobies. It's all going to reap . . . Everything you do good comes back. But I think in our older years it's going to pay off because we'll still have our friendship. Even if you always have your children and everything, it's good to discuss things just with adults. . . women. . . other than your kids.

4.6 Joanne

“They’ve been in my life forever. . . . They’re people I can count on.”

I had looked forward to the interview with my sister for a long time. My visits to McKees Rocks are usually around the hectic family holiday times, and she and I rarely have time to sit down and talk. I speculated that this might seem a bit odd for both of us, but I was surprised at how easily and quickly we got started. I turned on the tape recorder, asked a question about the Club, and we never stopped talking for the next two hours. I did not feel hesitant to ask her anything. In fact, I was more comfortable in pushing a little harder into some difficult material with her than with some of the other “girls,” knowing that the safety net of our family relationship was under me.

Additionally, I was fascinated by the direction both interviews took, devoting substantial attention to her relationship with her husband, Francis, who everyone knows as “Bud.”

Most of the women in the Club are nearing their fortieth wedding anniversaries, and the Club women’s marriages and relationships with their husbands constituted a significant part of all the interviews. In the interviews that I conducted with the Club women, my experience was similar to what Karen Olson had pointed out in her article with Linda Shopes (1991) on interviewing working-class women and men, that is, the Girls’ Club’s “own conceptualization of their reality as inescapably intertwined with that of their husbands” (p. 190) was a prominent feature, either explicitly or implicitly.

Some women in the Club defined themselves as people who kept growing while their husbands stood still. Others saw themselves as women who waited for their

husbands to hear a wake-up call about the importance of “closeness” and family life.

Others defined their lives in opposition to or separate from their spouses. While all the interviews contained evidence of the strong interconnection of the women’s worlds to those of their husbands, no one insisted as clearly as Joanne that her life could not be understood outside of her relationship with her husband.

To see and appreciate Joanne in the Club, as well as in other parts of her life, it is necessary to see her distinctive relationship with her husband, Bud. While others spoke more about their childhoods and the influence of family, Joanne’s memories of that earlier part of her life were fuzzy. She connected her personal development and growth to her relationship with her husband, whom she characterized as “one of a kind.” Although she would be the first one to tell you that he is not perfect, her life story seemed to switch from “black and white” to “color” when Bud entered the scene.

A single incident served to point up that other women in the Club also see Bud as a unique person. I told the “girls” that I planned to send each of them a copy of her transcript to read for edit and comment. They decided as a group that they all wanted their transcripts sent to Joanne’s address. I *do* believe they were trying to save me some wear and tear in sending the transcripts out. However, they also agreed that they would not want the raw transcripts in their husbands’ hands. Their husbands, they said, might “misunderstand” or take something they said “too seriously.” They wanted the transcripts all sent to Joanne and Bud’s house. Bud could be trusted.

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Joanne described much of her childhood as a “blank.” She knew what happened and when it happened because she had “received” the family history through photographs and stories, but she had few first-hand memories. She had only general knowledge of her mother’s background. But when she spoke about her immigrant father, she was able to recall in detail that he was different from other immigrants, that there was something that made him special.

All I really know is that Mummy’s mother was very dominant in her life. She was the one that was very mean to them, from what I gather. She was very very mean. She was a disciplinarian. Grandpa was like somebody who didn’t do anything. He was there, he made the moonshine. But that was it. I think she was deprived of her childhood. She had to raise her brothers and sisters, she had to work. But then I hear her talk about her friends, and she talks about the things they did and that they did have some enjoyment in their life.

They weren’t deprived of anything because Grandpa made the moonshine and then sold it. I think that’s what helped him. I don’t really know a whole lot. She had to quit school, which I don’t know if that upset her or not.

She always talks about taking care of Uncle Rocco. She had to take care of him as a baby and she didn’t know anything about it. She didn’t know how to change his diaper or how to feed him or what to do with him. She said how Grandma used to wrap him up; all of them when they were babies. They’d give them a bath in the morning and get them ready, and I don’t know if it was a blanket or what, a binder of some kind, they’d wrap them real tight and that’s the way the baby stayed all day.

Maybe she resented having to do all that. And they certainly worked hard in that house, they all had their jobs to do.

Daddy came over when he was nine, that's all I know. I don't know what he did as a little kid. He went to school, he liked school. I don't know if he graduated or went to the eleventh grade or something like that.

I think though somewhere in there when he was real young he decided he was going to be something, something different than the rest, because he always had a car. When you look at the pictures where he's dressed up, he's always fashionable for that time. I think somewhere in there is when he made himself an individual away from what the rest of them were. He got his job, he earned money. The fact that he was a musician, that's not what they did. He went on the radio.

I don't know why he quit that. Maybe when he got married. They broke up the band when they got married, I don't know. But I always knew this as a kid. We always went on vacations. I've got pictures when I was a year old, two years old. We were in Erie. We were in Put-In-Bay. We were somewhere in Illinois; we were in Detroit. Always he always took us, always on a vacation. And doing that had to be the exception. It had to be.

I just think he wanted nice things, he wanted to do whatever he could. He worked hard. You have to give him credit because of what he did with his life from where he came. But I never even gave that a thought as I grew up. What he was, what he did, what he wanted, what his goals were, how he wanted to better himself. That was just the way we lived and what we did. But he was a different kind of immigrant. He was not your normal backward immigrant.

* * * *

I didn't like Daddy's mother. I didn't like her. I was afraid of her. I didn't want to go to her house. Their lifestyle made me feel weird to be there. I didn't like being down in their house in The Flats. I would leave and go over to Betty's place. I would go through the alley and over to her place. I was afraid to do anything there. I'd just sit there and I could hear Aunt Carmella's big mouth all the time. Eat this! Come on! Sit down! Eat this! Tell her to eat it! I just didn't like being there.

After a brief stint on KDKA Radio in Pittsburgh with a group called the DeMalo Brothers, Joanne's father took a job at Dravo Corporation where he worked as a welder and a fitter for the rest of his working life – over 41 years. She recalled that her material needs were always taken care of. She measured her family's prosperity by the moves they made from “two rooms,” to an apartment, and then to the house on Island Avenue. As a result of this last move, Joanne met her life-long friend, Dolores.

The first place I remember living was in those two rooms up in the “yard” by Lucy Liberatore's. I remember playing in that yard “it taggers” and “hide ‘n seek” and being in Lucy's house because I used to think, what a beautiful house. She always had pretty things. It was like a mansion compared to everybody else.

Little Willie Deemer, he was my boyfriend, Tony, Yolanda, Deena, Joni Rubolino, we all played in that yard long into the dark, we used to play. I was five, I think, when we moved to the Terrace and I was seven when we moved down to Island Avenue.

When we moved from the yard to the Terrace, I had a room that was my first room. That's where I met Louise, we became good friends. We only lived two apartments down from each other in the same building.

When we came down to the house on Island Avenue, I got to be friends with Audrey and Joy next door right away and they took me under their wing. They would take me for walks and read to me. And that's when I met Dolores.

I liked going over to the Bordas' house. It was different. It was more old-fashioned. Her grandmother would talk in Russian and I didn't know what she was saying, but she was always real kind, and Mrs. Bordas was sweet. I was scared of her dad. Her dad looked mean. He wasn't but he looked mean to me. They had me over every year for their Christmas. I'd go over and have dinner with them.

* * * *

Daddy worked hard. I remember him coming home from work, coming in the back door with his lunch box. Putting it on the counter, going down, getting his shower, coming up, eating, read the paper, sit on the porch. And in the summer, he'd take us swimming every day, almost, when it was hot. He'd load up the car, me, Audrey, Joy, Dolores, whoever wanted to go. Take us swimming to North Park.

* * * *

We did things that other people didn't do, the vacations and having cars. Dolores never did that when they were young. She never went on a vacation. Her dad didn't have a car, and of course Betty, they were poor. Materially we had it very good. We were never rich, but we always had everything we needed. I never remember ever thinking I couldn't have something because there was no money for it. There was always more than enough food.

Like other “girls” in the Club, Joanne characterized her parents’ generation as good providers but unable to be emotionally close to their children. She recalled good times in her large extended family where music and card playing were the recreational activities.

They were good as far as taking care of you. They did what they needed to do, and what they had to do as far as taking care of you. But I don’t think they knew how to express feelings.

She did what she had to do. She was a good mother, took care of me. But anything on an intimate basis, no. I don’t remember any time we’ve ever talked about anything, discussed anything. It was just very superficial.

I don’t remember any real affectionate ways, hugging and stuff, y’know? Like I can see him coming home from work, and he’d want to give her a kiss and she’d push him away. “Oh, Joey,” she’d say, “get out of here.”

The only thing she ever knew of my life was the generalization of my life. I never felt I could talk to her. Nothing ever made me feel comfortable enough to talk to her. And it’s still the same today. It’s still the same.

They were always disapproving. They wanted everything to be perfect. So I didn’t tell them anything. Plus I didn’t want to be lectured. Like if she knew something, she’d be on my case constantly. And I didn’t need to hear it from her.

* * * *

The best times were when Uncle Tony, Uncle Rocco, Uncle Joe, and the cousins from Midland, they’d come down and they’d play their guitars up on the hillside back of the house and they’d sing. They all used to get along good. And of course, the endless

card games that they would have. Until the wee hours of the morning. And they dragged us home at six o'clock in the morning, when people were going to church. Coming home in the car and people were dressed going to church. We used to sleep anywhere while they played cards for hours. They'd sit around that big round table in the dining room at Grandma's house, and then it would come to our house. They'd take turns.

Joanne described what she learned was expected of her and the other working-class women who graduated from her high school. There were few choices to be made; the next move after graduation was standard and prescribed. Her first jobs were typical entry-level clerical positions.

When I was young, I don't recall knowing how I felt about school. I was never told I had to do well. They made sure I did my homework and what I was supposed to do and my report card had to be good, but they never told me I had to do better. They didn't push any type of education on me.

It was just like you graduated and got a job and that was the way it was then. I guess a few guys went to college, but not many. But the girls, I don't think I could even tell you one from the whole class that went to college. None of my friends went to college. We all went and got a job and that was the way it went.

* * * *

Me and Betty and Dolores, we all worked in high school at the big Murphy's store in town. We went to town on the street car. I forget what department Dolores started in. Betty worked downstairs. The first job I had there was at Easter time. I was making Easter hats. Can you believe they had this 16 years old, sewing flowers on straw hats, and women were buying them? Then after that, they put me in the cookie

department and that's where I stayed until we graduated. I worked there for a couple years, in cookies. That's when I put on about 10 pounds. I'd eat all the cookies.

But the period I got out of high school and worked, I hated it. There's nothing there. I hated work. I hated where I worked. I liked what I was doing. I didn't like the conditions and the hours and the nun. I liked the women I worked with. That's where I met a very very good woman that was like Mummy's age and she adopted me as her daughter and she was real interested in me and Buddy when we were dating and we used to go to her house all the time.

Betty dealt a lot more with the public than I did. I did a lot of secretarial stuff. I transcribed records, medical records from the doctors. Filled out insurance forms for people who needed them and people that were going to other hospitals that needed their records. They didn't run them off them. You had to type them up and that's what I did.

And I typed on these little metal plates on the electrograph machine that they used to stamp your hospital records with your name. It had your name, male, female, Catholic, and your doctor. All your information and that's how they stamped all your records while you're in the hospital. Betty would admit them, the paper would come back, I'd get it and type it up and take it to the floor that the people were on.

I didn't like the work. At that time the records department was in a dungeon part of the hospital, and it was dark and dingy back there because you were with all these old records. There were several girls that I liked a lot, we socialized a bit. I ate lunch with them in a little room back there. Sometimes we went to the cafeteria. I hated working on

holidays, Sundays, Saturdays, I hated it. That's what I hated the most. If I could have worked a normal week, it would have been perfectly fine.

It was a hassle because we had to take two streetcars to get there. And weekends I drove because it was too hard getting connections so Daddy let me take the car.

Sister Alisha was my boss. She was real quiet-spoken, but I didn't like working for a nun because they thought you had no life but there at work. And then there was a notary in the office, an old woman named Hilda Barr and she was a relative of the Barr that was the mayor of Pittsburgh at one time way back when. And she was an old crotchety thing. That was the one job I had the longest.

And then after I got married, Buddy always tells this story, I used to come home from work every time, every night and I'd be bitching about work and he'd say, "Either shut up or quit your job." And I quit my job.

Bud Alder entered Joanne's life about the time she graduated from high school. They dated several years, and they were married in 1958. From that point on, everything in Joanne's story changed. A few years after their marriage, she got pregnant, and she stopped working. They had two children quickly, and they moved into the home and the neighborhood that they still live in today.

Bud has a strong dominant personality. I couldn't fight him anymore. I certainly would not have continued to see him when I first met him. I would've dated him a couple times and that would have been it, but he never let me be. He was always calling, calling, calling, always going out, going out, going out, until he broke me down. I don't know where I decided, when I decided. I guess I saw something in him, that I knew he was very very good to me. Very very good to me, I mean, even then. It was, me first, always. Always with him.

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After I quit the hospital, I got a job at the bank, East Park Savings and Loan on the north side. It was on one block and the other block was another bank that Audrey worked in. Buddy used to drive us both to work, pick us up, and bring us home.

I liked that job, but I didn't work there too long because I got pregnant with Michael and I was having a lot of problems with the pregnancy. I was bleeding and stuff. So I quit. The beginning of the pregnancy was real hard and I was taking all kinds of pills, because he said the placenta wasn't attached firmly. So I quit because I was afraid. So I haven't worked since.

I feel very fortunate because I see what my friends go through and how they hate work and how it's interfered in their life, and I was always lucky because I stayed at home, and didn't have to worry about working. Buddy had to do extra work in order for us to live because we couldn't live on his teaching job.

He had three, four jobs at a time. But he didn't care. He wanted me to be home. He said he liked coming home knowing I was home there and he didn't want to come home and I was working, so I was lucky.

Money was a problem only in the beginning. We used to be charge-happy. We used to buy everything on charge. Kids needed shoes, go to the department store, charge, charge, charge, charge, charge. We got in trouble with charges. We made a loan to consolidate and then we paid the loan off and we didn't charge anymore. If we didn't have the money, we didn't buy it. But things kept getting better and better.

The newspapers is what kept us going. When he worked at the newspaper, that was excellent money he made. But that period of my life I didn't like because I didn't like him working on the weekends. He worked every single holiday.

He was never there for a holiday and every weekend he worked. So we had no social life through the first 10, 12 years of our marriage. Then he hurt his back and he couldn't work there anymore. But by then he was established enough with other things and his pay was good.

He didn't like the work either. He didn't like those hours. But the money was very good, very good. They paid well. It was a union and they're noted for paying fantastic wages. Always did and still do.

Joanne told an interesting story about how she and Bud worked out household economics at a fairly early point in their marriage. The story seemed symbolic of the way she and Bud have achieved mutuality and interdependence. The story also stood out because it illustrated how they had negotiated an area of marriage — finances — that often causes conflict between partners.

Years ago, Bud handled the money as far as paying the bills. He would give me money whenever I wanted it. I'd say, "I want to go buy something," and he'd give it to me. Then somewhere way back, he says, "I don't want you to have to come to me every time you want money, so I will give you so much money out of every pay. Out of that, all you've to do is buy the groceries and the rest is yours to do whatever you want." And from there, that's how I got my money.

From that money I pay the grocery bills, I buy gifts for the kids and that's how I save money to buy clothes. I buy whatever I want whenever I want because I always have a little bit of money saved. . . It gave me the freedom to do what I wanted without

him giving approval or disapproval, not that he ever said, “No, you can’t have it,” if I asked him for money. But it made me feel better as far as not having to ask him for it.

So out of every pay now he gives me a lot of money. I don’t mean thousands of dollars, but it’s plenty for what we need and I want. Sometimes I spend every single penny of it. And I have nothing left to save, that’s when I have a lot of birthdays to buy for. Other times, I put it away. So that’s it. It works. I have my little stash. He’ll say to me “How much you got?” “None of your business,” I say, “It’s my money.”

Joanne’s physical problems began with the difficult birth of her first child, followed quickly by a second pregnancy. Her story revealed glimpses of some of the typical gynecological and obstetric practices of the early 1960s. Joanne was the only narrator to go into detail about the births of her children. She was also the only narrator to mention that she knew someone who was taking the pill when it first came out.

I wanted to have a baby right away, and it took a couple years and I kept thinking I wasn’t going to be able to have a baby. So when I did get pregnant, I was very thankful and that’s why I quit right away because I was scared something was going to happen. I enjoyed being pregnant. There were no problems.

It was not an easy birth. Buddy blames that birth on all my problems since then. I was ripped apart so bad. That’s where all my problems came from. Again, I was so stupid. What did I know, it was my first baby. I didn’t know what to expect. To me it was a normal thing, but then in the hospital everybody else had their baby and they were bouncing around, walking up and down the halls and there I was, I could not move in that bed for 14 days. I laid in that bed.

They'd bring Michael to me and I'd say, "Take him back, I can't hold him." I was hurting. That's my recollection. . . sitting on a pillow for months and stitches coming out of me forever and a day. Then I had a sun lamp on me to dry up the stitches. It was then I realized that it was not a normal birth I had. And that's why Mummy got so mad when I got pregnant with Lori. "What's the matter with you!! You just had a baby, didn't you have enough pain?" I didn't know any better.

I thought I just had a baby, there's no way I'm going to have another one this quick. I guess we weren't watching. We never really had to watch a whole lot because I was always having something wrong with me. I had six "D & Cs" in between all this. I always had problems there from day one.

I was aware of the people that were on the pill, like Buddy's friend, Joe Dietz's wife. I remember that was when the pill first came out and she was on it. I kept thinking, I'm not taking that. And then I remember the IUD which totally turned me off. I thought nobody's sticking that inside of me.

But Lori just popped out with no problem. She was the easiest birth I had. No problem at all. She was little. She was only six/eight so that helped. Michael was eight/twelve and Julie was eight/five.

And then the third baby; that was bad. It was bad. My water broke when I was five months. And I called the doctor and he told me to go to bed, and take my temperature. If I got a temperature, I was to come in immediately so that's what happened. I was getting an infection. I was in the hospital about a week and all I remember was them coming in examining me and telling me that the baby was never going

to survive. That it couldn't survive. And I kept thinking, "They're crazy because I feel this baby kicking and moving." So they sent me home Christmas day and told me the same thing. Stay off my feet and come back if I get a temperature.

I was home that week. New Year's Eve, I started getting a little bit of pains and then I had a real high fever. I went back in and they wanted me to have it natural. And I did. But the baby died right at birth. It was living up until that time. I could feel it moving. I was six months by that time

I think they probably could have saved that baby. But then I wouldn't have had Julie. That's what I tell her. I was meant to have her. The doctor told Buddy the baby was blind and that was nature's way of handling something that wasn't supposed to be.

I never saw the baby. Buddy saw the baby and he had to make arrangements to bury it. But I don't think it was any kind of big deal at that time. They just had to bury it. I never went to the cemetery. I don't even know where the baby is. Somewhere I put in my head that I didn't have that baby. That wasn't a baby to me. I was very upset when it happened and afterwards. I can remember Buddy saying to me, "If you want another one, we better have one." Because I was going to be 30 years old. I was 30 when Julie was born and I thought, "Oh my God, I'm too old to have a baby now." Now they don't start till they're 40!

I never let it get me real depressed because I knew I was going to have another baby. That's why when Julie lost her baby, I tried to console her and tell her that there was a special baby waiting for her, like she was for me. I was waiting for her.

Maybe if I had seen the baby and knew it was a baby. It never was a baby in my head. In those days, I didn't know the stages of a baby when you were pregnant. I didn't know what it looked like at this month, this month, this month. I didn't know. That's why in my mind I didn't think I had a baby. Plus I was so sick. I was really sick. And they tell me I almost died, which I wasn't aware of.

I blame everything on total stupidity, or say lack of knowledge. We had no knowledge of things then. Nobody ever told us these things. Like today, they get pregnant, dear God, what they go through. They give all these tests and the stuff they do! We got pregnant, we peed in a bottle once a month and took it to the doctor and that was the extent of our tests. I always said, "Knowledge sometimes is not good" because now they know too much. We didn't worry about anything. We got pregnant, we had a baby and that was it. We never worried that something was going to be wrong with it.

Parenting three children in a growing suburban neighborhood brought new friends and a built-in feeling of community. Being good parents was always paramount to Joanne and Bud, but the job got more difficult as the children grew up in the tumultuous 1970s.

When we moved up here, that's when I made a whole new set of friends. Everybody on the street was young, with little kids. My life was strictly kids for "x" amount of years, getting involved in their activities. That was a real nice part of my life.

There were 20 kids on this street. And we, being the middle of the street, was the congregation part, because they'd come from the top, from the bottom and they'd meet here. And our yard was always filled with kids playing ball, games. This was the meeting place. We were the first ones to get a pool so we always had kids here.

It was a whole different period of our lives. We used to go on picnics with the Petros and we used to play cards. We didn't do anything with the Mazzas because they didn't get into social life but we visited back and forth. And then we got closer with the Formosas because Julie and David used to play together at the time. They were the only two little kids then. All the rest were big by then.

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When I had Michael I only had him a few months and I got pregnant again, so I couldn't really enjoy his infancy because I was so sick. I couldn't feed him. I could not open a jar of baby food and feed him without barfing my guts out 10 times so he had to wait until Buddy came home to eat. I didn't enjoy him as a baby.

And then when Lori came along, she was an excellent baby. She was very good and that gave me a chance to give more attention to Michael because he demanded more attention than she did. Thank God she slept all day.

But when I had Julie, I thoroughly enjoyed every minute of it because I was older, I knew more, and I had the time for her. She became very close to me, because at that time, then I was liberated as far as I had my own car. Everywhere I went, she went. That's why, poor thing, when she went to school, she couldn't handle being away from me. She cried her guts out through kindergarten to the point where she'd throw up in school. Her teacher would tell me, "She threw up again today." She was like that through second grade and then she finally got out of it. But she's still close to me.

My recollections of Julie are more in mind because they're more recent. I'm not painting her as the perfect kind in no way, but she did bring a lot of joy to our lives.

Because everybody liked her, in school and everything. Her teachers all raved about her. She always got tremendous compliments and she got along with everybody.

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We always thought Michael would go to college and get a good job and that one of them would be a teacher, but none of them wanted to be a teacher. Buddy's influence did not carry through to them at all as far as teaching.

I don't think he ever made a point about it. I can remember people calling him all the time and wanting him to do things for their kids, because they knew he was teacher. They wanted different things like books or information or help so they could give advice to their kids. I'd say to him all the time, "You do everything for everybody else's kids, what are you doing for your own?" I think he specifically didn't make a point of pressuring them. I don't know what the reason was.

I don't know what happened to them. Lori was always turned off by school. Lori hated school. She would come in this house, throw her books on the table and say, "I hate that teacher, I hate that school, I don't want to go anymore." That was every single day. So she had no desire to go to school at all. Luckily she got through high school. Michael claims he went only because he knew we wanted him to go. He didn't want to go. Therefore what happened to him, happened to him. Julie, I don't know why she never wanted to go to college. She loves school. She did well. I think now she might feel bad she didn't because she said she wished she was a teacher. She said that would have been the perfect job for her. She went to that Wilma Boyd school and did that and

that was it. And her teachers were so upset that she didn't go to school. But you can't make them do what they don't want to do.

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What we do with our kids, I'm not saying we're the only ones. But like in our Club, Bud and I are not normal I don't think as far as money, money, money. I would like sometime just to sit down and add up what we have given. I would be rich, rich, rich. I don't regret it. Not a bit of it. They needed it. I'm glad we could help them.

Now then when I think back to when we were first married and it was tough for us. I was never handed a cent. Ever. Never asked if I needed anything. The only thing we got when we moved into this house, Mummy paid for half my drapes for the windows. That was it. Out of all our married life. And when the kids got older, she would take them to town and buy them an outfit once or twice a year. And that was it. I mean, nothing. Like every time I'm out shopping, it's always something for the kids, something for the kids. She never did that. Never. Never bought me anything. She never did that. But that's the little things on a daily basis that I do, but over the years, they have all needed big lump sums of money.

Joanne and Bud's two oldest children experienced work problems, financial problems, and relationship problems. Even as they grew older and into adulthood, Joanne felt like she needed to help them. Joanne identified both the joys and the tensions she has experienced in the close family life she has in McKees Rocks. As she grows older, she feels pulled between two generations of her family responsibilities.

There was a time when Michael had just gotten married, Lori was coming home, then he was back home in a couple of months, and I had furniture from everybody and

clothes everywhere. Somebody would call me on the phone and say “Hello,” and I would just cry. I couldn’t talk about it without crying. It hurts you to think your kid’s lives are in such turmoil. It’s awful. I mean, Lori in the middle of a divorce, she’s 20 years old and she was married and divorced, and Michael was married three months and his wife attacks him with a knife, and he’s coming home with a little kitty in his hands, and a suitcase, and your heart breaks. And you feel so inadequate that you can’t do anything to help them. All you could do was say, “Come back home, we’ll help you.” We lived like that for a couple years.

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I love my kids. I just don’t feel I need to know every detail of their lives. I’m thrilled they feel they can talk to me and they can tell me these things. But I don’t need to hear it every day. I don’t need to know every single detail. Is that selfish? I don’t know. I just think, why do I have to be involved in this? And then I feel guilty because I think I should be doing something to make it better. And it makes me feel guilty.

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That’s why sometimes I don’t want to think about it. I just don’t want to think about it. I think, why do I have to put up with this now? I don’t want to deal with it. I don’t want to deal with all their problems. I feel like sometimes I’m an ostrich with my head in the sand and I don’t want to know anything. If I don’t know it, it’ll go away. And that’s terrible. But knowing it doesn’t do anything either, because what do I do? What can I do about it? So there, they make me depressed, yeah. All three of them can put me down if I let them. And I do let them put me down a lot. I let them get me real

depressed. Now that's when I say to Bud "It's time to go," every two three months, four months maximum. Outta here.

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I'm very family-oriented and sometimes it feels smothering. Sometimes it's pure pleasure. I love it when everybody is happy. I want everybody to be happy. I want their lives to be good, in all respects. I want them to be happily married; I want them to be financially stable; I want them to have nice children. Although, I told you, my head's in the sand half the time. And I always said, "People who say their lives are perfect are lying." They're lying. No one's life is perfect. But I feel very fortunate.

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Even in the beginning, I mean, we had a chance, when we first got married, he could've gone to California to teach. He had an offer. I wouldn't go. And I didn't have kids at that point. I wouldn't go. I don't know, I didn't have the guts to do that. I felt something, some tie here. It's like leaving a familiar place and going somewhere strange. I love to travel and go away, and I can be away a long time, but I know I can come home. Although I hate home, I hate living in Pittsburgh. I would love to pick everybody up and go, somewhere beautiful and warm.

I am in between and I feel sometimes like I'm being pulled in eight, ten directions. I feel like I have to protect some of them from others of them. And that's getting harder and harder to do. It's getting harder and harder to deal with Mummy. I find myself sometimes like, not paying attention to her.

It's a lot of tension. It's like I want the kids to behave so she doesn't get on them. Because she always has her advice, always knows better what to do. And then I try to, try to. . . I don't know what I try to do. I guess I try to keep everybody happy. And it's a lot of tension on me mentally and physically.

I love Sundays. I like them here. The few times they were not here on Sundays, which is very few and far between, it's like "Jeez, I don't like this either." I like when they're here. I wish it was not so full of all this electricity here all the time. I guess I want to be peacemaker, healer.

Bud has been a source of constant support and encouragement to her to change toward a positive view of life. She contrasted her typical outlook on life to his, and she described the value of her husband's positive presence throughout her life.

Well, he's given me a great life. I bitch about our little house, and stuff like that, but that's just stuff. I have to have something to complain about. But, think about it, how many people have been able to do what we do? And he's so grateful for everything, because he had nothing. I grew up having a fairly good life. When I hear other people talking about their childhood and how they were living, I had it good. I really had it good.

He's had to put up with so much from me. And he puts me first all the time. All the time. He's good. And I wish I could show him more of what he needs too. I think because of the way we were raised too, it's hard. It's something I have to talk myself into. But I'm better at it than I used to be.

He's so tolerant. God bless him. What he puts up with from me, I don't think any other man would. I mean, on all levels. I mean, I think it's in his upbeat personality, his positive way of thinking. There are times I have pulled him down to my despair. But

then he gets me back up there with him. He's got such a positive attitude. Positive, I mean, he certainly shouldn't have one, because he came from such despair, what a terrible life, from the house he was raised in. How did he turn out the way he is? He could've been a bum. But whatever he is, he did it on his own. He had the strength within him, I don't know. I don't know. His dad didn't give it to him, and I didn't know his mother well enough, she died six months after I met him.

But I always tell him, I changed more to him than he changed to me. I've gone his way more in attitude and stuff. Because he has such a strong personality. Maybe I came into the picture and gave back to him as far as family values. Because that was something foreign to him. When we got married, he couldn't understand that. Why we all had to be together, and now he's more that way than I am, I don't know. But he's right there with me on family stuff. That's where I think I came in.

Probably Buddy is my biggest satisfaction in life. You're going to make me cry. He's been the best. And I know it, and I feel bad that I don't tell him or make him know it. But there's something in me that doesn't make me do that. I feel very lucky to have him. He's always there. And he puts up with so much. And he's always positive about everything. I probably would not have survived half of my life if I had been with somebody else. You understand that?

He's there all the time, no matter what. He helps everybody. He represents all the good things in my life. I know that they make, not make fun, but they joke about him, the kind of guy he is, but I think most of the girls in my Club would love to have a husband like him. I don't think he's a henpecked husband. But he does an awful lot,

above and beyond the call of duty, that I don't think any other guy would do or put up with. He's there for the kids, all the time. And think about what he has put up with from me all these years. He just keeps plugging along, he's always in a good mood. I mean, he's not the perfect person, but who is? He's as close as you'll come to it, though.

I think he's very content with his life. I think he feels that he has things that he never dreamed he would have as a child. That he has bettered himself so much. There's times he sits, inside or out, and he'll say, "Did you ever think we'd have this? Did you ever think we'd be here or there?" or all these places we go to. He says, "As a kid I never thought I'd have anything like this." And I'd always tease him, and I'd say, "Well, I knew I would." Because I had a good life. I can't relate to his life when he was young. Because his life was bad. And he had nothing. Outside of his mother, he had no parents, and poor thing, I don't know how she managed to be a parent. He's a unique person. There's not many men like him. I depend on him for a lot. He's made me as independent as he could, but I still depend on him. Yeah.

With the Girls' Club, I don't know, we always joke. I mean, when you talk about Buddy, you have to joke about him, because he's the big jokester. And Dolores tells me all the time, how happy she is for our life. She says that she's so happy that we are able to do what we do, and have what we have and our relationship and stuff. And Betty just loves Bud.

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Everyone in Club acknowledged that Joanne called the first gathering of the group that subsequently evolved into the Girls' Club. She reflected on the early days of

the Club and the various people who came and went without too much notice. She pointed out how her own mother had been in a "club" for many years, and she speculated that her childhood experiences with her mother's club may have been a possible unconscious motivation to her to call her friends together.

It started at my house, well, my apartment. We had just graduated and started working and then we had just gotten married. I just wanted some of the girls to come over and see my new apartment, and I don't remember exactly who all was even there. I'm not clear with how and when some of them came in. I don't remember that real clear.

It was like late summer when I had them come over. I guess one of us said, "Oh, we should do this another time." And then, who took it next, I don't know. Where we went next I don't remember it at all. And then I remember having the babies, and it was like, who had a baby first, and who wanted a baby, and who was envious, and who. . . .

It grew over the years. First, Angie was real important to Anne and Patti. Angie came and Angie brought Carole in. Carole came one time when we were at Angie's house for Club. I guess we asked her if she wanted to keep coming, because she wasn't in our class. I remember Louise and Dolores and Betty from the beginning. There was 10 of us at one time. . . another person there for a few years was Gloria Zapka. Janet came for a year and a half. And that was recently, and when I say recently, that was in the past 10 years. She came, just for a year or so. She was never in the Club, no. And she was like, an amusement for all the rest of us. She would talk about her life, and it was so different.

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It started out as one thing, and over the years it's changed and changed and changed and changed. It started out as just keeping in touch with people. I don't think

we even realized that's what we were doing. And certain ones came in, certain ones left, it was like nothing was etched in stone. We just did it every month. And we never even attempted once to do anything. We knew we were just going to sit and talk. And eat!

In the beginning it was a chance to get away from the kids. That was our night off, in the beginning, when we first got married, nobody really went anywhere and did everything. So it was, in a way it was a night out. Some of us could get out easier than others. Like others would maybe come after they had to put the kids in bed. And I was very lucky, because I didn't have to worry about that, Buddy put the kids to bed.

Maybe we just needed somebody to talk to. Knowing you had somebody to talk to. Maybe I thought about something like this because Club wasn't something new to me. It was something I knew because Mummy had a club. I remember her club and I remember being there as a kid too. I know I thought about them and what they did.

We used to do all kinds of crazy things. We were into crafts at one time. For Christmas we used to do crafts for everybody. Half of my Christmas decorations were made by some of the girls. We would do them for each other, plus, give them as an extra gift. We'd exchange and buy gifts, but that was an extra thing. When our lives were the most complicated, that's when we did these things. Now our lives should be easier, and we don't have time to do these things. We don't do that anymore. We just buy gifts and that's it.

And I think we even started out going out for Christmas, well, no, we started having big dinners. We used to have big dinners. We'd cook all kind of big meals, and we'd be eating like 10:30, 11 o'clock at night. And then we'd sort of thought, hey, this

ain't going to do it. I can remember cooking spaghetti. We would even have Christmas, big Christmas dinners, at whose ever house it was going to be. But even just for regular Club, we had hot foods, always. I'd have hot sausage.

And then it went down to maybe hot sandwiches. We kept drifting away from big stuff. And then it ended up with snacks and a dessert, which it is now. But now we're getting back into hot hors d'oeuvres. So we're right back to eating just as much.

When the kids were little, they always knew when it was Club night. And they looked forward to eating all the leftovers. "What're you going to get for Club?" We used to bake a lot. We don't do that anymore. Except, Betty does, she always makes a pie.

Joanne catalogued the changes she has seen in the Club as the years have gone by. But as much as the Club women and their lives have changed, Joanne described how when she sometimes looks at them, it is as though the years have not touched them and time stands still.

It didn't start out to be the Club then. The way it started was the way it was in high school. It was always Patti and Anne together. And me, Dolores and Betty. We were always together in school.

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I think now it's probably more important than it ever was. Because now we all value each other's friendships more. We depend on each other. And I think everybody can talk more freely now than they used to. Before it was yak yak about the kids all the time. And now it's more about our lives; how what we're doing and how things affect our lives.

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Sometimes I look at them I think, "Gee, whiz, they're getting old." And sometimes I think they're looking pretty good. And then other times, I see them as they were in school. We were close in school. We were together always going places together. We walked back and forth to school together. We talked on the telephone all the time. They were my girlfriends. That's who we went to dances with, the football games with, we went for walks, we went to Pokorski's, we had Cokes, and went looking for boys together. We were close always.

Joanne identified what the Club has done for her and what the Club has meant to her over the years. She described both the tangible and the intangible gifts the Club has brought into her life. The support of the Club helped her navigate a particularly difficult emotional time in her life. She sees herself as the primary beneficiary of her "sister friends."

Club has always been right up there. I never wanted to miss going. I always made sure I was there from the very beginning. It's like I know who these people are. They've been in my life forever. They're familiar. They're people I can count on because I've known them and they know me and so I feel like I know them good, inside-out. We have a lot in common. We get into the Italian part of it a lot . . . and it's only me Anne and Betty. We talk about being Italian a lot. And Patti, I've learned a lot about Patti's religion, and how important it is to her. Club has always been a part of my life and there was never anything negative connected with Club. I've never had conflict personally with anybody.

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I would never think of missing club, and I've never never missed Club unless I was in the hospital sick. I've never missed Club just to miss Club. I either was away on

vacation or I was sick in the hospital. Having a baby. I mean other things I would pass over, I know I can't do that because it's Club night.

Just to know you have these kinds of friends that you can talk to. Just being able to talk. Whether they say anything back or not. Just to talk to them. And you sort of know without them saying anything that they're behind you and they're there to help you. And I've certainly tested all their friendships probably more than anybody, I mean, all the times I'm sick, they're always there. I'm gonna cry.

They're always ready to do anything, whatever it takes, they're always right there. Whether it's just a phone call or bringing food over or cards or just to let me know they're there. They're there and you know they're there. Like I said, I'm always the one needing somebody. My life is always needing somebody.

And I always feel bad because I don't know how I'll ever repay any of them. Especially Dolores and Betty. I can't ever repay them. Well, Dolores was in the hospital one time, but you can't repay people like that. Can't. We just, the three of us mostly feel like, well -- as Dolores always says we're sisters -- like we're "sister friends," she says.

Especially her because she has nobody. She always tells me that. She says she doesn't have any family, and she feels I'm her family, and Betty's her family, her sisters.

These girls go beyond question. They don't have to do anything. You just know they're there. I don't know how to explain it. Whereas with family, they may be offering out of obligation, they think they need to, they have to because that's what's

expected of them. But these girls certainly shouldn't feel anything is expected of them, they just do it because they want to do it.

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On any occasion they're there. With the weddings. When it was christenings, or communions, we'd all bake for any occasion with our kids. You always made something. If there was a death, we always made something. Brought it to them.

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There'd be times when right in the middle of all that mess with the kids. . . I was constantly on the verge of tears. Anything anybody ever said would just set me off crying. I knew that my feelings were real close to the surface. I would cry over anything.

And the girls, they knew all about that, then they were there for that, too. I mean Betty and Dolores knew every single detail of everything, and that's when Betty used to kid me all the time, "Why aren't you taking notes and writing this down, you could have a good best-seller." Like my life is so interesting and hers isn't? But they were a big part of that. They helped me through that a lot, just talking to them, listening. I didn't do that by myself at all. I didn't think of talking to some professional, because I didn't feel I needed to, I don't know. The girls were the people I needed to talk to. I never even gave the idea of a professional a thought, and I thought I was going nutso half the time.

Joanne, like other members in the Club, was aware of and valued Club's unique communication patterns. Joanne described the experience of participating in this communication style.

Eventually, the girls will know everything. Yeah, they know there's been a problem. Betty and Dolores know every detail. When we were at Club last month, I

just didn't want to talk about it. It's like, I needed a break from it. I live it all the time, I don't want to talk about it now. I told you, it's like, I've done this all already, why do I have to do this again? But then, they'll know. So it's not anything I would keep or wouldn't say to them, tell them.

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I think what we do is we wait for an indication as to what we want to say. We wait for them to maybe hint at something. As soon as she feels free enough to say one little thing, then we feel more free to talk to her about it. Then it'll be real easy to talk to her about it.

When she broke the ice and said how she felt, she broke down that one day, crying and she did the same thing with me. Now it's easier to talk to her about it, and I think she feels easier talking about it. Hey, talking's hard to do. It's hard to do. There's a lot of feelings like embarrassment and pride behind it. But you can tell each time, she gets more and more open about it. I'm glad. It's good for her. That's what I told her that day, I said, "There's nothing any of us can do, except we can just listen to you. You just know that we're here if you need anything at all." That's all.

4.7 Patti

“Everyone in Club you can totally depend on.”

Patti got up and down several times during our interview to let her cat, Pretty Boy, in and then out again. She loved the cat and I could easily picture her bundling him into her comforter and sitting up with him the night he came in after being out in 13 degree below zero weather. From the looks of him, he had obviously recovered under her watchful and caring eye.

Patti lives at the end of a cul-de-sac in a hilltop subdivision in Kennedy Township high above the streets of McKees Rocks. For the past 23 years, she has taken care of her small bungalow by herself -- cutting the grass, cleaning cutters, painting, fixing windows, everything. Both she and the house look fit and sturdy. She has had a lot more time to devote to the house and yard since her retirement after 33 years of service from General Motors Pittsburgh Regional Division, where she worked as a secretary in personnel.

Patti knows exactly how long it takes to get from her house down to the Bell Avenue row house in McKees Rocks, where her mother and her sister Gloria live. She knows the exact timing because she has made more than one emergency trip down there. Neither broken ribs, a heart condition, a flood, nor a fire, which caused a lot of smoke damage to the houses in the row, has been enough to move Mrs. Fedyshyn out of her Bell Avenue neighborhood to the hilltop house to live with her daughter. Now, in her late 80s, she still wants to stay in her home where she has “work to do.”

For Patti, it would be a whole lot easier to have her mother live with her. She would not have to run up and down the hill, which gets harder and harder in the bad Pittsburgh winters. More important, she would not have to worry every time the phone rang that something has happened to her mother. She worries a lot about her. But in other ways, Patti has lived alone -- with the exception of Pretty Boy -- for a long time. The adjustment to living with her mother and perhaps her sister again, as she did for a long time before she was married, would be considerable. It is an adjustment, however, that Patti is altogether willing to make.

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Patti's maternal grandparents emigrated to the United States from Poland and the Ukraine. They met in Chicago, married, and had eight children. Patti's grandmother supplemented the family income with one of the few acceptable wage-earning activities for traditional immigrant women -- taking in boarders.

My mother was born in Chicago. She was one of eight children, the oldest daughter. She only went to the eighth grade, because in Chicago, they're lucky that they made eighth grade because they had to quit and go home and work. She graduated eighth grade and she worked. She had a couple of jobs. She worked at Cuneo Press; it was a magazine company. And then she worked at a company where they did wicker baskets.

But my grandfather and grandmother, they came from Europe. He was Polish, part Polish. In those days Ukrainians and Poles didn't get along, so you had to sort of keep everything quiet. The Ukrainians were against the Poles because of the way they were treated over there in Europe. My grandmother was Ukrainian so she raised all the children Ukrainian.

My grandfather worked in the railroad, and he built a house on Ellis Avenue, near 91st in south Chicago. He was never sick, but then all of a sudden, he had a heart attack and he died right there at the railroad in November of '33.

My mother was the oldest of eight children. My grandparents took in boarders. The brick house my grandfather built was just one floor, but there was four bedrooms. I don't know how many boarders they had, but every boarder had their own hook where they hung their clothes and their bucket was underneath for their lunch. My grandmother used to cook for them and make their lunch, and wash their clothes. And so my mother had to go to the store, and buy all of it. And each man had their own book so it was organized.

Patti's father emigrated from the Ukraine and settled outside of Pittsburgh in Ambridge. He went to seminary to study for the Ukrainian Catholic priesthood in Canada and then moved to Chicago for a "professorship" (a role related to being a deacon) at a local parish, St. Peter's and Paul's Ukrainian Catholic Church. He met Patti's mother in Chicago and married her during the short window of time before his ordination in which the church permitted its priests to marry.

When he first came to Pittsburgh, he had a brother, who we aren't even in contact with any of his family anymore. He was sponsored by Mr. Yaworski in Ambridge.

When he came to Pittsburgh, he had his tag on, and his brother took whatever money he had and told him he would take care of him, but his brother took all the money and that was that.

But from Ambridge, he went to seminary in Canada and then he went to Chicago when he was deaconized. My father was the deacon and professor there at the church and he boarded in my great aunt's house two houses down from the church. Before you

become ordained, you have to be married if you want to be married, because once you're ordained, you cannot marry.

In those days, when a young seminarian was in the area and he was looking for a wife, they would announce it in the hall, and all the young girls would crowd around. He met my mother then and I don't know how long they courted. They were married in Chicago on September 1, 1929.

In those days it was like an honor to marry a seminarian. My grandparents went into debt for the wedding. They had a reception in Woodlawn Gardens in south Chicago. You can't even ride down in that area anymore. It's too dangerous. My mother had the full wardrobe, the dress, the slip, the underpants, the headpiece made of lace and a big train.

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When my mother got on the train to meet my father at his first parish, she had a thousand miles to go. My grandmother said to her, "I'll buy you a trunk, because you will be moving and you'll need a trunk." The trunk is as big as this table and my mother still has it. The trunk went by freight. Everywhere we went that trunk went. She still keeps things in it. She has her wedding dress and everything intact and my father's bow tie from the wedding.

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My mother always longed to go back to Chicago. Sometimes when she heard the train whistles, she would cry and think about home. I guess because she came by train. So it was nothing for us to get in a car and go for a weekend. We were always in Chicago.

Or my grandmother would come to visit. We used to go to the Pennsylvania or the B & O Station -- down where Station Square is now. When I go into that restaurant, I can still visualize all those people, all the doors open, and everybody coming off the train when we used to go to pick my grandmother up. We have a connection with Chicago because that's where our relatives are.

The fate of the young Ukrainian Catholic priest and his family was in the hands of his parishioners. Patti's family traveled from city to city as Basil Fedyshyn carried out his ministry for one church and then another. Patti recalled how hard her father worked, sometimes for two and three churches at the same time. She also remembered how demanding church members could be and what it was like as a child when "the priest" was your dad.

My father was ordained in Philadelphia and then he came to Chicago and then he was just on the road. Wherever the bishop says you're being transferred, that's where he went. He went to Hempstead, Long Island, and when he got there, the church wasn't even built. My mother has pictures where just a foundation was in the ground. The pictures show the different phases of the church being built with the donations they got. That was their first parish. Then they went to Ford City, Pennsylvania, where my sister Dorothy was born. From there, they moved to Buffalo, New York, where Gloria was born. Then they lived in Plainfield, New Jersey, and then back to Long Island and that's where I was born when we lived on the Tappan Estates in the Tappan Ranges. In those days, they didn't have a parish house for the church, so Mr. Tappan offered a vacant house which was way out in the woods to live in. The caretaker lived next to us and he took care of the farm and the property.

I remember being out in the woods. My father had three parishes then. My brother who is seven years older went with my father everywhere when they went to bless baskets or bless the houses. So from Long Island, then we went to Bakerton, Pennsylvania, a coal-mining town near Barnsboro. And then we came to Pittsburgh.

A cousin passed away and my father came to the funeral. The people liked his voice and they wanted him to come to St. Mary's Church in McKees Rocks. That was in February, 1943.

We lived in parish homes and we never had personal furniture because all you had were your personal belongings. Every time we moved, we packed up the trunk, put everything in it and shipped it by freight. We were all in the car. I can remember when we lived on Long Island and my father would come home so tired because he had three churches to go to on Sunday. He'd come home and lay down and we'd want to go to the seashore. They'd say to me, "Gotta tell daddy we want to go swimming." I'd go in. I can still see him laying on the bed. I'd pull on his pants and he'd get mad and then finally we'd go to the seashore in the big old Chrysler with the green window blinds on it.

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He was dedicated to God and dedicated to the church and to the people. And my mother always worked hard, never complained. I remember how my parents worked as a team together. They cooked together and they worked in the garden cause wherever we lived we had a vegetable and a flower garden. My mother was always quiet, never answered back. If my father was mad about something, she would be working at the sink

and she never said a word. She'd just keep on working. Sometimes I'd see a little tear in her eye but she'd never say a word

She was always busy doing the pastoral duties. She had to bake the bread and have his vestments clean and all of us clean. When we lived in Bakerton, a coal-mining town, we were the only ones with running water, but we didn't have gas heat. We had coal heat. She would get up at four in the morning to bake the bread and make all the foods for holy supper. She worked all the time, work, work, work and never complained.

They spoke nothing but Ukrainian, but we never responded. We knew it but we would respond in English. When my father moved from parish to parish, he'd start up a Ukrainian school and I would only get so far. I can sight read. It's hard to read Ukrainian and write it, but I know it from singing in the choir. But we were not educated in the language enough. People would say, "Gee, your father was a priest, you should know Ukrainian." And I say, "My father was dedicated to the people. They came first and there was no time for us."

* * * *

Our family had a lot of closeness in Bakerton and Long Island. You had all that land to run free and he did spend a lot of time with us, especially at night. We had a big old radio with one little dial where you can only get one station, and we would sit around and listen to it. When it was Lent, he'd pack that radio away and we weren't allowed to whistle or sing.

I was proud of my father. At school when you had to tell everybody what your father did, everyone would say things, like “worked on the railroad.” I used to think “gee.” I didn’t realize that what he did was like a profession. Your father’s just a priest!

* * * *

Our holidays were always different because of our Easter and our Christmas. I used to say, “Can’t we have a Christmas tree with everybody else?” We wouldn’t put ours up until January 6th. But I didn’t realize it until I came to the Bottoms because so many people had their Christmas on December 25.

Patti recalled the traumatic story of what happened to her father and her family when the parishioners of St. Mary’s in the Bottoms decided that they no longer wanted her father’s services.

My father was sick at the time that we lived in the Bottoms. He had a breathing problem. When he would serve the services he could barely make it up the three steps at the altar. The people were famous for evicting their priests whenever they felt they didn’t need them any more. And that’s what happened on December 23, 1946.

We were evicted. The sheriff came to. . . I might get a little emotional. My mother had said to us before our Christmas vacation at school, she says, “Well, maybe you tell your teacher that you won’t be going back to that school.” We were going to Wilson school, so we didn’t ask any questions.

They came to the house, I remember the sheriff came right to the parish house with the parish president. I must have opened the door. I remember my father was still at the doctor so they went into his office and waited. When he came home, he went and

sat in the office. You would think a sheriff looked like you see in the movies -- a cowboy with a badge, but he was just a man dressed in a suit with a vest, three piece suit.

They must have had some papers and then they presented it to my father. I can still see him in the parish house. He like, almost collapsed and fell back and fell on the chair. I was just nine years old, and I remember I just screamed real loud, and I screamed so loud that his eyes opened up.

Then we had to pack all of our things. We had a wooden barrel that you put your dishes in. I remember they were checking every piece of article that we took out to see if we were taking anything. We weren't even aware what was going on, just my father and my mother.

It was very hard, it took us a long time to get over that because that hurt was there. We had no place to go, because we didn't have any family in the area. We had no place to go. Down on Helen Street there was a place called Mary's Kitchen, and it was like a hotel. The lady who owned it, her name was Mary Spack. My father went there and asked if we could rent a room, and she says, "I can't take the girls, because I only have men here. I could take you and your son, but I can't take your wife and the girls." But she says, "I have an apartment on Bell Avenue. It's on the end, and you can stay in there as long as you want."

We took the car and we found our way up there. It was across the street from Shanta's garage at that time. We went in there. She used to take care of all the people that came from Europe. When they died, she took the clothes and must have just stored it in there. But I remember we went in the front room, and there was a mound, I'm not

kidding you, like a tent of men's clothes, suits or whatever. I remember my father broke down and cried. . . y'know, like he let his family down. So we had nothing, we didn't have any heat there, and there was no lavatory. There was just a commode downstairs, there was no bathtub, there was no hot water. I don't even know if the electricity was on. I guess there had to be electricity.

That's the same row where my mother lives now. Friends of ours, Mr. and Mrs. Ponchak, they had a saloon, and they lived down past the Regent Show and friends of ours from Carnegie came. They brought a coal stove and a little gas stove. We didn't have a refrigerator or anything. Mary Spack's daughter lived on the opposite end of the row. She felt so bad for us that she came and brought us a little artificial Christmas tree with the decorations because it was two days before Christmas. It was December 23.

It was hard for my father to really accept. But the very next Sunday, he took us three girls to church in our two-tone blue '41 Nash. I remember when we got it in Bakerton. It was right before the war. He wanted a black one because a priest had to have a black car. And they said, "Father, all we have left is this blue one. And they will not be making anymore cars," so he said, "We'll take it."

Anyway, that's the car that we had, and he took Dorothy, Gloria and myself. And we went to the church. He dropped us off in front of the church. We were embarrassed because we were just evicted, but we went into church, we had our little tammies on, and we went in. You could hear the people whispering. And we had to go to church every Sunday, the three of us. Then he would go and park by Tinnie's, way down on Ella Street at the end. And when the bells were ringing, he was crying so hard.

That's the dedication he presented and we lived by it. People would say, "How could you go back there after what the people did?" We would say, "It's not the people who takes care of us, God will take care of everybody." Here I am crying.

After that traumatic incident, everything in the Fedyshyn family's life changed. The family slowly pulled themselves back together, but it took every one of them to make it. Everybody had a role in the family's economic survival. Everyone worked and everyone's labor was needed.

I don't know what money we had to live on. My brother was in the tenth grade and he felt that he had to go to work. When we moved in there, we had no beds and no place to sleep. I think Dorothy and Gloria stayed with a girlfriend. I think there was one bed. We went to the Salvation Army up on Island Avenue where they had a thrift shop and bought a straw cot for my brother to sleep on in the kitchen behind the door.

My brother tried to quit school because he knew he had to go to work. My mother went to work at the Clark's Candy Company. She felt like people were looking down on her because of a priest's wife going to work, but she went to work. In the morning my father would get after my brother with the strap for him to go to school.

My brother jumped up on the bed and said he had to go to work. He went to Rosenbaum's and he washed walls there. He put down on his application that he had six dependents, but he was only 16 years old. So they called him in the office and they said, "You must be mistaken. You're only 16 and you have six dependents?" He said, "I really do. If you count me, I'm six." My father was broken-hearted that he quit school.

Dorothy got a job working at the Roxian Show selling candy after school. Bobby Borden, the fellow that I married, lived down the street in the yellow row. His father was

the chief of police. He had heard what had happened and so Betty Borden, Bobby's sister, came to the house and said they had an opening at the show selling candy. So that's how she got started. She went to work and they moved the candy inside the lobby. Then Gloria got a job as the relief girl, because Dorothy moved up to popcorn. Then Dorothy was cashier and Gloria was popcorn and then I got in. It was the three of us. People used to come in the lobby and they'd say, "What are the Fedyshyns taking over? Is your mother collecting tickets?" So we just raised ourselves.

I remember Mr. Naft and making \$12 a week. I didn't want to cheat people. I knew everybody. When we made popcorn, you had a container where you put your oil. There was a crank you were only allowed to crank once. Then Mr. Naft would say, "I told you only one, that's enough." As soon as he'd go in, I'd try to squeeze in another half in there. Because he was all for himself. He didn't want to please the people.

I think back and even my aunts in Chicago said anything could have happened to us cause my father wasn't in very good health. Then my brother enlisted in the Air Force just a year before my father died. My father died April 29, 1949. He was 49.

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I was going to McKee School and that's when I became acquainted with Betty, Joanne, and Dolores. I didn't realize how sick my dad was. One day the principal came in the room and said my name. I stood up and I wondered what was wrong, because I had a heart murmur and I thought there was something wrong or that they were going to do something to me.

And the principal wouldn't tell me what was wrong. And then we came down the steps and I saw Gloria down there crying and I knew. But when we came back after the funeral, I went to give the teacher an excuse, and she said to me, "What did your father die of? What was wrong?" And I ran to my seat and I couldn't talk and I was crying. I think she apologized later that she shouldn't have done that.

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My mom lost her job at the Clark Company so she started working cleaning offices. That was hard work and then she worked at Donahoe's downtown. I remember when she would come home late at night I used to feel so bad.

It was a hard life for my mother. I didn't realize at the time that sometimes we didn't have that much food, but the mother's the last to eat. There was always food on the table but we didn't have fancy clothes. We had hand-me-downs and people were always handing you clothes. If they fit, you were glad, you got something. But most of the people where we lived were in a boat like that too.

Patti described the Bell Avenue neighborhood she grew up in as a "community." She could not understand why her high school social studies teacher called her neighborhood a "slum." She reflected on how she and other Bell Avenue kids felt when confronted with this type of class-based injury.

Where we lived on Bell Avenue was altogether different from the Bottoms, but we developed friendships with all the people in that area. Behind our home was Pleeb's field. It was big open field and everyone used to go there to play baseball or to play football. That's where we learned to ride bikes and learned to drive a car. The whole community would use it.

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Whenever we didn't have anything, we didn't. We weren't embarrassed. We just didn't have it. And that's all there was to it. When we did get something, we were so glad we got it. We shined it up and took care of it and held on to it. I guess that's why we have so many keepsakes and everything.

Everything has changed. I think with all the stores being open 24 hours a day, it took away the respect for a Sunday. Before the stores would close at six o'clock every Saturday. All the kids got a bath, they knew they were going to church the next day. Everyone visited on Sundays, went on streetcars with their concertinas.

People from Carnegie would come and you made *kapusta* -- the cabbage soup -- or whatever you made to put on the table. My mother would give me five dollars and I would run to Isley's and buy chipped ham and bread, cake, ice cream and pop. Maybe they would have a shot of whiskey and a ginger ale chaser. They made coffee and it smelled so good in that big coffee pot. You'd have a sandwich and cake and everybody's talking and singing and we had a wonderful time and that five dollars stretched.

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They were all fine people down there on Bell Avenue. And then the teacher, John Surdock, in school, he called it the slum area. He says, "If you live down there in Bell Avenue in the slum area . . ." We would just sit there and all the people from that area wouldn't say anything. Yeah, in our POD¹² class, they would talk about "living down there in the slum area in the lower end of Chartiers Avenue." And I wanted to say, "What's wrong with Chartiers Avenue?" But I just felt so bad.

There were a lot of very nice people that were raised down there. It was a good neighborhood, even with the Black people.

Patti presented a personal perspective on the social expectations regarding work that she and other working-class women faced in the Rox in the fifties. Then she spoke about her first job after high school at a division of Westinghouse and the feelings of economic independence that came with it. Patti's work story diverged from other women in the Club. Patti wanted to travel and do other things enough that she postponed plans for marriage.

You only worked when you were single. Then when you got married, you quit your job -- that was the thing. Just the single ones were working. So it was just myself and Anna until she got married. She worked for a little while and then she quit when she got pregnant. That was the thing you did. If you had a job and you were still working, you worked till you got pregnant. With Donna, she went back to work. I don't think she stayed home after her pregnancies. I think she went back to work because she had all different kinds of jobs.

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When we graduated, Anna and I got jobs together down at Westinghouse. It just worked out that way. I think probably 90 percent of the people in that division were from McKees Rocks. We'd all get on the bus together.

On our first day, we didn't know what job we were going to get. Of course, they took Anna because she's brilliant and put her on the comptometer. They showed her what to do and they said, "Don't look at the keys." She didn't know what the keys were but she learned very fast. I became the mail girl. And we laugh to this day because I

could barely make it home that day. I had high heels on and they had me running down to the Gateway Center to pick up tickets and running all around town as a messenger.

I began to buy clothes at the Lea Shop in the Rox, y'know, buy a dress and put it on lay-away. I got my first nice winter coat -- a silver leather coat and I had that on lay-away. Then a camel coat with a leopard lining. I put it on lay-away there in the Smart Shop or the Lea Shop. Anna and I became closer and we used to go to Westview Dance Land. When you were able to have your own money you could go to a restaurant because working at the show, I was making \$12 a week.

When I started working I can't even remember what the salary was at the time, but you were working downtown and you were just moving on with your life. I was in a different league now.

And I always gave my mother half of my pay or more. That's one thing my mother would never ask for. If she didn't have even a penny, she would never ask. When I got my pay, I would always give her half and she would always try to give it back. And I would say, "If I need it, I'll ask you for it."

There were some boyfriends, but I don't know, I just never really got attached to anybody. When I worked in the show, I thought this one was cute and that was handsome. When someone we thought was cute came in, we'd almost faint, and he didn't know who we were.

When Bobby went to the service, I remember when he came home on leave and I was the cashier at the show. Bobby and a few guys walked passed the show and waved

and he asked Joe Sharenko, “Who’s that?” I still remember him saying that and Joe says, “Patti Fedyshyn.” and Bobby said, “Yeah??!!”

All I wanted was to get married someday and I just wanted to have a big house and a lot of room so that I could cook and have friends and family and everybody. That’s what I wanted to do and carry out our ethnic traditions.

I always wanted to set a table and cook and have room and just have the families coming like they used to do in the old days. . . have lots of people and family coming. And outside of that, I wanted to travel.

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When I first moved on Bell Avenue, Bobby and I must have been attracted to one another. Then I was dating him when I was out of high school. He asked me to marry him and I said “Yes,” and then later on, the next week, I changed my mind.

That was a mistake. I said I was too young to get married and that I wanted to travel and that was the end. There’s things that you say, you can never take it back, because everything changed.

That was probably ‘57. Oh gosh, 12 years went by. He had his lifestyle and I mine and we both ended up how it was meant to be. His brother Tom did make a remark at the funeral that at least he got back to where he was when he was young. Back into church and back with a family.

When Patti finally married her long-time Bell Avenue friend, Bobby Borden, she walked into the middle of another family’s problems. She talked about the pain of acknowledging her husband’s alcoholism in an era when there was still a great deal of social stigma associated with it. She tried to construct meaning out of her

husband's death from suicide and to understand how they may have helped each other in their brief life together.

When we got married, I moved in with Bobby and his mother. When I moved in she was happy, but I would never recommend that to anybody. We were not going to be in there very long. It was only three months and then she died suddenly. And there was all that bitterness in their family. You don't realize what a wonderful family you have until you see somebody else's. I felt bad for Bobby because he was in the middle of it.

With the problem he had, I just never gave up. I tried to do everything I could to see that he got on his feet. I never gave up. Not because somebody told me to do that, but I just knew what I had to do.

I had no idea before we got married. Nobody knows until you're in the middle of it. People drank. Anybody can stop. That's what I thought. I thought when you get married, you're going to live a different life, but I guess it all stemmed from his father, because his father was a good man but he had a problem too Anybody can become an alcoholic.

So I says, "God, watch down on me and help me." You think it's something you can handle until you go into it and you don't even know what it's all about. The first time he was hospitalized, I had no idea what it was all about. The first time he went into the hospital, he walked in, and while he was there, he suffered a seizure. Whatever medication they gave, it just like cured him until his mother died. Then that was it. That was the downfall.

He had abstained from it until the mother died. He was like a normal person living a normal life. But it wasn't. It was only the beginning. You can do everything, but if a person doesn't want to help themselves, there's no way you're going to help them.

You have to be hard inside, believe me, hard. I had to be a person that I didn't think I could be. The way I'd talk and then go in the kitchen and almost like faint. You had to be firm with him. You had to sort of be one step ahead of him without him knowing it.

I would go into these facilities and see the destruction in someone's life and what they had to go through, the DTs. I'm in there and I thought, "Where am I? Is this another world? What happened to me?"

I still went to work. I tried to present myself, but I didn't have time for myself. I would lose weight. I couldn't eat. And people would look at me and say, "Where do you get the energy?" Because I would just sit there and just work away. God helped me and my mother and Gloria were always there.

He did belong to the two As and he was going to the meetings, and then he was active in church. I was a church officer and I never forced him to come to church, and all of a sudden one day he just decided he'd start going back to church. When you're sober, you have to live a different life, you lose all your friends, your so-called friends who you thought were friends, but they have to see that for themselves.

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I went to the doctor, the psychologist, and he talked to me and he just said, "You have nothing to be ashamed of." I thought everybody's looking at me. I called his

brothers and nobody came to help, nobody, nobody. They all had their own problems. And his sister cared up till a certain point but she had her own problems.

I just never gave up, going, calling people, and doctors and priests.

He was intelligent. He could do his job well and he was well-liked in the community. He never wanted to go do any grocery shopping because he would go in and they wouldn't want to take the money. He'd say, "Don't send me to the store again," because they would not want him to pay. He was good-hearted and always helped the poor one.

He had compassion for other people. I know one time he called this woman in the project who used to book numbers. She was in a wheelchair and she had a handicap. I remember he called her up one time and tipped her off, because he knew what was going to happen to her. People were in jail and they were homeless or penniless and he'd feel sorry for them and let them out and give them money and he was always good that way.

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His family covered it up for years and years and years. They didn't want anybody to know so they brought the alcohol in every day, every day, every day and then what did they have. He was just a vegetable laying there. But you need an education to deal with it because it happens to people and they don't know what they're dealing with, like when they're addicted to smoking or eating or gambling.

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Maybe I did help him. Otherwise he wouldn't have had a will to live even the first time he got sick. Who was going to take care of him? Maybe that was just what I was supposed to do in life, save somebody.

Patti worked and supported herself her whole life. Her work history included the Roxian Theater, Westinghouse, Kenny Ross Car Dealership, and finally, General Motors. She put in 33 years in the clerical staff in personnel at the General Motors Pittsburgh Regional Offices. Patti's story at General Motors revealed the little-heard history of the female clerical worker caught in a cycle of plant closings and corporation downsizing without the protection of a union. Patti shared her opinion of management at all the jobs she has held.

I'm just happy that I got as far as I did, because I think wherever I started with a job, it ended up that way. When I first worked at the show, all those years of dedication, even at that job when I told Mr. Naft I was quitting, he was furious. Because I quit, like, right after graduation instead of working the whole summer, he was furious. All those years that I put in there, that was the end of that. He didn't come to the graduation or anything, okay, so that was the first job and then things didn't work out well at Westinghouse and I went to Kenny Ross and it was the same thing and then with GM, when it came to the retirement, the same thing, no appreciation.

They closed the plant because they consolidated into Martinsburg, West Virginia, all the plants along the eastern coastline were closing. They had to cut. They had to downsize. I guess Pittsburgh is a bad area. The steel mills are gone. Other zones of the country have a lot more business. So Pittsburgh's production is down so they did away with the Pittsburgh plant.

They let us know five years in advance so that we could be prepared. They set a schedule, every warehouse was going at a certain date. There's a lot of preparation in a plant closing because transferring parts and all that and then talking with the personnel. Every time they had a personnel meeting, they would say to me, "No problem, you've got it made. With your years of service you'll be able to retire, no problem." And that's

all they kept telling me, and every time they sent a personnel rep down and they'd sit with you and give you your figures and go through the same thing and maybe you'd ask the same question and everybody gave you a different answer.

Well, when it came down to me, they said, "No problem." I was supposed to go on layoff like everybody else and I'd be on layoff because all these zone offices are closing anyway. They said, "You'll have it made, you'll be on layoff for two years, and then you can take your retirement."

Well, I was in personnel, and I could see all the papers were coming in and everybody was getting their layoff and their figures and everything and nothing was coming in for me.

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Everything's all up in the air and I'm wondering what they're going to do. My boss was out in Chicago, and they called up the personnel man who was in Jacksonville. And he wanted to talk to my boss who was in Chicago because he was getting transferred. So what it amounted to is they were going to talk to me and tell me that I had to take a job in Service Parts Operation or else retire with no plant closing layoff benefits or nothing, just take 30 and out. So they told me this over the phone, and I was so worked up.

I'd been there 33 years. So what happened, the boss called me, and he says, "Now, just take it easy. There's something I have to tell you." And I said, "I thought something happened to my family," I says, "Well, what is it?" And he said, "You're not going to like this." I said, "Well, what is it?" Y'know, because jeez, how many shocks am I going to have in life? And he said, "Well, that was our personnel man, and they said

that position over there has to be taken by you or you're going to have to retire the first of the year. No special retirement privileges, just 30 and out, you won't get the plant closing layoff benefits." I was like stunned. He says, "Now, take it easy. You have to call them back with an answer."

I couldn't even talk. There was only that one girl out in the office and myself. Because everyone was laid off. There was only two men still working out in the plant. I couldn't even talk. I said, "I knew this was going to happen." "Now take it easy, when you're ready, we'll get a conference call, and we'll get them all on the phone." I said, "I can't do it." And he said, "Yes, you can." I said, "Tell 'em I'm retiring. They can have it. I'm walking out of here now." And he said, "No, you're not, no, you're not. You just stick up for yourself, you just tell them what you want."

Well, when I was ready, I went in and we had the conference call to Chicago and Jacksonville, with the two personnel managers and the director and myself. I just told them that I was very upset about it. I intended to get on layoff and retire just like everybody else and they said, "Who do you think you are, you think you're somebody special?" And I said, "Yes, I think I am. I think I've given you enough of my 33 years of my dedication. Worrying about all the hourly people and the benefits and everybody else, yes, I think I'm special." And I don't remember all the words, but I said, "I am somebody." And he says, "Well, we're giving you a job and you're complaining," And , I said, "The hourly put in a grievance and you spend thousands and thousands of dollars on a hourly grievance, but for me, you don't have time to listen to me?"

Patti's attempts to talk with senior management and negotiate better retirement benefits for her 33 years failed. She had to wait several weeks for the company's answer to her demands to be treated like the hourly workers. Finally, she was told that she had to give the job offer a chance. If it did not work, she would be considered for lay-off benefits and her full retirement. She reluctantly went to work at the Special Parts Operation office and was immediately hit with expectations to use advanced technology that she had not been trained on. It felt to her like a "set-up" to fail.

I went over there the day after New Year's, January 2nd or 3rd. I told that manager, I said, "Well, I hope that I don't have to leave General Motors with a sour taste in my mouth." He said, "Well, if you have to, you have to." I said, "Is that what you get for years of dedication?"

So I started working and I was trying to be real strong about it. As soon as I walked in, I was ready to cry, because I said, "Here I am, working, and the other people, they're all on lay-off, collecting their full salary for three months, and here I am working. I'm going to have to work here till I'm 62."

Then this Kelly Girl; she thought she owned General Motors. I didn't know anything about the personal computer. She was in the personal computer and bringing up all these files and she said, "Did you get that?" I said, "Did I get what?" And she said, "Well, you're going to have to pay attention here if you're going to do this job."

It was like she's showing you, but she don't want to show you, she doesn't want you to learn, because she's with Kelly Girl and she wants them to think that she's so efficient that nobody could replace her. And she told me I had to work in the kitchen on my lunch hour, go to Giant Eagle and buy them their sandwiches and all this stuff. And I just let her talk on and on.

I couldn't even use the typewriters. One was that Selectric, that I couldn't line it up, and the other one had some kind of memory keys in it, you pushed a button and it went every which way. And I couldn't type on the personal computer, and all the phones are ringing, and it got to the point that I just wanted to laugh.

So I guess the boss called her, and he wanted to know how I was doing, and she said that I wasn't doing very well at all. My attitude was very bad. That Tuesday when I came in, she had about four pages of the rules and regulations that I had to follow when I worked there. I still have it. I looked at it and I said, "Fine, I'll cover this with Mr. Dalton, because I worked in administration and I knew all the manuals and the procedures." So when he came in that Wednesday afternoon, he didn't even like, say hello, and I thought "Gee, I wonder what's wrong with him." So he said, "When you have a minute, I'd like to see you." And I went in, and he said "How are you doing?" I said, "I'm coming along." He said, "That's not what I hear." I said, "Well, what do you hear?" And he said, "I hear you're not applying yourself." I said, "Well, I'm doing the best I can under the situation and the training that I'm getting here." And he said, "What do you mean by that?" I said, "You call this training?! And these list of rules? You approve these?" Then I said, "Well, let's go down the line here, and I'll tell you where you're out of line. You can look it up in the manual."

So then he said, "As of the first of February, if you can't do the job, we will write a performance improvement thing on you," and, in all the years that I worked there, they only made one of those for one employee. When I heard that, I broke down and I started crying. Because I thought, I've had this.

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So I left and that whole weekend I just cried the whole time and cried. Where am I going and is this the way they're treating me? And I was so upset, so I looked in the Health Source at the Ohio Valley Hospital, and they had a psychiatrist there, and so I called and made an appointment. So that Monday I just said that I was not going in, that I was sick. I did have a cold. I went to the psychiatrist, and I just told her about the problems that I'm having with the job and everything and she was an Indian doctor, and she was really for me, she was really on my side. I had no idea, I had never been to one. And she took my history from way back, and I'm standing there, sitting there *crying!!!* And I said, "I'm sorry I didn't mean for any of this," but she had the whole file, and I came back twice a week or every week.

They called her long distance, and she talked directly with them. And so then they just decided that they'll give me the layoff. When it came time, they called me on the phone, and told me I was able to retire. And I got my vacation and everything. And the personnel guy wanted to meet with me. He says, "I know you probably don't want to go to the zone office." I said, "No, I'd prefer not to." So we met at Marriott, the airport Marriott. And he gave me the papers and then he said, "Are you sure about this?" And I said, "I'm absolutely sure." And I told him that if I was Black or if I was hourly, they wouldn't be getting away with this.

They're more interested in the hourly people because they have a contract and those guys got treated royally. If they had 25 years, and they were 50, they could retire.

And I said I have 33 and I'm 53. Why can't I retire. Because it doesn't work that way! I think what they do for one, they should do for all.

They didn't care about me. I'm just a head count that's all. When it comes down to it, what did they care about Pat Borden? "Yeah, she was a good worker. Her appraisals were okay. Put her in that job over there. Oh, if she's complaining, then tell her to retire if she don't like it." That's just how they treated me. There was nothing special about me.

Yeah, right, the way they're giving me a training program! Trying to belittle me so I would get out of their hair. And they're trying to make me look like I'm stupid, like I can't do the job. I saw right through that. They're handing this big story. "Believe in me. I want to be your friend." This manager over there, he wanted to give me his hanky and I wouldn't even take it. I said, "I don't need your hanky. I'll use my sleeve."

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For Patti, family, church, and the friends she has in Club have made the world a stable place. Where the work world was not to be trusted to care about her as an individual, her friends, her family, and her faith have stood her in good stead and helped her weather trauma as a child and as an adult.

Everyone in Club you can totally depend on. Everybody. Whatever you would need, they would be there. Everybody at one time had some type of a problem, whether it was an illness, themselves or in their family, or with their children

I respect all of them, I'm getting upset. All of us went to school together, and at that time we had no idea that we would be meeting like this and holding on together with our friendship. I respect all of them very highly and they are all honorable and

trustworthy people and they worked hard and they appreciate themselves and their families. They are good parents and mothers and grandparents. There's nobody in the world that are dedicated like they are. You could go to Chicago or anywhere and meet other people. There is nobody that's dedicated to their parents, their husbands, their immediate family and their grandchildren, their friends like these girls. There's nobody.

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I think Club is such a treasure because even when you work, you develop a relationship with your coworker, but that doesn't mean when you're retired you're going to still keep that. You're together because you've got to be together because you work.

Club's just like these keepsakes, I mean you treasure these. They're material things, but when you look at them, they have a lot of memories. Just like our group, we're human beings, but we look back at each other or these pictures of ourselves, it brings back a lot of memories.

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Outside of my sisters, I would say there's no one else closer than the girls at Club. Even when we see each other in the store, we hug each other and we're so glad to see each other. One time up at the Shop and Save, I saw Donna and she was just at the beauty shop, and then I ran down to produce and I heard somebody call me and it was Betty. And I says, "I just saw Donna." And we're so happy to see each other.

Patti loves the laughter in Club. She clearly articulated how the laughter puts the troubles of the day in perspective. She discussed how laughter can distance pain sufficiently so that it can be dealt with. She even laughed at herself during the interview, making a joke about being the only woman in the group who is not currently married and who does not have children or grandchildren.

All of us are getting to that age where we have problems. We laugh about different things that have happened like when Joanne was having the garage redone. Things like that are our whole evening. When you're in the middle of that, you want to cry, but then you think, "Wait till Club hears about this!"

Each person has a special quality. They all excel in something. The quality of the people and the friendship is genuine and the same, but each excels in different things.

I'm the least to contribute anything about children or grandchildren because I'm the only one without any. But I used to tell them, "That's all right. I'm going to marry someone with 10 kids. And we'll be old and you're going to be coming to that one's communion and that one's graduation! To make up for it!"

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I don't think there's a session where we just sit and cry the whole night. We're not gloomy. If there's something that comes up funny, we laugh. We laugh at ourselves, that's what's good about it. We tell each other the dumb things we do and we laugh at ourselves. I think some people can't laugh at themselves and they can't see when they do something wrong. They try to cover it up and be a perfectionist and they don't want anyone to know they made a mistake.

Sometimes you come there and you're sad about something, and all of a sudden, you just start laughing and crying. Sometimes we're laughing so hard we can't hear the story because who's telling it is laughing so hard. And we're all just screaming. It's cause

we all have so much in common. We all went to the same schools, were disciplined by the same teachers, we're hard workers, we have that discipline in our lives.

Patti described her version of the beginning of the Club. She reminisced about those who left and why. In telling the story of why some left, she further revealed parts of the unwritten norms that keep the group together.

We were all close in school. You think when you graduate, everybody goes out on their own and you don't know what road you're going to go down. I don't think any of us went to college, even though they had the ability to go. Anna could have got a scholarship, Dolores, Joanne, everybody could have, but they didn't make an attempt to go or want to go to college and make a career. They thought they would use what they learned all these years. They went out in the world to see what happens.

We still kept in contact, then the weddings started, then we would see each other for the showers or the weddings, and then we said, "We have to start to get together." And just from one visit, look where that led to.

Then we said, we'll visit the next month and then the next month and then the next month. We picked different people up, and I can remember, we got to the point that we were making big dinners. And then we said, we have to cut down on that.

And then we made it a ritual. I think Anna has the original little book from the very first time that we started, her little book. That book is from our original meetings. She has everything recorded whose turn it was for Club. When we wanted to know about Club, we always called Anna because she had it all marked down.

We were sending birthday cards at one time, and then it got . . . we said, “Nooo, we’ll quit that.” Then we were sending Christmas cards, and we says, “That’s enough. We’ll see each other and we’ll do our greeting in persons.” And that’s how it got started.

Then some got married and moved away, but they’re still a part of Club. When they come back, we try to meet with them. We still have a lot of happy memories when we laugh about all the things that happened. And when I worked, everyone knew about Club. They knew Club night was first Thursday. One time when I had Club and I came to work so tired, somebody said, “Were you out last night?” And I says, “No, I had Club.” And they says, “Get out of here!”

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Carole, Doris, and Angie were close in the Bottoms. Now when Angie comes in, they try to call her and see her. But Doris dropped out of Club because everything in her life was hectic for her. She’s still our friend. She didn’t originally start with us. She’s the first one to get married and she didn’t graduate.

Arlene Vaskevich was in our group maybe about a year and a half and then she quit. She told us her sister was sick and she was dying of cancer so she couldn’t be in Club anymore. She just said that. I don’t think she wanted to be bothered because she was just with us a short while.

Janet Krieder, she just didn’t fit in with us. She was welcome to come, but her lifestyle was very different than ours. At first it was very entertaining some of the stories that she told us, but it was just not us.

Then at Lori's wedding she was dancing the dirty boogie, like she was trying to put a make on the guys. We don't go for that stuff. And none of the husbands do that. That was not our style. I was highly embarrassed. I thought, "Who the heck is she?" It left a sour taste in our mouth and we didn't need any more of that. I think she came to the next meeting; it was at Anna's and it was very cool. Then when we had the next Club, we didn't even bother to call her. We laugh and say, "She's waiting at the phone."

That just didn't go with us. We're all for all of us. If we're somewhere we dance, like Buddy dances with everybody. Everybody is all friends. No one's trying to steal anybody's husband and it never was that way. We just don't do stuff like that. We like jokes, but that's not our style. We were very uncomfortable. Her lifestyle was way out.

Patti catalogued the features of a "regular" Club meeting. She spoke about how unusual it is for someone to miss a Club meeting. Patti compared her commitment to Club to the commitment she feels to regularly attend church.

Every time I have Club, I say, "I'm going to do something different." And before you know it, you're having Club and you're looking through recipes and then you end up almost always making the same thing, and then with me nothing ever turns out right.

We usually make arrangements to pick somebody up. I usually pick Anna up all the time. Or depending which way we're going. If we're going to Dolores', then they pick me up, or if we're going the opposite way, then maybe Dolores will pick up Joanne. And we usually try to make it about 8:30, 9 o'clock, because it got to the point that we were getting there late and before you know it, it's time to go home.

We just come in and whatever is happening, like class reunion or a wedding or shower, we concentrate on that a lot. We just sit and talk and laugh. We have snacks and

something to drink, usually it's diet. We just talk about everything and laugh, and bring everybody up to date on things that have happened, maybe deaths and weddings and just general conversation. Things that happen that we don't think are funny, we just start talking about it, and sometimes it becomes very funny and we're all laughing.

Usually about 10:30, we come to the table and we have a dessert and tea and coffee and then we finish up. Dolores and Donna, they leave first because they have to get up for work, they're the only working girls. And Dolores gets up after five, so they're usually the two to leave first. And then of course in the winter, it depends on the weather. Then we ask who's turn is it next. Sometimes we remember and other times Anna will say, "I'll have to look in my book."

Then around Christmas time, Thanksgiving, we pick our names and we have a riot with that anymore. Because everybody will mark down what they want. And then before we put the names in, we go around and everybody says what they want, and I think last year I wasn't paying attention, I says, "Watch, I'm going to get my own name." So I think we had to pick names three times. And then after that we have the entertainment book. We try to pick a restaurant out of the entertainment book, where we could use a coupon, and benefit from it, because I think about three of us have a book. We decide where we want to go and then usually I make the reservation. And it's usually "7 for 7," and then that's the end of the year. And then it starts in January and they usually have it like, maybe the second week, because it's my Christmas. If somebody has another commitment we change it to a Wednesday or another day because of illness.

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I think maybe when I missed I was deathly sick. I was down with strep throat and I couldn't get out, or I had one of those attacks with the dry heaves. And the only other time maybe I missed was when I was first married or there was a problem with my husband. But I still made it a point to try never to miss.

It's something that we don't miss. Like to just say, "Oh, I don't feel like going," that never enters our minds. I mean, Club is Club. It's like going to church on Sunday. It's how we all feel. Nobody would say, "Oh, I don't feel like going this month, maybe I'll try next month." We just don't do that. We just all stick together. I think that's the only time that I ever missed. And if there's reasons we would cancel because of the weather, or God forbid there's a death in the family, or something like that.

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I think the last time, Anna wasn't able to make it because she was sick. And she never gets sick, but she had one of those attacks like I did. Carole had Club and there's no way she could go. And we just didn't feel right, so right when we were coming to the table, then I called Anna on the phone. I says, "We're all at the table," and some of them talked to her, and they says, "Get well, we miss you," because you know Anna *has* to be sick to miss Club. Even when her mother was in the hospital for those 10 weeks, she was there. It's the same with the other girls. If there were problems in their families, they made it a point to be there. That's the only time that I ever remember Anna missing.

We know that it's a special night. We go try to make something special and we look forward to being together. I guess for everybody it is a therapy. Sometimes you

might have a lot on your mind, or you might have an argument at home or you're upset with things going on somewhere. But you feel you have to get out of there, and you're so glad that there's Club. And then you come to Club and you might be quiet for a while, but before you know it, we're all laughing about something. We just laugh about things. Sometimes, we're laughing so hard that we're crying, and we can't even tell the stories. And those are things that stay with us. We can go home and say, "We had a lot of laughs, or that Anna is funny."

Patti described the automatic and efficient way Club goes into action when a member is in need. She talked about what the group has done and what they would do for each other if and when future needs developed. She used the word "security" and compared the mutual assistance they give to an insurance policy.

If you need them, they are there. If someone is ill or in the hospital like in the family or we hear something, whoever hears it first, then that person calls, and it goes down the line. Everybody contacts everybody and then we talk with each other about what we are going to do. Everybody makes the decision and handles it on the phone. If one of us is ill or something like that, we wouldn't even ask. We would know the situation and we would just talk it over and we would just be there.

That's like a security. That's a security that you don't have to pay for, like an insurance policy. It's just part of your life, it's sort of like your family. Sometimes you can't depend on your family if they live away, or they have other things, but here it's a different type of friendship.

I always say to Anna, "I don't know where I'm going to end up at. If I get to that point, call Kevorkian!" And she says, "Oh, we'll never let that happen!" She means it.

We know when a person really needs us. Like Betty and Joanne and Dolores are close and they sort of keep tabs together, but if they would need us, they know we're there. And Donna, she's pretty independent, but if she would need us, we would be there. And with Carole, the same way.

We all do that, like if there's a death in the family, we contact each one. Someone orders the flowers or makes the arrangements. We talk about what we going to make or what we are going to bring. We wait to see what the arrangements are going to be, and the ones that can go, they go. That's what we do. We're not forced to do it. Nobody said, "These are the rules, you gotta follow them." But it's just what we do.

We just go down the line from one to the other. We make the arrangements, we go to funeral homes, we go to the hospital. I hope there would never be a day that I would be bedridden or none of us ever think of that, but whatever the necessity might be, I know we'll be there for each other.

She elaborated on the Club qualities that kept people's trust, including her own. She disclosed what Club has meant to her over the years, what she has given to it, and what she has received from it.

We have genuine respect for each other. You know that whatever we say at Club, it's like a therapy. And we know whatever we say, we keep it to ourselves, and we understand. I know they don't go home and run to their husbands and say, "This is what happened." It's just like when you work in personnel and people confide in you. They talk to you, they have a problem, and it doesn't go any further than that. It's registered, you think about it, you help them out, and it stays sealed. I feel that's how our friendship is.

We feel that whatever we say, we know can be trusted . . . not that there's some great secrets that we have to talk about. It's like a therapy. We talk and we all feel for one another; we laugh together, we cry together, we work together.

We all understand each other. Each person had personal problems somewhere along the way. We never questioned or degraded anybody or belittled anybody or ever felt they we're better or we were less important. We were all the same.

I don't think there's anything we could say that we would hurt one another. Because it's all been genuine all the way. When we have meetings, if we want to voice our opinion or disagree, we just say it and that's it. We never have any squabbles and nobody ever had any spats or anything.

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Whatever we talk about, it's like a closed session, it just stays there. There's things that we know we can talk about openly, but other things, we have trust in each other. We feel we could say things, and they understand. Or if we have a problem or something, if we feel like we want to talk about it, fine. If we don't, we don't.

Patti discussed the one time she almost quit Club. She explained her feelings and how the "girls" responded. She also described how the "girls" treated her when she embarked on one of her trips to Europe and what they did for her when she "retired" from General Motors.

Sometimes in the beginning, I'd say, "I'm going to drop out." I was the only one that wasn't married. Then when I got married, I didn't have any children, I didn't have any grandchildren. We'd be at Club and they're all talking about this teacher or that, and

then I'd come home and I'd say, "I just feel like I don't even belong. I don't have anything in common."

I mentioned it a couple of times to Anna and she says, "*Oh you most certainly are not quitting!* What do you mean quitting? Never mind!!!" And I says, "Well, I don't have anything to say. I go to say something, and they're not interested because they're talking about this that and with their husbands." All the kids were in school at the time.

And I'd say, "I just don't feel like . . . what am I contributing? I don't have anything to contribute." And Anna says, "*Don't be ridiculous!* We're all friends regardless of whatever. Because they're all married, that doesn't make any difference." That's what she meant, that we're still friends, regardless if we have a husband or if we don't, or if we have kids or we don't.

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When I was single, and I'd go on vacations, they were all married and having children, and I was still traveling, but they were anxious to hear when I came back what happened. When I went to Europe in August of '65, they were all so happy. They bought me, I still have it, a traveling iron and they were so happy that I was going. And they were interested in wherever I went on vacations with my family. Then when I got married, they were there, and then through the hard times when Bobby died, they were there.

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The girls knew I was a GM girl. When it was the retirement fiasco with the plant closing, I didn't go into all that detail, because I was just so upset and it was too lengthy

and involved. When I talked about it, they were there to listen to me. And when I got over that hurdle and I told them I was going to get the retirement, they were real happy.

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The girls gave me an orthodox cross for my retirement. They said because of all the years that I'm always contributing for their children and all that, they gave me that cross. Oh! I wear it all the time. That's what they gave me.

For Patti, Club has meant belonging with a group of genuine and down-to-earth people – people who do not pretend to status. These are people who are what they seem. She knew from her working experiences that such authenticity is not something to take for granted.

The way we have Club, that's the way we do our life. That's our lifestyle. What we are is what we show when we're together. I don't think any of us are phonies. We're not going to put on like we're somebody so great or what we have is so great. Nobody's trying to outdo the other. None of us are like that. You only do what you feel you can afford. None of us ever try to hurt each other. We respect each other. I hope I've never hurt anybody. If I ever did, I didn't realize it.

What we are, that's what we are. I used to feel bad because I lived down on Bell Avenue and the situation when we lived down there and we didn't have a home. I never thought I'd get off of Bell Avenue. What happened years back, deep inside, it did affect my life because I always felt I wasn't good enough for everybody because of what happened. But with the girls, what we are, we are, and what we have, we just show it.

Wherever we go, I think we'll still be ourselves. Whether we're out at some fancy affair or just being at Club, we're still the same type of people. One does something

different or she has different habits. Maybe one cooks a different way or is organized different cause nobody is the same, but where it counts, I think we're still all the same.

Like Donna in her profession, wherever she goes, she does her work professionally and she is so good, but she's still the same person. And she's going to come back to Club and just be Donna. You wear different hats for different occasions, but basically, we're all the same. We all practice our religions. Nobody tries to outshine anybody or look down.

4.8 Carole

“We never run out of words.”

Carole was not a member of McKees Rocks High School's Class of 1955 like the other “girls” in the Club. She was a year behind the rest of them, but she was best friends with Angie Verlinich, one of the early Club members who did graduate with the Club women. No one knew for sure when she started coming. Even Carole's own recollection of the sequence of events was fuzzy. The one thing everyone did agree on was that Carole's connection to the Club was Angie.

Carole and Angie had been “best friends” since Carole's family moved in two doors down from Angie's on Shingiss Street in the Bottoms. They did everything together from grade school on.

Angie invited Carole to one of the early gatherings of the Club. It was a natural thing for her to do. Carole started coming regularly and was as much a part of Club as Angie herself. When Angie and her family left McKees Rocks in 1970 because of the relocation of her husband's job, Carole had been to Club as much as Angie. Angie left and Carole stayed.

Carole still talks about the “girls” like an underclassmen would talk about the “seniors” she admired. She looks up to them. She identifies with them and shares many of their memories, but no one -- neither the “girls” nor Carole herself -- seems to forget that she is a member of the “class of '56.” Carole has been a part of Club almost from the

beginning, yet both she and the other “girls” seem to hold her somewhat apart from the Club’s core.

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Carole’s family history began with a story of ethnic discrimination against her immigrant mother. The story had long-lasting impact on the rest of Carole’s life. As Carole talked about her early memories growing up in the Millvale area, she revealed a picture of the Pittsburgh area prior to its suburban development.

My mom was born in Volduchy,¹³ Austria. She came to this country when she was six years old, and she told me this story one time, made me really laugh. She said that whoever was to meet her at Ellis Island, had to wear a black velvet dress, but mom came in July, and this person was dying from the heat, because she had this black velvet dress on waiting for my mom. But my mom came here from Austria.

I don’t know if she came with my grandmother at the time, or if my grandfather was here already, but they lived in Millvale. That’s where their home was, and she met my father in Millvale; he lived there also.

And it’s kind of a sad story, because when my mom and my dad met each other, his family did not want my mother in their family because she was foreign born. And when they got married, his family disowned him. So as a result, I don’t know any of the Wikert side of the family. I mean, I really don’t know who they are. I’ve met them since, like when my father passed away, I did meet them, and they did come to the funeral, but if I were to come in contact with their children, I wouldn’t know who they were.

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My father was educated in this country. And I think that's why his family were so set against my mom, because he had a college degree. And my mother didn't, she only finished the sixth grade.

I know his mother was born in Germany, and his father was born in Holland. When I found that out, I thought, well, what's the difference? That's why I think there's more to the story. But I don't know what it is. It seems strange.

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But my mom was one of eight children, and that was my family. And they were very close. The family was very close. Every Saturday they got together in the summer at my uncle's house, and they would play cards, the kids would play. My uncle had horses, we would ride the horses, play with the cows, and we really had a good time.

My uncle lived now on Ingomar Road, that was the country and now it's all built up. But before, back in the forties, his house had nothing around. There was just farmland and it was very nice, and we used to go there because there was so much to do.

A major factor in Carole's life was that she was the youngest of three children who were born over a 20-year period. As a consequence, Carol's brother and sister were significantly older than her.

Now, my sister is 15 years older than I am. And my brother was 13 years older than I am. My sister June was born in 1923, and she got married when she was 16. And she had a boy when she was 20, Wayne, my nephew. He and I are only five years apart.

My father was so angry, because she got married so young, and she didn't finish high school. He told her he didn't want her to stay at home anymore. He wanted them to have a house of their own. They didn't have the money for it, so my brother-in-law was

going into the service anyhow. He was drafted, so she lived with an aunt for a while. And then I don't know what had happened, but my dad wanted her back home. He didn't want her with the aunt. I guess, you're mad for a while, and forget it.

So she came back home with us, and then Norm went into the service. Must have been the second World War, but he went off to war, and he was gone for four years, and Wayne stayed with us. So he was four when his father came home. Well, of course my mom and dad didn't want him to leave. And my father asked Norm if he could adopt Wayne. But he said definitely not, and I mean, then I didn't understand, I was nine years old, so how could I understand. I was very upset with that, because I mean, he was with me all those four years, and I felt he was like a brother. I didn't want him to leave, and my dad said, "Well, I understand, but I really would like to have him as my son." Well, Norm says, "No, he's my son, he's going with me."

He was just like my own brother. My own brother, Fred, was 13 years older than I was, and we were always close. Maybe because I was so young, they took me everywhere. It's just like, okay, wherever you want to go, we'll take you. And my brother was very kind to me. My sister's still alive, but my brother's not.

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My brother was always there for me. My brother drove a motorcycle and that's how I went back and forth to school. When my mom and dad moved to McKees Rocks, it was very hard for me. They moved in February and I didn't want to leave school and start another half year there, because only a few months were left. So my brother used

to ride me back and forth to school to Millvale in a motorcycle. Could you believe that?

I think of it and I think, oh, "What a hooligan!" But he was very good to me

Carole described her immigrant mother and the unsuccessful attempts her mother made to heal the split that had occurred in her father's family over their marriage. Carole's mother and her father's family never reached a reconciliation.

She spoke English like you and I. No one ever believed that she was foreign born. Because I know a lot of people that were in this country many years that didn't speak as well as my mother did. And I think she went as far as the sixth grade as far as education, but she was a very smart lady.

She and my grandma used to talk, and I picked up bits and pieces, but if you asked me to say something in Austrian, I couldn't. I couldn't hold a conversation. I could pick up bits and pieces from what they were talking about.

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My mother always talked to the sister-in-laws, not so much my father's brothers, but the sister-in-laws. And my dad had one sister that would always come to our house. I think the mother and father were the ones that didn't want anything to do with my mother, and then for some reason there was an Uncle Joe that would never talk to my mom at all.

The girls would talk, but my mother initiated the calls. I don't know if they ever called my mom, but my mom would call and say, "Well, how's the family, how's everyone doing?"

When my brother passed away, there was an Aunt Matilda that came, and they called me over and they said, "Carole, do you know who this is?" and I said "No, I

don't." And they said, "This is your Aunt Matilda," which is quite embarrassing. Y'know, that you don't even know your own aunt. She said, "Oh, that's okay honey, the family's never close." And I said, "May I ask you something? I said, "Whatever happened there?" She said, "I don't want to talk about it." She's in a home now, and she has Alzheimer's, so no one will know because she's the only one left. I always wanted to know why they didn't like my mom, I thought maybe somebody would tell me, but. . .

All my dad said to me was when I was getting married, my dad says to me, "I heard that Uncle Joe and Aunt Matilda would like to come to your wedding." He said, "I would prefer if you did not invite them." And I said, "Daddy, why would I invite them? I don't even know who they are."

Carole's description of her father was peppered with adult insights into his drinking. Recently, she has been able to face that her father was an alcoholic. Like other children of alcoholics, Carole felt confused about one of the paradoxes of alcoholism: On the one hand, her father drank a lot; on the other, he always worked steadily at his job. Her commentary also shed light on what looked "normal" to a child of an alcoholic growing up in the Bottoms.

My father was a very good provider. He was a good man, but he was an alcoholic. If you wanted somebody to bartend for a wedding, he was the best one because he would never drink as long as he knew that he had to do something for somebody.

But when we lived in Millvale, my dad drank an awful lot. He'd play cards in the Rox, in the Bottoms. And my mother said that she didn't want him drinking and driving from McKees Rocks. That's why we moved here, and then we moved down here. Because he worked for National Cylinder Gas in Presston.

What could be so awful that you don't talk to your brothers and sisters for years? And sometimes I wonder is that why my dad became an alcoholic? I don't know, because that is an illness. And it's a horrible illness. Unless you lived it, you would never understand. I mean there were times that I would come home from a date, and my dad would be maybe laying on the living room floor, because he never drank at home ever. We never had beer, whiskey, nothing in the house. But he liked to go after the news down to the beer garden.

But this is the truth. My mom used to sit on the porch waiting for him. I don't care if he came home at six o'clock or if he came home at 11 o'clock at night. She always warmed his dinner, and his dinner would be there. Sometime he'd eat it, sometime he wouldn't. But I said to her, "Why bother?" She said, "Well, he works all day, he deserves a good meal." But she always did, I would have never done it, I'm sorry. And I think because she catered to him, he felt, "Well, it's okay, she allows this."

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Say our porch was here, about three or four doors down, there was the beer garden. It was called Duffy's. And after work he went marching in there. The only time my mom would meet him there is Friday night when he got paid. He would give her the pay to come home, and he would take so much out because he kept a tab down there. He never had money to go to the beer garden, they kept a tab, and then he'd pay his tab at the end of the week.

As a matter of fact, when my dad passed away, on his death certificate, it says he died of a heart attack, but I think that the cirrhosis of the liver caused the heart attack.

But anyhow, my mom really made me angry. She went around to all the beer gardens in the Bottoms to ask if my father owed them anything. I said, "They could tell you anything." I said, "Why are you doing this?" One lady came up with an outrageous amount. It was John's Cafe on the corner of Catherine Street and Helen. She said dad owed like five or six hundred dollars. I said to my mother, "You're not going to pay it." She said, "I have to. Daddy owed it." I said, "No you're not paying it."

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My dad made excellent money, but he spent a lot of it at the tavern. He was there every day and Saturday. He would go down a little bit in the morning, come back home, maybe have lunch and go back at night. He would be there, like Saturday, and not Sunday. Sunday he went to the Croatian Club. Because the beer gardens aren't open Sunday. So he'd go to the Croatian Club, and he'd be down there maybe till seven o'clock and come home drunk. Every day he was drunk, every day, every day.

But, it never bothered me, isn't that strange. I mean, I just thought that this was the way of life, because Angie's father drank too -- at home. And he would drink shots on top of shots. Well, my dad didn't, but what I was thankful for was this: There was a lot of women down in the Bottoms that drank terribly, but thank God my mother didn't drink. My mom never went, and I was glad. I felt lucky because my mother and my dad weren't both drunk at the same time. But I just thought that's the way of life.

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Now when I was growing up, there was always enough food to eat. He made a very good living. I never knew him to be out of work. My dad also, I forgot to mention

this. He was blind in one eye. He worked in a steel mill, and he got a piece of steel in his eye. And he was blind in one of his eyes. But he had the eye chart memorized, and he was able to pass it. Two years before he died, he went for a test, and they no longer had the eye chart. He didn't know what to do, and he failed it, so they took him off of the truck, and they told him that he had to work at the office. And he didn't want to work in the office, and they said, "Well, we're sorry, but you can't drive a truck, you're blind in one of your eyes."

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I think it's just the past 10 years that I would say, "Well, my dad was an alcoholic," because I didn't think of that before. I never felt he was an alcoholic. I just thought he liked to drink. So what?

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I used to sit on his lap and I'd get tweezers, and I'd like to pull all his whiskers out with the tweezers. He'd sit for hours and let me do that. When he was sober, he was a very nice person. Now let me say this: When my dad was drunk, he was a real happy guy. When he was sober, he was quiet. Very quiet, but a nice guy. But in between he was mean. And he only got that way when it was later in life. He would like raise his voice. But when he was sober, you would never think it was the same man. Never. But if you needed him, and say to him, "Dad, I'm graduating from high school. You are not to drink today, do you understand?" "Okay, I won't," and he didn't.

Now, for my wedding, he was not drunk at all. He did not get drunk. I told him, I didn't care after I left, if he wanted to get drunk, that was okay, but not while I was there,

and he said, "Fine." My brother didn't say anything. My brother was kind of my dad, y'know what I mean?

Carole described the traditions and the values of sharing that she learned from her mother. She saw her mother as someone who always gave to others no matter how much or how little she had to give. When there was nothing material to give, Carole's mother gave of her skills and abilities.

She was a very kind person and she gave everything away really, her and my dad were the same way. We really didn't have much growing up. But I never knew it. When we were growing up, we didn't have the hundred dollar tennis shoes, we didn't have the designer jeans, we were all the same and I never looked at anyone to see how they were dressed. I knew what I could afford. What my mom and dad could afford. And my mother did so well on such a little bit of money.

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Her main thing was, the motto she lived by is "treat other people the way you would want to be treated." And my mother, for as little as we had, always did things for other people. My mother said, "If you have a talent and someone else does not have that talent, be sure you share it with them, because that's very important in life." She said, "Never keep everything to yourself. Because you'll become a very selfish individual."

And I remember growing up in Millvale, in McKees Rocks, wherever, all the kids used to come to my house. For the reason my mother used to teach them how to crochet, how to knit, how to embroider. When I worked at Fesco, maybe once a month, twice a month, they would come to my house for lunch, and she would always bake beautiful pies, and she would make whatever for lunch. If it was a Friday we'd have *pirohis*.¹⁴

The kids always were at my house. And she always wanted to share things with them. A lot of people today are like, “Well, I don’t want you to dirty my kitchen, I just cleaned.” My mother never ever said that, ever. If somebody would say. . . . They used to call her Mrs. Wick, instead of Wikert, they said, “Mrs. Wick, would you show me how to make pies? Or would you show me how to make cookies.” She’d start doing it, and she didn’t care what time of the day or anything, she would do that.

And when Don and I moved here to this house, I really wanted my mom to move in with us. And she said, “I’m not going to the country.” She said, “I hate the country and I’m not going,” she said, “my bingos are here, and I want to stay down in the Bottoms.” So she moved to Uanza Village, and that’s where she lived until her death. There were a lot of widows there, and they used to meet at each other’s house and play bingo and play cards, and sit out in the summer, and just chat.

She was a great baker, but when my mother baked fruit cakes, for Thanksgiving, it was never a fruit cake or two fruit cakes. It would be like 30, 40 for the postman, for the insurance man, for the milkman, but she baked for everybody, and all her neighbors. Every time she baked cookies, there was a bag went to every neighbor.

Similar to many other young working-class women in the Pittsburgh area, the telephone company was Carole’s first job. Afterwards she went to Fesco (Federal Enamel & Stamping Company). For Carole, working as a clerical assistant in an industrial plant was not a hardship; it was an opportunity to socialize and meet new people. Carole worked after she was married until the birth of her first child. She returned to the work force briefly when both of her children were adults.

At first I worked for Bell Telephone, right out of high school. I was an operator. And I hated it, because I worked split shifts. I worked from ten to two and seven to ten,

so it's back and forth. So I did that for six weeks, and I said to my mother, "I cannot do this for two years."

So I said, "Y'know what, between my shifts, I'm going down to Fesco and see if I can get a job." So I went down there, and they hired me and they said they wanted me to start that day. I said, "I can't because I have to give two weeks notice." And they said, "Fine." So then I started in two weeks, and I worked there until I got married, and then I quit working. I quit working when Amy was born.

But I loved the people. I loved it. Yes, I really did. And I loved my boss. He was very nice to me. I liked the people. We worked in an open room, the whole thing, there was no little offices. It was all open, and we all had our little desks. I got a chuckle out of everything. I mean everything made me laugh, even things that shouldn't've.

I'll never forget the little girl that sat next to me. She was very quiet, and she had to slide her chair from the desk to a file cabinet behind her. Well, she went to slide back on her desk, and these wheels stuck, and she went backwards, her feet went in the air, she had this full skirt on, I mean, it was such a sight. I chuckled so hard. She was very upset with me because I really laughed not at her but at the fall it itself. What a sight!. Just everything, everything about work I really liked.

They used to play all kind of little tricks on each other. I used to wear flat shoes, and I'd have them in a drawer, and I'd just kick off my heels, because God forbid if you got on the bus without spiked heels, I mean, you just didn't do that in 1956. But I used to kick my heels off and I put my flats on and I'd go about my business. Lunch time would come and I'd kick off my flats, put on my shoes, I'd walk down Chartiers Avenue.

It was payday and I was going to the Adelle Shop. A friend stopped to talk, looking down at my feet, he said "Nice shoes!!" One of the boys in the IBM room put reinforcements all over my shoes.

It was a joke. He thought it was me that filled his pockets up with those weird little things from the IBM cards. Somebody filled up both his suit coat and his top coat. And when he went to put it on, they just flew everywhere, he was so upset. So one day he come in and he said, "You girls have always given me such a chuckle, I brought you candy." He gave everybody a piece of candy, and then he said, "We'll put them on the desk, you help yourself." When the box was empty, he turned the lid over. They were chocolate covered bugs! Bumblebees, grasshoppers. But they were a really nice bunch of people and we always had parties on a Friday night, we really had a good time.

Carole's earliest memories of McKees Rocks and the Bottoms and her friendship with Angie were synonymous. The closeness continued throughout their young adulthood. It made sense that Angie wanted Carole to be a part of the Club. They were inseparable.

I only moved to McKee's Rocks in the sixth grade. We lived across from the Wilson school. So when we moved down here, the only one I really remember is Angie. I didn't know Joanne or Betty or any of them until later.

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Angie was almost like a sister. Because now you have to remember, my sister is 15 years older than I am, and Angie's house was so close, we did everything together. She was the first friend I met when I lived in McKees Rocks.

But she lived in a complex like here and then there were three houses in a row. And I lived in the first one, so she would come running down the steps and I'd see her, and there was a fence in between us, but oh, I was just so delighted to meet her, and we remained friends all those years.

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Angie and I were always very close. Angie worked with me at Fesco for a while then shortly after I got the job, then she moved onto Kutz Engineering.

She would call my mom and say, "What are you having for dinner today?" And my mother would tell her, then she'd call her mother. Whoever had the best, that's where we'd eat. We did that for years.

We did nothing without each other, even dates. If you didn't have somebody for the other one, we wouldn't go out. Yeah.

Angie and her mom were very good to us, and we were very good to them also, because like I said, Angie had no car in her family and she never drove, her parents didn't drive. So every Thursday, Angie and I took our mothers out. That was our Thursday evening outing.

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She was in my wedding, but her wedding date is February 12th or 14th, I forgot, and I had Amy March 11th. So I was pregnant at the time, and I didn't want to be in her wedding. I said, "No, Angie," I said, "I'll ruin it." At that time, you didn't do that. Now they have girls that are pregnant at weddings. But we didn't do that, and, I said, "No," I

said, "I'll do everything, I'll help you, I'll do anything, but I can't do that." But when I got married, Angie insisted on buying my veil.

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When she left, the very very first time, I was devastated. I mean that from the heart. I cried I'll bet you months, and I wrote her numerous letters about how much our relationship meant, and how I missed her, and I didn't want her to go, I mean, it was bad.

And then we would go there, with the children. . . I already had children at the time, but we would go there. Oh I'd be happy as a bluebird going, and I'd cry all the way home. But my husband, he would go three or four times a year, because he knew how much I missed her. I really did, it was terrible. It was like when my son left, the same thing, I was the same way.

As much as Carole enjoyed work, she followed the traditional 1950s path of marriage, motherhood, and withdrawal from work outside the home. Her choice of mates was influenced by her childhood experiences with her father's drinking.

I used to go to the street fairs, and I met Don and I met another boy, his name was Jack Burke. They were friends of my brother-in-law. My brother-in-law said that he had to teach me how to drive. Well, both Don and Jack said, "Well, we'll help you, we'll take her out." So I went out with each one of them, but I kind of liked Jack better than I liked my husband.

He was very dark, he had dark hair, and he was very tall, and my husband was tall at the time, but he had red hair, I hated red hair. I just absolutely hated red hair. But Jack drank an awful lot, and that's what kind of turned me off, because I really didn't want to be bothered with somebody that drank. I didn't want to marry into that, because I had

enough of it. I thought, "I'm not going to stay at home and be cooking and re-cooking and heating," because that's not what I wanted to do, and my mother said, "That's your duty as a wife." Which I don't think it is. But that's how she felt.

Angie and I, when we wanted pizza or whatever, and we were baby-sitting, we'd call Don and say, "Don, you want to go to Rebel's Corner and bring us a pizza or take us to get pizza or something?" Yeah. So he never ever said no to us. And Angie said, "He's really nice, Carole" and I said, "Look at his hair, I hate his hair."

And so as the years went on, then he had asked me out, one time and I thought, "Oh, I'll go with him," but I really don't want to go, but I did. I went with him, and he was always a lot of fun, so that was all right. Then he asked me out for New Year's Eve; they had a dance at the firehouse. Ten o'clock he passed out on the dance floor drunk. And I thought, I don't want to be bothered with this. So I sat in the car with him, and he slept and he got sick and I thought, "This is going to be our last date."

Well, he apologized a million times and this would never happen again and he doesn't really drink whiskey and this is what made him get so sick and what have you, and I thought, "Oh, who needs this." So I didn't date him then for a while, and he started coming to my house and I would tolerate him, and then he'd say, "Well, you and Angie want to go to the drive-in?" Well, as long as it's me and Angie, sure, why not, y'know. So that's how it started, and I'm really glad I didn't marry Jack, because he had a good job with Dravo and everything, but he's still drinking.

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I always said when I was growing up, I guess you would call it like a gold digger, I would never marry a man that didn't go to college. I had no reason to say that, because I never went to college. And I would never marry a man that was lazy. And one that drank. I didn't want anyone that drank. So when Don and I got married, I said to him, "Well, y'know, I really care about you, but there has to be some changes." I explained to him that my father was a good drinker, and I never used the word alcoholic before. And I said that I don't want that. And he promised me, and he never did. When we moved here, they wanted him to join the fire house, and he said no, he couldn't, he had too many things he had to do. And he never did, he really never did.

And Don went to college, he's an engineer, electrical engineer. And he went to night school because he's one of seven, and his parents really couldn't afford it, so he wasn't able to go to day school. He worked for Westinghouse and they paid half his tuition and then when he graduated, they gave him the other half, but he had to keep a C or above average, and which he did.

He worked for Westinghouse Research Lab. And when he graduated from college, they said, "In order for you to make more money, you have to work for another company, like Westinghouse in San Francisco, or Los Angeles, I'm not sure." But he went there to interview and he said really, I would rather stay in Pittsburgh. And so he interviewed for Duquesne Light. And they hired him, and we just stayed here, and he worked downtown for a while, and then he moved to Shippingport where he works now, for nuclear, he's in nuclear now.

Although infertility has sometimes been called an “epidemic of the 1980s and 1990s,” Carole’s story showed what the experience was like for a couple in the early 1960s. She described her hormone treatments and suggested that they had a long-lasting, negative impact on her health.

When I look at my health, I personally, if I were to tell my daughter this, and I’ve already done this, I was always a very thin person. When I got married, I think I wore a size four dress. And I never weighed more than like a 110, 105. When I weighed 112, I went on a diet.

And when I wanted to get pregnant, I went for hormone shots on top of shots and I would say within the three month period, I gained 40 pounds. And I really think that I did harm to my body. Because from the time when I conceived Amy, I think I weighed 145 pounds. When I delivered her I was a 185. When I conceived Jeff, I was in the two hundreds. Maybe 202? I was very lucky, I was like 215 when I delivered him. And I did go back down, but I can’t keep weight off. And I cannot stay on a diet, but I have to eat almost nothing to lose weight. I go to Weight Watchers, and the leader and I had a big long talk. In fact, I called her on the phone. Because I said, “My friends will lose like the first time, maybe eight to ten pounds, I lose two.”

I sleep with a mask every night. And I was told that your metabolism is not the same when you have sleep apnea. . . I’ve been on 999 diets. I even went as far as going to a hypnotist. But I would never take shots again. I would be childless. Well, no I doubt it, I would probably do it again. Because kids mean a lot to me. And, that was the thing that I hated the most.

I did lose a lot of weight after my kids were born, but I had to eat lettuce leaves. I didn't eat well at all. No. No. No. Even to this day, I feel the more diets you're on the worse you are. Even to this day, my meat, my fish, is the size of a deck of cards. That's what I try to measure it out to be, and I try not to eat over that. And it still doesn't do any good.

Carole became so ill over the last several years that she feared she was dying. Her chronic weight problem aggravated a severe asthmatic condition and left her with little capacity to breathe or to move around with any ease. She measured how depressed she was by the fact that she almost quit Club. She discussed the special clinical trial program at a Pittsburgh medical facility that helped her regain physical health and emotional perspective.

Nothing ever kept me down except the asthma. The asthma, as a matter of fact, is what I thought was the end of the road for me. As a matter of fact, it was like in January, we were at Donna's house, and I told the girls that I was going to quit Club. I said, "I want you to know how much I love you all. But I think I'm going to have to quit Club, because I don't know how that I'll be able to serve you," because I'm not lying, it took everything I had to go from my kitchen to my bathroom, which is the room right down the hall. I would be out of breath.

Then I was laying on the couch one night, Don bowls on Wednesday, usually. And I was laying on the couch, he was at bowling, and I was feeling very sorry for myself, and I was crying, and I thought, I am going to be very honest with Jeffrey, I want him to come home, I don't care what kind of a job he gets, I want to spend my last days with him. Because I knew I wasn't going to live long when you can't breathe. I didn't know what was wrong with me.

And I'm watching TV, and I'm not a TV watcher. I hate TV, and I'm flicking from channel, and as I was flicking, on one of the channels that has all announcements, and all I saw was "asthma." There was a lot of things, but all I could see is asthma, so I flicked back and naturally it was on to the next advertisement, so I just sat there and waited till it come back on. And it said, "If you cough in the night, and you're 18 years or older, and would like to do a study, please call this number." I thought, "What do I have to lose?" Then they called me, and they said, "We'd like you to get started immediately." So that has really helped me.

So I want to tell you how the girls were. Donna popped off with, "No, you're not quitting Club, if you can't have Club, I'll have it for you," and the girls said, "Well, if you don't feel like having Club, then you don't have it. You don't have to have it." They were trying to tell me that it was me, not the serving. Which I thought was very nice of them. But I would never let them have Club for me. I want to do my part too. And I said, "I want to be able to clean my house" and be able to even make a cake for them, let alone hors d'oeuvres.

But as I started feeling better, then I forgot about quitting Club, because it's not important now. I was depressed. But you'd be surprised how much you appreciate life. Because when you think you're going down the tubes, and then when you bounce back, that was a great feeling. . . like you really were given a second chance on life, yes.

Carole briefly returned to work after her second child, Jeffrey, finished college, left Pittsburgh, and took a job in Texas. He is the only child of the Girls' Club who does not live in the Pittsburgh area. Carole's return to work outside the home ended when her first grandchild was born.

When my son Jeffrey went to Houston, I couldn't take the house anymore. I felt my whole world fell apart. I felt I didn't have a purpose to live anymore. I was so lonely. My daughter was married at the time, and I was just devastated. I just thought, nobody's here, what am I going to do in this house? So I worked for Greater Pittsburgh Research, where they interview people for just one instance. They wanted to get a name for a cigarette they were trying to find out from different people. I worked there and then I worked for my neighbor's granddaughter. She and her husband, they asked me to come and work for them, but it was a fly-by-night business. That job was the biggest joke. I bought the paper towels, the toilet paper, the coffee. On my day off, I used to fill up the pop machine, but I like being with people, just to be out with people.

Then when Joshua was born, then I haven't worked since, because I have him to worry about and I watched him every day from the time he was born because Amy works.

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Carole remembered the early days in Club. She acknowledged that being "a year behind" still differentiates her from the others

Angie was in their class. And they were having Club. I think Anna called Angie, and then I don't know if I picked Angie up. Angie didn't drive, so I might have taken her to Club, and then went back and picked her up. And then the girls said, "Well, why don't you come?" I think that's how it went, but I'm not real sure, or if Angie asked me to come to her house one time for Club.

They had a few times, as a matter of fact, I remember when Anna was pregnant with Lisa, and Joanne was pregnant with Michael. I'm one year, that's all, one year behind. And I always admired the girls. I really did. I don't know why or I don't even know how it started, but I remember Thursdays going to Mrs. Leone's house for pizza. She made pizza every Thursday.

Walking home from school, we used to stop at Mrs. Leone's and she'd have pizza on the table and you would help yourself, and I'll never forget that. I could see her sitting there. It seems like yesterday. Where'd the years go? Like Mrs. Fedyshyn. Mrs. Fedyshyn was always full of fun and always had a joke. Always had a joke to tell you.

Carole talked about the meaning the Club has had in her life. She compared the role Club plays in her life to the role she plays in the lives of her family. She sees herself as a "cheerleader" for everyone else. She discussed how the Club is her cheerleader.

It's just like we're not in each other's houses, we don't go out weekends together. But they're there if you need somebody for anything. I mean, when else do you need somebody if not for a wedding, a funeral, or what have you? When my mother passed away, I was devastated. And I'm thinking, I can't do this. And they says to me, "Don't worry about it, we'll take care of it all, don't worry." So I didn't worry, I had a hall, I had a banquet. And it all came from my friends. It's all from my friends. Unbelievable.

I remember Patti and her mom, they asked me for the keys to my house, and they came up here one day and a complete meal was on the table. We just left to go back to the funeral, they cleaned everything up and locked the house and went out. I mean, you

can't put a price tag on that. That is something you hold in your heart and you never forget. You can't forget.

It was hard for my own family to understand because I guess I'm blessed more than they are. My sister doesn't have good friends. She has friends, but nobody she could pick up the phone and say, "Hey, I need to talk to somebody. Or, I'm going out to the mall, does anyone like to go?" My sister doesn't have that. We had not one cake from my sister or brother's side of the family. They just don't do that.

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My brother had a lot of friends. But my sister-in-law didn't, my sister-in-law doesn't have friends. I mean, when my brother died, she just cried constantly because she was alone. And that's sad. I would be very upset if my husband would die, but I have my friends that I could go to, that I could talk to.

And Club is like a therapy session. Everybody said, "Oh, your card Club." "We don't play cards." "Well, what do you do?" "We talk." They can't understand that.

And we never run out of words. Sometime it's upbeat, sometime it's not. Y'know, depending on what happened. Y'know, with everybody, how they feel as far as, like when Anna was having trouble with her mom, her mom was sick and her dad was sick, and when my mom was sick. I mean, you're not upbeat, and everybody tries to pull you up a little bit. In all the years, I'd say I missed maybe about six times. We really don't miss that much.

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For me, I love seeing the girls, I like hearing about their children, and what the kids did, and especially if somebody got a promotion, that makes me very excited.

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We don't analyze things like they do today. I mean, my son, he analyzes everything, and my daughter is such a worrier. Gosh, she makes me crazy. Like I said, I am tired of being a cheerleader. My son's unhappy with his job so he calls me on the phone complaining. My daughter's unhappy with her job. My husband's unhappy with his job. My son-in-law doesn't like his job. I said, all I do is Sis! Boom! Bah! all day, I'm tired of being a cheerleader. I said, who cheers me up? That's one of the reasons I love the girls. Y'know they're funny; they're kind of like my cheerleaders.

Carole described the time when she wanted to see a change occur in the group regarding what the "girls" ate on Club night. She thought it was time for the menu to change from heavy to light. She decided to bring the issue up when it was her turn. The story provided another view of Club's communication patterns.

I love to make new hors d'oeuvres. I look from one time I have Club to the following time, I look for different recipes, so that I have them, and especially desserts. We only serve desserts now because no one would eat anything. And I waited till I had Club, oh years ago, and I said to them, "I don't mean to be rude," but I said, "all of us work very hard to make a sandwich and two side dishes, and dessert." That's what we used to serve. And I said, "No one eats anything. Now, why are we doing this? We can't eat, we're getting too old, we can't eat at night. Why don't we just serve, like little finger foods while we're talking and dessert?" And they said, "That's a good idea."

I waited till it was my house, because I didn't want to say it before my time, because I felt they might think I don't want to cook for them. So I waited till it was my house, and then I suggested it. And they said that's a good idea. So then we started with the finger food and the dessert. Which really, I think it's much better.

Carole provided detailed information about the departure of several women from Club. Her account of the Janet Krieder incident was the most detailed of any given by a Club member. Carole's storytelling revealed some of the unwritten rules of conduct about loyalty and respect that may have been broken by Janet Krieder and the others who left.

I think the ones that dropped out early were really girls that we didn't go to school with. Like Grace Mijalik. Who was the other one.? Uh, Gloria Zapka. They didn't go to our school.

The one girl I'm sure the other girls told you about was Janet Krieder.

I was so angry, because I felt so sorry for her. I felt she didn't have anybody, and I'd say, "Oh, Janet, come to my house for dinner, then go to Club," I figured she was one of us. Until Lori's wedding. I'll never forget it as long as I live. We were in a round table. Sitting together.

And she made this play for one of our husbands. I was sitting there, and he was next to me, and she was sitting in that chair, and I looked at her like, "I can't believe you're telling him this." I mean, I love all the men. The men are very nice, I mean, each one of them are special. But not to the fact that you would want to go out with them.

At first, she was dancing with the men, there's no big deal. I would have never thought anything about it. I mean, we joke with each other, but I mean, never anything

that personal. I mean, the things that she said to him made my hair curl. And I thought, "I can't believe you're saying this. This is one of our husbands."

He was sitting there as calm, cool, and collected and we were teasing back and forth and all of a sudden she started whispering to him and she was drinking too. And I didn't hear everything at the beginning, but as the conversation went on, she was more open. And I mean, I just was in awe. And he might have felt uneasy also, because he got up a couple of times, and he went to the bar, but she immediately followed him.

From that day on, I said, "If she's in Club, I'm not." I said, "I cannot believe that she would be that low. I cannot believe what I'm hearing." And one of the guys said, "She's not one of the Club girls." I said, "You're absolutely right, and I'm going to see to it that she's not." I was so angry, you have no idea. I just thought that was the lowest thing anyone could do, we would never do that, none of us.

I mean we are like family. No family member would mix with somebody's husband, I mean, you just don't do that. And that was such a slap in the face. And I think we were like, I can't believe this.

We never invited her again. You would call and say, "We're having Club such and such a time, if you'd like to come, we really want you there." As a matter of fact, I might have been having Club after that, because usually I have February, March or April. And Joanne, I think, is before me one month, and I told them, "I'm not calling her."

And they said, "Well, how are you going to handle it?" I said, "I'm not handling it no way, I'm not calling her, and if she calls me and says when is Club, I'm going to tell her, 'Janet, what you did at the wedding, I don't think we need you in Club any longer.'"

I said, "I'll be the one, I don't care." I was devastated, I sat there and I heard. It wasn't second hand information. It was right to my ear. And I said, what she said was uncalled for. And I'll never forget her. Never. You can forgive but you can't forget. No one ever called her. I never called her, and the girl after me didn't call her and that's how it went. You don't do things like that, I'm sorry. I wouldn't do that to anyone, let alone to people that I really really cared about. If you really cared about those people, you would've never done that. Never.

Another thing we joke about, I don't know if anyone told you this, Arlene Vaskevich. She was in Club. And I'm sure you heard why she left. Because her sister was so sick. She'd be a good actress, she was really good. I bought her story, I cried with her and everything. She had Christmas Club, and she said she made these cream puffs. That she got the recipe from somebody in the afternoon and she whipped them up. They were out of a box from Jenny Lee's so anytime somebody mentions cream puffs, they'll say, "Oh, did Arlene make them for you?" And we all knew it, we all looked at each other like, "Why would you lie to your friends?"

I mean, that's so dumb. Who cares? We didn't care if they were homemade, we didn't care if they were bought, it didn't matter. They were in a white box, and they had tape on them, the white tape, not scotch tape, she opens them and she served them. She made them that morning. Right!!

Oh, then there was Doris, I love Doris, but it was at Betty's house, when Betty lived on Lenore. Doris became a born-again Christian. And I don't know what that means. I'm sorry, but she became a born-again Christian. She came to Betty's house at

Club, and she had messages made up. And she read these, and Doris is very theatrical, very dramatic, very dramatic.

And she started reading off of this paper. Anna and Patti, I didn't know if they were going to be able to control themselves or not. And she'd say, "Don't laugh, this is very serious," and she's going on and on and on. I wish I would have saved it. I think what she was trying to say, to convey to us, is how much the Club meant to her, and how good God was to give us, somebody all together like this and what have you.

And the girls, they really didn't like that too well. I think the reason she quit was because she had to baby-sit her daughter's babies, plus she didn't have a ride to and from Club. And we always make mention of this. I or Patti, I'm not sure about Anna, if Anna did it once or twice or not, but we would drive her home. She didn't want to go home. She wanted to sit and talk. So she'd say, "Let's go to your house after Club." Well, sometimes you're riding her home four, five o'clock in the morning.

Carole was the only member of the Club to talk about a preference for a more direct communication style. She described herself several times as someone who would prefer to have things come out directly in conversation rather than indirectly. Carole's direct communication style differentiated her from other Club members.

In our family raising our kids, we always talked about things that were bothering you. We sat down and you talked, and it was always over the dinner table. We were talkers. In fact, my son-in-law, he makes fun that Amy and I would talk to fireplugs. I mean like I go up to the bus stop and I'd never think to go and just stand and not move. Now, I say, "Good morning, everyone! How's everybody today?" I mean that's just the way I am. They're standing, what does it cost you to say hello?

* * * *

If something is on my mind, I don't care it's good or bad or whatever, until I confront the person on it, I'm sick inside. I feel low, but once I talk about, I figure it's finished. I'm done with it. But I have to talk about it.

I like people to be open. I don't care if it's good or bad. I mean if I'm doing something, I would so much appreciate it if someone would just come out and say, "Hey, I don't like the way you handled this, or you said this and you hurt my feelings."

If you're honest with somebody, everything else falls in place. But if you're not honest, how can you be truthful to yourself? I mean, I'm not saying that my life is just a straight and narrow thing. Y'know, I do things I'm sure that aggravate people. But be honest with me, tell me, tell me what you don't like.

And like I always say, once you lie to me, forget it. Because I'll never believe anything you say to me again. But I, I don't know if that's right or wrong, but that's the way I feel.

4.9 Chapter 4 End Notes

¹A quote by one of the “girls” at the Girls’ Club group interview I conducted in June 26, 1996. The tape is so multivocal that it is difficult to discern which Club member is speaking.

²Dolores herself does not recall that the second gathering was held at her parents’ home on Island Avenue. However, most of the other narrators agree that Dolores hosted the second meeting. Their memories of the “facts” of the early days of the Club are often in disagreement, but there is consensus about how much the “girls” enjoyed meeting and how adamant they were that they should continue to meet.

³Interview with Bud Alder, June 26, 1996, McKees Rocks, PA.

⁴*Paesani* (Italian) literally means people you know from the old country, but in McKees Rocks a “*paesan*” was anyone who was close to you or your family.

⁵Interview with Bob Muha, June 26, 1996, McKees Rocks, PA.

⁶According to Richard Grifo and Anthony Noto, “Italian migrants who came to Pennsylvania between 1880 and 1930 . . . might be described as 80 percenters: 80 percent male, 80 percent from southern Italy, and 80 percent between the ages of 14 and 45. They reported that more than half of all Italian migrants returned to their native villages at least once. Some referred to these immigrants who went back and forth regularly as “swallows” or “birds of passage.” See Grifo, R. D. & Noto, A. F. (1990). *Italian presence in Pennsylvania* (Pennsylvania history studies No. 19). University Park, PA: The Pennsylvania Historical Association, p. 2

⁷Pokeno is a bingo-like large group game.

⁸Focus on Renewal (FOR) is a community-based, federally funded project in McKees Rocks that offers health care and social services to the poor and elderly, child care to the working poor, and social events for the town’s large senior population.

⁹“Nebby” is a quintessential Pittsburgh word for “nosey.” See Abel, K. & Abel, J. *The tongue-in-cheek guide to Pittsburgh* (Vol. 1). Carnegie, PA: ABELexpress Press, p. 74.

¹⁰*Champelli* is bread dough rolled into a doughnut shape and deep fried. Occasionally, sugar was sprinkled on top of the *champelli* when they were hot. Often they were eaten plain, either hot or cold.

¹¹This is what Donald Presutti wrote about Lorenz Hufnagel, Donna’s great-great-grandfather: “An interesting story related to the P. & L. E. expansion involves one of the German farmers, Lorenz Hufnagel, who owned and farmed the land in a part of the area that the railroad needed for its maintenance and repair shops. Lorenz and railroad executives spent many grueling hours haggling over the deal. Lorenz wanted \$100,000 and the railroad offered \$80,000. On the way home one evening after a long day of negotiations, Lorenz suffered a heart attack and died. One could say his death was symbolic of the death of farming and the birth of industrialization.” See Presutti, D. (1992). *McKees Rocks Borough Centennial: 1892-1992*. McKees Rocks, PA: McKees Rocks Centennial Committee, p. 11.

¹²This refers to a class at McKees Rocks High School called “Problems on Democracy” -- a high school level civics course.

¹³I have conducted a search for “Volduchy” and variants of its spelling in Austria, German, and Poland. I have not been able to find a place so named. This is the place name that the narrator’s mother gave to her.

¹⁴Dumplings filled with mashed potatoes, sauer kraut, or mashed prunes, first boiled and then fried in butter and onions.

CHAPTER 5: REFLECTIONS ON THE RELATIONSHIP BETWEEN
HEALTH AND SOCIAL SUPPORT IN THE GIRLS' CLUB NARRATIVES

5.1 Introduction

My objective in this chapter is to address my original research questions, and by doing so, to demonstrate how the knowledge I gained from an analysis of the Girls' Club narratives advances the existing research on social support and health. These questions included the following:

1. What is the structure and function of the Girls' Club as a social support system, and how has it changed over time?
2. What kinds of physical, emotional, and social health outcomes do Club members attribute to their support system?
3. How do the Club members measure and describe these health outcomes?
4. How does the addition of historical, cultural, class, and regional contexts contribute to the research on health and social support?
5. How does the use of narrative methods contribute to our understanding of the relationship between health and social support?

I conduct this analysis through five interpretive essays. I think of them as facets of the same stone, each refracting light to show a different contribution these narratives make to the study of health and social support. Each of the five essays is both partial and complete: complete in the sense that each contains one particular interpretive perspective on narrative as a connecting link between health and social support, but also partial in the sense that each essay generates ideas that enrich the other readings in an

ever-growing circle of understanding. Therefore, significant overlap exists among them as they build toward a thick description of Club as a support system for the narrators' health and well-being.

Given the broad reach of my analytic goals, what then can I offer as criteria for assessing the quality of the interpretations I make? Obviously, the "old" criteria for evaluating research -- namely objectivity, replicability, validity, and reliability -- do not apply. Recent research in the field of narrative studies suggests several approaches for assessing the merit of qualitative interpretations like those that follow.¹ From the growing number of voices in narrative studies, I hear repeated two particularly intriguing criteria for evaluating narrative research: trustworthiness and authenticity. I propose these as fruitful perspectives through which to review and assess my work.

First, authenticity refers to the credibility and plausibility of the interpretations. Do the essays result in greater comprehension and insight into my narrators' lives? Do they contribute to understanding how my narrators think about their own experiences, problems, and lives in a meaningful way? Do they portray the social and historical worlds of my narrators and illuminate the connections between those external conditions and their lives? Are the essays vivid, evocative, realistic, and emotionally compelling? I think of authenticity as an internal measure of completeness of the narrative analysis -- how well the parts fit together for the reader.

By contrast, I think of trustworthiness as a measure of the external merits of the analysis assessed by a community of knowledgeable scholars. Do my views and interpretations make sense in the eyes of the community of public health educators I seek

to reach? Here I apply a question suggested by physician-researcher Elliot Mishler in his commentary on the consensual validation process for narrative research: Does my work move into the social world of public health education and influence praxis (Mishler, 1990, pp. 415-442)? Specifically, Mishler argues as follows:

Focusing on trustworthiness rather than truth displaces validation from its traditional location in a presumably objective, non-reactive, and neutral reality and moves it to the social world -- a world constructed in and through our discourse, and actions, through praxis (Mishler, 1990, p. 420).

Working with the narrative material in this interpretive phase requires what Mikhail Bakhtin (1981) called “dialogical listening” to at least three voices: (a) the voices of my narrators as represented by the tapes and the transcribed interviews, (b) the voices from the interdisciplinary research, and (c) my voice as a reflexive decision-maker who comments on the interaction between my reading the narratives and my drawing conclusions from them (pp. 34-45).

In earlier stages of the work, I was more attuned to the phenomenological world of my narrators than to interpreting their accounts. I edited the narratives in Chapter 4, for example, to bring forth the voices of my narrators showing their considerable descriptive and interpretive power. The essays in this chapter, however, represent a different interpretive level -- a level in which I emphasize my explanatory voice. Here I bring my culture, perspectives, and knowledge to bear on the stories the “girls” of the Club shared with me.

5.2 The Contextual Experience of Social Support and Health in the Girls' Club Narratives

“The Rox *is* their ethnicity.”

“Our neighborhoods and upbringing had a lot to do with who we are.”

McKees Rocks itself provides the first, most fundamental context in which to understand the social construction of health and social support in the Club narratives. While studies of health and social support typically focus inward on individuals or groups in isolation from their social, economic, regional, and historical environments, here I break from such models that separate health research from its social and historical contexts. In contrast, I explicitly look outward to consider how the experience of ethnicity, gender, class, and region affect the meanings my narrators attribute to social support and health. I assume that their experience of health and social support is situated within larger sociocultural and economic systems represented by the Rox.

The Rox as a Symbol of Values and Identity

Taken as a whole, the Club narratives imbue the Rox with an almost mythical quality. The life stories the “girls” tell about the Rox are indeed the product of their selective memories -- memories that explicitly focus on the everyday personal world of community, friends, kin, and family rather than on the political decisions and economic tragedies that wracked their community. The Rox represents the origin of the values and self-identities the Club women most cherish.

For example, the narrators identify their ethnic Rox neighborhoods as the source of their “family values,” which they consider their most significant life priority. They are proud of how they have raised their children, how they have taken care of their families, and how they have given care to their aging parents. They identify as mothers, grandmothers, and adult daughters. Their primary work is their families, and they believe they have done it well. They prioritize family harmony; they overlook hurts for the good of the family; they take care of their family members even if it means putting their individual physical or emotional well-being second. The major lesson the “girls” learned in the Rox environment was that the collective well-being of the family is first -- always.

Second, the “girls” connect their personal resilience and hardiness in meeting life’s challenges and adversities to the fact that they grew up as “Rox girls” in a non-pretentious, working-class community. To them, being a “Rox girl” means being down-to-earth, practical, and even a little tough, in the face of misfortune. Their stories link their origins in the Rox to their capacities to deal with anything life sends their way.

The Rox was an environment that required everyone to work, but no one to complain. You were expected to deal with life on life’s terms. Betty and Carole, for example, tell the story of their fathers’ drinking, not as victims, but as observers of a scene they learned to live through. The “girls,” like their parents, aunts, uncles, cousins, and extended family members, learned that people who want to survive do not allow themselves to be easily “broken.” They may have problems, they may face crises, but they steadfastly do not see themselves as helpless or weak. They deal with what is in

front of them. The “girls” learned that you had to do your part in the family, even if doing your share meant nothing more than “being a good girl.” There were no excuses.

The Rox is also the symbol of hard work in their lives. It is where the “girls” learned that work and survival are synonymous. For example, after Patti’s father was let go from his pastoral position, everyone in the family knew they had to work. When Patti’s brother went to Rosenbaum’s and tried to get a job claiming six dependents at the tender age of 16, he showed his acceptance of the reality that he was responsible for the family, in spite of his father’s protestations that he finish high school. Donna learned that crops do not get planted, harvested, or sold unless everyone in the family did her or his part. The Hufnagel children were an integral part of the family economy.

Thus, the Club women’s narratives largely portray McKees Rocks as the symbolic crucible of their most cherished family values and their strong sense of shared identities as “Rox girls,” but they also bring another message about the Rox -- a muted message that diverges from the ideal. Some of the Club member’s look back from their present-day position and talk about parts of life in McKees Rocks that also may have constrained and hurt them. These sections of the narratives sound a cautionary note about the “other side” of traditional ethnic communities like the Rox.

Some of my narrators are able to identify how their close-knit families, their working-class neighborhoods, and the industrial environment itself enforced gender, ethnic, and class expectations of “Rox girls.” Betty speaks about the implicit cultural mandate in her traditional Italian family that the boys should always come first. She associates the ethnic gender bias of her Italian male-dominated family with the shape that

her life subsequently took. Several “girls” speak about how the “choices” they made as young women were really not choices at all, but rather the only options they had. The strikingly similar sequence of life events many narrators followed after graduation makes this point clear. Most of the Club women graduated, entered the clerical work force, dated, married, quit work, settled down, and began to raise a family. If economic necessity later arose in their families, then they might go back to work. The narrators repeatedly describe this context-bound pattern as what was “expected of you,” “what you did then,” and the “way things were in those times.”

One narrative strategy the narrators use to express their knowledge of the cultural and economic constraints of life in the Rox is to contrast the choices they made in the 1950s to the ones their adult daughters made in the 1970s, 1980s, and 1990s. The Club women acknowledge that gender relations and economic conditions have changed dramatically for women since they graduated in 1955. Several of their daughters attended college or professional schools, entered well-paying jobs, married, and had children.

Expansion of opportunity for women to include personal development as well as family life was inconceivable and unavailable to women in the working-class world of the narrators. First, the money for college was generally out of reach for their families, with the exception of their brothers who might qualify for sports-related scholarships or veterans’ educational benefits. But beyond these economic constraints, the attitudes toward women’s roles that prevailed in their traditional families -- or the internalized ones they held about themselves -- prevented most of them from even dreaming of such opportunities. Dolores, for example, who had the opportunity to go to college, denied it

to herself because she could not justify her parents' spending money on an education when she did not have a specific career goal, reflecting her internalization of the working-class ethic that education should prepare you for a good-paying job.

The interplay between gender and ethnic expectations, coupled with limited economic resources, enforced a very narrow acceptable path to adulthood for the Club women. To have broken away from the path would have been to risk the sanction of their families and their communities. The choices the "girls" made were functional adaptations to the only course available to them.

A second strategy the narrators use to acknowledge the constraints of the past is to compare gender relations in their marriages to their children's marriages. Betty and Donna, for example, describe their sons as involved fathers who share the work of the household in ways they could never have imagined when they were raising their children. Anna, Betty, and Donna describe the striking shift in their daughters' marriages, where more equity in the gendered division of labor is the rule.

The Club women learned to accept gender inequity as normal. The process took root in cultural beliefs about women's roles in traditional ethnic families. The "girls," like their mothers, accepted their culturally mandated household roles to marry, bear and care for children, cook, and clean. The strict division of labor that was a regional inheritance of life in heavy industrialized communities reinforced these cultural roles. Women were excluded from work in the mills and expected to support men in carrying out demanding industrial work by raising the children and by keeping the household functioning. Finally, the "girls" grew into young women in the culture of domesticity that dominated the media

in the 1950s. The central message society sent women like the “girls” of the Club was that they were responsible for successful marriages, children, and family, not school and work. These intertwined contexts of gender relations in industrial communities, traditional ethnic roles, and the 1950’s revival of domesticity enforced – or internalized the enforcement – of traditional gender roles among the women of the Club.

In addition to comparing themselves to their daughters’ life circumstances, several narrators use a more direct strategy to describe the disparities in opportunities that existed for young people who grew up in communities like the Rox. Patti, for example, simply states that her Club friends could have gone to college and had careers if they had wanted to, but that none of them had either the resources or the encouragement. Anna talks about her husband’s “great math mind gone to waste because he had no encouragement and no funds.” And Donna directly states that when she graduated from high school, she thought that opportunities for college “were only for the rich kids.”

Several of the women speak directly about the painful aspects of close family and community life. They raise taboo topics like alcoholism, racism, and ethnic hostilities that were the darker manifestations of working-class communities like McKees Rocks, which could be exclusive, insular, and oppressive to those who were different.

Carole’s story, for example, offered two striking perspectives on the tightly-knit enclave of the Bottoms. From one position, Carole’s story shows the Bottoms as a place where everyone cared about everyone else, where you could go to your friend’s house for supper if her mom was cooking something better than yours, where you could walk down the street and meet half a dozen people who knew you by your first and last name. But

also evident in Carole's story is the view of working-class life in which alcoholism among adults was normalized, where a child felt lucky because only her father drank. Carole states that there were families all around her in the Bottoms being torn apart by alcohol -- a place that prided itself on having a church and a tavern on every street.

Several narrators mention how life in McKees Rocks was not free of ethnic or racial hostility. Each new in-migrating group -- first the Germans, then the Slavs, and finally the Italians -- competed for housing, jobs, and entry into unions.² Betty and Donna describe their families' disapproval when they married outside their own ethnic group. Betty's brothers were suspicious of the man she was engaged to because he was not Italian. The men in Donna's staunch German family ridiculed her husband as "unmanly" because of his Ukrainian custom of helping with household chores.

In one part of her narrative, Donna recalls being called a "Nazi" as a child. In another part, she painfully identifies her family's overt racism toward African Americans living in the vicinity of "Hufty's Hollow." Today Donna is relieved that her children and she herself have become more open and tolerant of difference as a result of being out in the work world, experiencing "diversity training," and learning to get along with others.

Thus, while the dominant symbolic pattern in the narrators' construction of the Rox is positive, a significant, although muted, pattern exists that outlines the limits the Rox imposed. The Rox that taught the "girls" the meaning of family and community was also the site of limited opportunities based on the complex interplay of gender, ethnicity, and class expectations. The Rox where lives were built around simple rules like "take care of your family and help your friends" was also a place you did not get involved in

someone else's business -- like how much a man drank or how he treated his wife or family. The Rox that celebrated ethnic festivals and filled parochial schools was also a place where ethnocentrism and racism were common.

While the Club narratives often repeat the positive core values the "girls" acquired in McKees Rocks, narrative evidence exists that the "girls," at least in retrospect, see the constraining influences of the homogeneous community from which they came. The Club narratives bear testimony to the narrators' investment in a harmonious view of the past because the meaning of that past constitutes a significant part of who they are today and what they value. The Club women celebrate the ethnic, working-class context of the Rox as the origin of their family-oriented values and their common-sense world view. But not insignificantly, they acknowledge, albeit with less narrative volume, the limits that gender, ethnicity, and class exacted on them, including constrained opportunities as young women making life decisions and difficulties in achieving equality in their roles as women. They are also able to articulate that their families and their neighborhoods were not unambiguously nurturing -- that they experienced the effects of difficult family problems like alcoholism and painful community problems like racial and ethnic intolerance.

In addition to a retrospective view of the Rox and its meaning, two of the narrators -- Joanne and Anna -- look at their lives in the present and identify problematic aspects of life in the Rox. Joanne's story points out a poignant contradiction in her life's most prized role: the keeper of family closeness and tradition. On the one hand, she embraces her role as mother, caretaker, and keeper of the traditions. On the other hand, she struggles with the burden for ensuring the family's closeness and traditions when she

herself no longer feels either physically or emotionally able to fulfill that role alone.

While she holds the closeness of family and traditions as a meaningful life priority, she seems to fight with the very symbols of the traditions she espouses, such as hosting holiday celebrations and ensuring intergenerational harmony. She bends from the weight of shouldering the “work of kinship,” while she struggles to construct a new model of gender, generation, and female ethnic kin that is meaningful and healthy.

Anna similarly tries to negotiate a new definition of a “good family” as she struggles with an idealized past. Anna made an implicit bargain with life growing up in McKees Rocks. If you led a good life, worked hard, and always put your family first, you could earn a decent living and have a lifetime of loyal, caring relationships. But Anna’s family of origin and economic conditions in the Rox did not stick to the bargain.

First, after her mother died, Anna’s brothers and sister did not understand her great desire to be the conservator of Dellemonache family traditions. They sold the house that contained the sandstone mantelpiece her uncle carved, the brick oven her father built in the cellar, the kitchen where her mother had cooked for dozens of relatives every Sunday. For Anna, the house and the family’s history were inseparable. She felt betrayed because this was not something family was supposed to do to one another.

Second, after her husband had put in over 30 years at Dravo, the company abandoned him and other older workers. Her husband’s identity, self-respect, and not least, his ability to earn a decent living were taken away. The company broke its implicit promise that men like Anna’s husband could trade their life’s labor for security. His previous industrial skills quickly turned into liabilities in Pittsburgh’s changing economy.

The expectation of life in a familiar round of work, family, friends, and community evaporated. Anna, like thousands of other women in the Pittsburgh area who watched their husbands become obsolete, expressed a sense of betrayal at the failed promise of the hard-working, good life that once characterized a place like McKees Rocks.

The factories, neighborhoods, churches, schools, shops, and, of course, families of McKees Rocks dominate the narrators' life histories. By explaining to themselves how the region, the times, and the circumstances in which they were born, grew up, and constructed their lives both strengthened them *and* constrained them, they were able to accept, value, understand, and in some cases, empathize with, who they are today.

The Meaning of Health and Social Support in the Context of the Rox

The Club narratives presented a culturally specific perspective on health that differs from the hegemonic view that dominates current health and social science research based on a Western framework. I do not mean to imply that my narrators have a “pre-modern” or non-Western approach to their health care. To the contrary, the “girls” grew up in an era of enormous expansion in high-technology allopathic medicine. All of them have had access to medical care throughout their lives, and when they are ill, they go to doctors. They define their “health” as the absence of major disease and disability. Today, they engage in regular screening examinations, they visit general practitioners and specialists, and they comply with prescribed allopathic treatments. Their behavior does not suggest that they hold an “alternate” view of health.

However, the “girls” retain deeper, unarticulated, cultural knowledge about health and well-being that diverges both from the medical model's assumptions about health as

an individual responsibility and from the wellness model's assumption about health as a peak individual experience. The Club women use modern health care resources, but the meanings they attribute to health and illness differ from the current biomedical, psychological, and wellness models. Their narratives describe what I call a "functional-relational" standard of health. By this I mean that the "girls" take the measure of their well-being by their capacity to take care of themselves, their families, and those they love.

When they are "healthy," they may or may not be free of dysfunction or disease, but they are able to cook a meal, put up a Christmas tree, provide for their families, buy treats for their grandchildren, go to church, and go to Club. When they are ill and unable to perform the work that binds them to families and friends, they seem to lose their sense of identity, purpose, and self-worth. While "personal health" is important to them, the capacity to function as the heart of their families and as the host to their friends represents what health *means* to them.

Their functional-relational view reflects their cultural knowledge that it is neither sustainable nor healthy to be only for yourself. Further, their focus on function as mothers, wives, grandmothers, daughters, and friends may be viewed as an artifact of the gender and ethnic role expectations they learned growing up in the Rox. At times, the centrality of their roles as conservators of family relations and traditions does become burdensome, but it would be a mistake to equate their commitment to their larger family and friendship networks as excessive or harmful, or at worst, oppressive. To the contrary, the "girls" define a "healthy" life by the strength of these ties. The Club women's stories show that they experience "health" both as individuals *and* in the

context of family and friends, not independent of them. These relationships are essential and their loss would be traumatic. The addition of a relational experience of health evident in the Club narratives complicates the Western cultural belief that emphasizes individual experience as the exclusive locus of health.

Parallel to their distinct construction of the meaning of health are their notions of social support. What the girls mean by social support substantially contrasts with definitions typically found in the health and psycho-social research. Their perspective on social support challenges the dominant “talking tradition” of Western psychology. The Club women value the emotional support they get from their friends and family, but their view of support goes beyond therapeutic talk.

First, the “girls” explain social support as a concrete physical “presence.” Actual physical proximity is paramount. The support of family and friends who are distant may be appreciated, but not perceived as tangibly helpful. For example, Joanne commented that the fact that Louise was moving back closer to Pittsburgh did not matter to the group because she still was not *there*: “She’s *still* going to be away. What does it matter if you’re 3,000 miles away or 300 miles away. You’re away.” Physical availability is central in most of the narrator’s description of support.

Second, material support -- or at least the expectation of it -- figures prominently into the narrators’ definition of social support. For example, descriptions of the “cookie ritual” and the automatic process of mutual aid during times of death or illness in their families appear repeatedly. The narratives support the branch of the social support literature that shows how the expectation of support is as salient to well-being as actually

receiving the support (Antonucci & Israel, 1986; Sarason, Shearin, Pierce, & Sarason, 1987). The “girls” believe that they would be physically and materially available to each other should tragedy strike any of them or their families.

Their emphasis on physical proximity and material assistance harkens back to a not-too-distant past when their immigrant parents and grandparents depended on relatives to meet the boat at Ellis Island, to provide the railroad ticket to unknown towns, to share housing and food until a job could be found, and to help tell the “boss” that you were a good worker who deserved a job. Although the “girls” would not use the words “mutual aid” to describe the Club, their narratives contain “systems of thought” that have as their historical and cultural origin the community they grew up in (LeGoff, 1974/1987, pp. 169-170). For the Club women, social support means something more concrete, more visible and less abstract and psychological than Western concepts. I suggest that their view has deep roots into a time and a culture when talk was not what people did -- when showing up, being physically present, and helping each other was what mattered.

Finally, the narrators describe Club as a “spiritual family” -- a family connected by roots deeper than their common backgrounds. For example, they compare “never missing a Club” to going to church. They describe a non-local, non-physical communication pattern that empowers them to “know” when they need each other and when not to push. This deep, spiritual sense of knowing and being known is a result of the historicity of their relationships, the depth of which should not be underestimated. They are networked into each other’s memories and histories to a degree that many of us with less geographical stability have not experienced. The depth of this 40-year

friendship produces a rare capacity to “read” the slightest change in another’s demeanor, which in turn contributes to the experience of being understood at an extraordinary depth.

Summary

The meanings the “girls” attribute to health and social support did not arise in a vacuum isolated from the larger social, economic, and political influences. While they live within the Western tradition and are subject to its individualizing and fragmenting worldview, their narratives also embody a different cultural perspective that is health enhancing. They value their health and well-being within the collective context of family life and community -- a context that requires active participation and physical presence.

The “girls” of the Club would not consciously identify themselves or their views of health as different from mainstream cultural perspectives. But, I believe the complex contexts of gender, ethnicity, class, and regional location they experienced in the Rox contributed to the culturally specific meanings they hold of health and social support.

Moreover, I see the notions of health and social support articulated by the “girls” as meanings they pulled out of the “jaws of the lion.” By this, I mean that the Club women lived through historical periods of dramatic social and economic changes; they transited a period of time when everything they believed in -- what constitutes a “good life,” what it means to be a woman, how a family is supposed to earn a decent living -- has been under revision or attack. From this larger perspective, the meanings the narrators have constructed regarding (a) health as a functional-relational experience, as well as individual, and (b) social support as physical and material, as well as emotional, fit the cultural, social, and economic circumstances of working-class life in McKees Rocks.

5.3 The Club Chronology and the Evolution of the Meaning of Social Support

“It’s just gotten more and more important as we’ve gotten older.”

“I think we’ve all gone through a metamorphosis.”

“It started out as one thing and over the years, it’s changed and changed and changed and changed.”

The history of the “Club” is two stories in one. First, the regular Thursday night meeting of the Girls’ Club itself has its own history of customs and rituals. But the once-a-month meeting is only the tip of the iceberg. Over the years, “Club” has also come to signify a set of social relationships that hold great meaning in the lives of the “girls.”

When the “girls” say that the meaning of being in the Club has changed dramatically since 1958, they are referring more accurately to the changing social relationships in the group than to the ritualized Thursday night event. The actual Club meetings have stayed remarkably unchanged throughout the years. The “girls” get together once a month, they talk, they eat, they laugh, and occasionally they cry. The menu has gone through different cycles, and the “girls” made holiday crafts during one period. But basically, Club meetings have remained the same -- an enjoyable social event with old friends that punctuates the month with regularity every first Thursday.

The supportive social relationships among the seven core members of the Club, however, have undergone a great deal of change over the group’s 40-year history. When the “girls” first started meeting, before they even thought about themselves as “the Club,” it was not a “do-or-die” commitment. For most, it was enjoyable, yet clearly for a few it

was optional. Now the “girls” speak unanimously about the Club in highly emotional language. They say they would never miss. They say it is therapy. They say it is spiritual. They love getting together and talking with each other once a month, they love eating together, and they love how they leave, feeling light-hearted and unburdened after they have met for three or four hours. They talk with each other often between meetings in one of the several “little clubs” within “the Club.” As they have grown older together, their conversations have changed predictably from their children, to their grandchildren, and finally, to themselves and their own lives. Much has changed in their individual lives, in the social relations within the Club, and in the social and economic world around them since the Club women began to meet over 40 years ago. Not least, what the “girls” expect from Club as a social support system has undergone a transformation.

The Formative Years From 1958 to 1970

Except for the certain fact that Joanne called the first “meeting,” little agreement exists about the Club’s early days. It was August 1958; Joanne and Buddy had been married almost two months. Joanne invited her high school friends to her new apartment on top of Larry Cersosimo’s butcher shop in West Park in Stowe Township. She wanted her friends to see the 16-millimeter films of her wedding day -- a day-long affair that was typical of marathon wedding celebrations in McKees Rocks in the late 1950s. Everyone agrees that Dolores, Betty, Anna, and Patti were there, but views differ about whether Angie and Louise also attended.

Joanne speculates in her narrative that she may have been thinking about her mother’s “club” when she decided to invite her friends over to her new apartment for the

evening. Anna, Joanne's mother, had belonged to a women's club throughout most of Joanne's childhood and adolescence. The members of Anna's group -- Anna Fabiano, Leandra Colantoni, Norma Fabiano, Anne Scallio, Helen De Croce, Rose D'Angelis, Tessie Garrasi, Isabelle Antonelli, Lucy Liberatore, Betty Mussari, Lena Alfarone, and Betty Vanko -- were all connected by marriage, by being *paesanas*, and by the interconnected social life in the Italian-saturated neighborhoods on Island Avenue and Norwood Hill. These women met regularly between the late 1940s and the late 1960s to talk, crochet and embroider, play cards, eat, have a "highball and one or two cigarettes," and enjoy a night out of the house. Anna recalls that the birth of grandchildren in the 1960s seemed to mark the beginning of the end of her club. As more and more of the women gravitated toward spending time with their own growing families, attendance at club meetings dwindled, and the group just stopped.

The Girls' Club did not go down a similar path. Between their first meeting at Joanne's new apartment in 1958 and today -- a time of enormous social, political, and economic change in the world -- the Girls' Club has adapted, evolved, and continued to meet the changing needs of its members.

The first 12 years of the group were fluid, "not etched in stone" as one of the narrators remarks. The group had no consciousness of itself as a "Club," and membership changed as various "girls" invited different friends and acquaintances. However, the entry and exit of some early Club members reveals the development of nascent group norms.

The core group consisted of Anna, Betty, Dolores, Joanne, and Patti. Then Anna invited her high school friend, Donna. They had been majorettes together and the rest of

the “girls” knew and liked Donna. Joanne invited her friend Louise. Then Anna invited Angie. Angie was the epicenter of several interesting stories about the early Club membership. Most of the women who are no longer a part of Club -- Doris Fazio, Gloria Zapka, Grace Mijalek, and Arlene Vaskevich³ -- entered through Angie or through someone Angie had invited. For example, Angie invited her best friend Carole to attend Club, and Carole in turn was responsible for quite a few other early Club guests.

Carole is still an on-going Club member, but opinions about how she became a regular Club member differ, including Carole’s own version of the story. Whether Carole entered by virtue of attending Club meetings every time they were at Angie’s, or by virtue of driving Angie to every Club meeting, is not clear. But everyone concurs that, at some point in the connection between Angie and Carole, the other “girls” suggested that Carole should start coming regularly, even though she was not in the “class of 1955.” Carole and Angie were in Club together until Angie’s husband got transferred out of Pittsburgh in 1970. By that time, Carole had become a Club member in her own right and she has continued ever since.

Angie also invited Doris Fazio. Although Doris is no longer a Club member, she came to meetings for well over a decade. The story of Doris’ departure has two parts. First, the narrators simply report that Doris had “family problems” that included the responsibilities of helping her daughter raise two small children, leaving little time for social activities. However, the Club narratives also suggest that Doris stepped outside one of the normative behaviors that was developing in the group -- the privacy norm.

As told by several narrators, when Doris converted from Catholicism to a Pentecostal religion, she began to talk about her beliefs at Club. Everybody tolerated her new passion because they enjoyed her. But during one meeting, Doris' behavior crossed some invisible line. She read a poem from a "scroll" she had brought to Club about how God had brought the "girls" into her life. She wanted to talk about her new religious convictions, and moreover, she wanted her friends to be interested in what she had to say.

Consensus appears among several narrators that Doris violated a group norm -- the norm that Donna describes as "not trying to convince anybody of anything more personal than who you should get as a good wallpaper hanger." The Club narrators agreed that religion was a private affair. They responded to Doris' religious initiative with teasing, but they were annoyed at her attempt to proselytize. Their refusal to be serious upset Doris, and she left the group shortly after that incident. Although several "girls" have stayed in touch with Doris, her formal departure from the group suggests that she did not conform to one of the emerging unwritten rules of acceptable behavior.

During the early years, Doris invited two women who had not graduated from McKees Rocks High School to attend a meeting: Grace Mijalek and Gloria Zapka. Everyone liked them but they never rose above the rank of outsiders. No one knows for sure how long they came to Club, but most agreed that it was less than one full year. Gloria and Grace faded away during the early years of the Club's history, but not without providing another example of how norms and expectations were starting to emerge.

Anna tells the story that associates these two women with the "time the Club almost broke up." The tale is noteworthy because it represents one of the few overt

conflicts among the “girls” that appears in the narratives. It all began with the death of Angie’s mother who passed away about two weeks before the “girls” were scheduled for a Christmas celebration party with their husbands -- a custom the group engaged in during its early history. Anna and Patti were decisive in their opinion that the Club members should cancel the night out, showing respect for Angie’s loss and grief. The others -- under the persuasive influence of one of the “new girls” -- decided to go anyway.

Anna and Patti were angry and disappointed. At the next Club meeting, they told the group how they felt. According to Anna, that tense moment marked a time when the Club almost came apart. But the way Anna told the story is as important as the conflict itself. By attributing her friends’ behavior to the “negative influence” of the outsiders, Anna was able to reduce the dissonance she felt between the positive image she held of her friends and the disapproval she felt about what they did. Anna underscored that such disrespectful behavior would never happen today because the “girls” have become extremely sensitive to the pain that occurs in their lives.

Stories differ about whether Angie or Betty invited Arlene Vaskevich. She too was in the group for a relatively short period, and she departed from Club on a sour note. Several narrators characterized Arlene as someone who was always “trying to impress.” They cited two specific incidents that illustrated their criticism of Arlene’s behavior.

First, one night when it was Arlene’s turn to have Club, she announced to everyone that she was serving them cream puffs that she allegedly had made from scratch. Someone in the group must have gone into her kitchen for something and spied the half-open bakery box with the pastries in it and the price tag showing. The news spread that

Arlene had not baked the cream puffs, but had purchased them. The “girls” remarked that they “could care less” about whether something was homemade or not; rather they were dismayed by her need to lie about what she had done. Their critique of this incident and of Arlene’s disingenuous behavior was unanimous. As confusing as this episode was to the “girls,” they liked Arlene and she continued coming to Club for some time.

At a later point, but following a similar pattern of deception, Arlene told the Club that she could no longer attend because her sister was ill and in need of her care. The “girls” said they were “taken in” by her story. Several of them offered to help Arlene’s family, and all of them sympathized with her dilemma. They were shocked when one of the Club members saw Arlene’s sister out and about in town, and after inquiring into her health, discovered that nothing was wrong. The “girls” believed that Arlene just wanted to leave the Club, but that she could not do it in a straightforward manner. They have never understood why she felt the need to be deceptive. Although it is not possible to know what would have happened if Arlene had been honest about why she did not want to come to Club anymore, the way she handled leaving violated a group norm.

The last member who joined and left the Club during this early period is Louise. She, like Angie, left the Pittsburgh area when her husband relocated because of his work. Both Angie and Louise try to attend Girls’ Club meetings whenever they return to McKees Rocks to visit family. They are clearly still connected to the group, and they take advantage of every opportunity to stay in contact.

The current members stated that they are “friendly” with all the women who left. However, their behavior shows that they are closest to the two women who left because

of their husbands' relocation. The narratives strongly suggest that the other four -- Doris, Grace, Gloria, and Arlene -- violated group norms that were developing in the Club regarding pretentiousness, deceptiveness, and being "pushy" about private topics.

In addition to the fluidity of the membership in this early period and the emergence of new group norms, several on-going narrative threads originate during this early time in the Club. One that appears in the early narratives is the uniform assertion that the Club never had any pretense to formality. The group has always operated without a formally stated purpose. Throughout the narratives, the "girls" rejected outsiders' attempts to classify them, especially as a card club. Although they never identify these comments as a possible reflection of society's trivialization of women's friendships, the "girls" are clearly piqued as they respond to this assumption. They repeatedly say, "We don't play cards because *we don't need to*; we talk and eat."

A second narrative thread that begins during this early period and stays visible throughout their stories is the Club women's roles as mirrors and models for one another. As each of them walked down a similar life path, they looked to each other for validation of the limited choices they could make. They helped each other to define the boundaries of what was possible and desirable and what was not.

They learned from one another about the choices of adulthood in a social and cultural environment that pushed them toward traditional expectations of women as wives and mothers. Their parallel stories show how each of them was socialized to please others -- or at least to care about the approval and to avoid the disapproval of others, especially their parents. They were not expected to be independent or ambitious.

They accepted their special role and responsibility to raise “good families,” and for the most part, their stories provide little evidence of any contradiction between what they expected of themselves and what their social and cultural worlds expected of them.

During the Club’s early historical period, the women supported each other through the transition from daughters to wives, and subsequently from wives to mothers.

Between 1958 and 1961, all the women married, and by 1963 all were mothers, with the exception of Patti, who did not marry until 1969 and who did not have children. To support these transitions the Club took on several collective support roles.

The Club validated each other’s choices by faithful attendance at critical life events. Even before Club started meeting, many of the “girls” had been bridal attendants in each other’s weddings. Soon after, they began to engage in a predictable sequence of validating rituals. They always visited a newlywed member’s first apartment; they always went to see a newly acquired house. They bestowed gifts and lavished praise on the homemaker’s abilities to decorate and create comfort for her family. When babies came, those who had more experience shared what they knew with those who had less. They traded baby clothes and tips on the care, feeding, and handling of infants and toddlers. And always they gave gifts as a sign of involvement in each other’s lives.

As children grew, Club adapted its schedule to meet the needs of women whose self-expectations or those of her husband dictated that she be home to put her children to bed before she went out for the evening. During this period, Club meetings did not begin until nine o’clock in the evening or later. For some of them who did not work outside the

home and spent their days in the company of children under the age of 10, Club provided adult female company and conversation outside the circle of the family.

The Club women unanimously agree that these early days bore little resemblance to what the Club is like now. During this early period, they admitted that they may have been trying to impress and show each other -- and perhaps themselves -- that everything in their lives was okay. They would "clean for days" and cook large meals to show off their specialty dishes. Adult children of Club members recalled that their mothers would not let them touch the special foods; they had to wait until the next day for leftovers. Several husbands recollected that it was clear even in the early days that their job was to help get ready and then to get out of the way -- preferably by leaving.

In the early years, the Club was not rigid; it was a time of shifting membership and trying on different formats, like collecting dues, and taking their husbands out at Christmas time. But by the 1970s, the membership and the norms of the group began to stabilize. The Club women stopped collecting dues and they decided it was *they* who were the friends, not their husbands. Subsequently, they stopped taking their husbands out for Christmas. Their kids started to grow up and the Club women's lives and their view of their Club began to change. By the mid-1970s, the group became the seven women who today are Club's continuing members.

It would be difficult to leave this early history of the Club without commenting on the social and political events occurring throughout the country in the period between 1958 and 1970 -- events that rarely enter into the reminiscences of the "girls." While the domestic revival of the 1950s, together with ethnic and class expectations, strongly

influenced the traditional choices of the Club women, the early Club years parallel a time in history when the roles of women were quickly changing.

Throughout the 1950s, the number of women entering the work force was steadily climbing. By 1960, twice as many women were working as had been in 1940, and the proportion of working wives doubled during the same period (Harvey, 1993, p. xix). The birth control pill was finally approved for mass production by the federal government in 1960 (Kaledin, 1984, p.9). In 1963, Betty Friedan wrote *The Feminine Mystique* in which she identified the “problem that has no name,” referring to the private emotional malaise of women, bordering on depression, and the public waste of talent that characterized the lives of middle-class housewives in isolated suburbs who yearned to do something beyond their domestic roles. While Black women historically had always worked in this country, economic, social, and biological forces were allowing white women in the 1950s to leave home and traditional roles in record numbers.

During this same time, emerging liberation groups were finding their voices and power. The Black Civil Rights Movement was gathering steam, rooted in southern Black churches and spearheaded by courageous women like Fannie Lou Hammer. The Black Civil Rights Movement opened the way for the Women’s Liberation Movement and the Gay and Lesbian Liberation Movement that exploded in the sixties and seventies. And, not least of all, resistance to United States policies in Vietnam began to erupt.

Into this arena came consciousness-raising groups. As early as 1966, groups of women began to form what were then called “rap sessions” and “bitch sessions” (Shreve, 1989, p. 9). The practice spread rapidly. By 1970, there were women’s consciousness-

raising groups in every major city in the country. One of the primary tenets of consciousness-raising was that “the personal is political.” The theory was that by seeing the common threads uniting all women, women would then begin to have awareness or consciousness of the political nature of their problems, and act on that.

The Club narratives are almost completely silent on the phenomenon of consciousness-raising groups, as well as other social and political events. Direct evidence of impact of these movements does not appear in the Club narratives. When I asked the “girls” about the influence of particular events like Martin Luther King’s death or demonstrations against the Vietnam war, they briefly responded to the questions with knowledge that these things had happened, but their answers made it clear that Club meetings focused on family and community life, not on outside events.

However, I detected a note in the narratives that leads me to speculate that the “outside” voices may have permeated their “inside” world. The clue was the fierceness with which the Club members responded to the repeated assumption that they must be in a “card club,” with its implication that women would have little else of interest to offer each other. I was struck by the intensity with which they protested others’ trivializing the Club. Their responses to outsiders’ questions about the Club made clear again and again that they valued their time with their women friends as central, not peripheral to their lives -- not to *do* anything, rather to *be* with each other.

Their enjoyment of each other’s company *as women* may be viewed as rooted in part in the traditional sex-segregated social worlds of their mothers and grandmothers, who usually partnered with their husbands for large public events like church, weddings,

or lodge meetings, but whose daily life was spent mostly in the company of other women. But these older relatives generally had a reason to gather with their women friends -- like sewing, baking cookies, or cards. The Club women, on the other hand, assert that they enjoy just being together and gather explicitly for that purpose.

While I am not suggesting that the Club women were directly affected by the politics of women's liberation or consciousness-raising when those movements were actually occurring, the same-sex loyalty we hear in the narratives may be in part an artifact of the retrospective process of narrating a life history. The "girls" have lived through nearly 30 years of magazines, newspapers, television, and films giving increased public importance to women's issues and women's friendships. The construction of their same-sex loyalty may be partially a result of contemplating the past from their position in the present. I am not saying that the "girls" do not genuinely like being together, for the evidence for that is unassailable. Nor do I deny same-sex loyalty in working-class culture in general (Komarovsky, 1962). However, based on the ferocity of their assertion of liking to *be* with one another, I am speculating that their contemporary narrative of unabashed enjoyment of each other's same-sex company may have been influenced by the historical period through which they have lived -- a period in which it has become increasingly acceptable for women to openly value spending time with each other.

Further, I cannot help but find it ironic that the Club women loyally meet, listen to one another, and participate in each other's lives at a time when many women who *did* participate in the Women's Liberation Movement, myself included, are again isolated, in part, by the very "success" we dreamed about in consciousness-raising groups.

As I speculate on the permeability of the membrane between the Club women and the voices of the Women's Liberation Movement over the past three decades, I fear that there is little evidence that reverse osmosis may have taken place. By this, I refer to how little the Women's Movement in the 1970s and 1980s saw, heard, or was influenced by the issues central to the lives of working-class women like my narrators. While the Women's Movement messages of justice and equality for all women appealed to working-class women and women of color, as well as white, middle-class women, their lives, their problems, and their work in the movement were not generally visible (Minnie Bruce Pratt, personal communication, January 13, 1999). White, middle class women took or were conferred leadership positions in the early Women's Movement, obscuring the issues and roles of working-class women and women of color. The Women's Movement ushered in an extraordinary opportunity for systematic examination of women's subordinated position in society including unequal treatment under the law, unequal access to employment, unequal remuneration in the labor force, and unequal political power (Hagen, 1993, pp. 308-311). But the Women's Movement, like all movements, was influenced by the social and historical location from which it emerged. The particular historical context in the United States in which feminism developed did not acknowledge or use class as an active or dynamic mode of analysis.

Since that time, several currents of feminism have developed that raise class perspectives as a way to think about and act on women's social and economic concerns. Most notably, the feminist thinking of African-American women (Collins, 1991; Dill, 1983; hooks, 1989; Hull, Scott, & Smith, 1982; Lorde, 1984) and other women of color

(Moraga & Anzaldua, 1981; Anzaldua, 1987; Anzaldua, 1990) testifies to the fact that class as well as race enters the analysis of gender “when and where women of color enter.”⁴ These authors assert that theories advanced as being universally applicable to women as a group on closer examination appear greatly limited by the white, middle-class origins of their proponents (Collins, 1991, p. 7). They insist that feminism is not monolithic; that is, while some currents of feminist theory have challenged the hegemony of male-dominated scholarship, they have not dealt with class or race, and thus they have promoted the notion of a generic woman who is white and middle-class.

Within feminism, it has taken decades of soul-searching, collaborative work for women of different ethnic backgrounds, cultures, classes, sexual and gender orientations, and religions to begin to see that their political and economic issues are knit together in a whole system of domination that might be collectively opposed. And the alliances are often still tenuous. But still now, as in the early days of the Women’s Movement, feminism as a system of thought seems disconnected from the lives of working-class women like my narrators, providing them little practical information or strategies to tangibly change the particular class-linked oppressions they face in their lives.

The Stabilizing Years From 1970 to 1980

During its second decade, the Girls’ Club became aware of itself as “the Club,” solidified its traditions, and implemented the regular practice of mutual aid in each other’s behalf. As the “girls” and their families began to grow and change, they remained central actors in the continuing developmental drama of their adulthood.

Two artifacts document the emergence of Club's self-awareness as "Club." Early in the 1970s, Anna began to keep track of whose turn it was "to have Club." She purchased a spiral notepad and documented the history of the Club meetings. Anna divided the notebook into years and months, indicating a member's name next to each month. If a child was graduating or getting married, that event was noted as a special celebration and no Club meeting occurred that month. Anna also chronicled each restaurant the "girls" chose for the Christmas party, and who hosted the gift exchange.

Patti created the second artifact signaling the Club's emerging self-awareness. She typed up the names, addresses, phone numbers, and birth dates of the group and had it "mimeographed." She printed the "First Thursday Club" on the top of the page, establishing the group's official name. By the second edition of the list, the birth dates were dropped, signaling that sending birthday cards was no longer expected among the "girls," who wanted the Club to be free of obligations and burdens. This second edition also showed that the telephone numbers had shifted from letter exchanges to all numbers.

During this period, the group began to think of itself as the "First Thursday Girls' Club" and to solidify their traditions. Monthly meetings continued and telephone calls in between meetings kept everyone up-to-date on significant personal, family, or community events. The women decided to bring their husbands and families into the Club circle once a year at a family picnic. Donna hosted the family picnic for several years as she and her husband had just installed an in-the-ground pool. Donna's backyard and the pool sufficed until the children of the Club members started having their own

children, making the numbers who attended the annual family picnic too large to be accommodated, resulting in a move to the Kennedy Township picnic groves.

The Christmas celebration clearly became a “girls only” event. The “girls” introduced crafts into their Christmas ritual. They made Christmas ornaments for themselves and each other until the 1980s when their interest waned.

Early in the second decade of the Club’s existence, one event stands out as a force that pulled the women of the Club closer and more deeply together. Patti’s husband -- a well-liked police officer who had suffered from severe alcoholism through most of his adult years -- took his own life on Patti’s birthday. This event took on an extra tragic dimension for the Club women because his suicide occurred the day after the Club had been together for their Christmas celebration. Anna poignantly recalled that she still cannot think about that Christmas without thinking about Bobby’s death. This tragedy pulled the Club women together for Patti in a way that they had never before been called upon to do. They supported her throughout the funeral like another family.

While the death of Patti’s husband pulled her and the “girls” closer together, the event paradoxically differentiated Patti from the group. Long before this time, Patti had already made several choices that were different from the other “girls.” She deferred marriage to almost eight years after most of the other “girls,” and she continued to work after she married. Married only a little over three years, Patti had no children, and thus no access to the role of motherhood that acted as a central bond between the other “girls.”

Patti’s differences from the other women surfaced in the story of her near departure from Club because she felt “nothing in common” with the “girls.” When Patti

revealed her alienation, Anna protested to her best friend that indeed she *did* belong by virtue of her underlying sameness and historical connection to the other “girls.” Anna’s caring and the insistence of the others persuaded Patti to stay, but her estrangement may reveal at least one member’s perception of the narrow range of acceptable roles that were available to the members. It is a testimony to the loyalty Patti feels for the group and vice versa that she has remained a significant and integral part of Club in spite of not sharing the two significant roles -- wife and mother -- that hold the other women together.

Throughout this second decade, the Club became more involved in significant support roles for its members. As little children started growing, the Club women began to act on their implicit commitment to participate in all major family life events. This commitment is symbolized by the ritualized offering of “the cookies.”

The famous Girls’ Club cookies punctuated the celebrations that took place during this decade and since. The decade began with First Holy Communions and ended with bridal showers and weddings. In between the “girls” hosted their children’s graduations in the unique McKees Rocks style replete with rented halls, hired professional bands, catered food, and hundreds of people. For every event, there were “the cookies.” Each “girl” baked her specialty cookie and each made at least ten dozen per event.

Anna makes the thin anise-flavored Italian waffle cookies, *pizellis*, or the macaroons. Carole traditionally makes the ladylocks, and Patti brings the acorn cookies with a little bit of chocolate on the tips. Nobody would even try to make Betty’s specialty -- the Italian prune-filled cookies -- because she uses her mother Michelina’s recipe. Donna makes the colorful angel food logs, and Joanne bakes either the chocolate

and pink thumb prints or the Italian spice cookies. Dolores traditionally brings orange cookies or she makes nut rolls with the help of her Aunt Ann, who knows how to make them the “right way, not skimpy on the nuts like people make them today.”

But the work does not stop there. The “girls” are also in charge of going to the events and setting up the cookie table. The “girls” arrange the cookies on trays in such a way that signals to the Club member who is hosting the event, “We are all here and we support you.” Guests, familiar with the Club’s cookie ritual, line up for their favorites.

The second significant support role the Club adopted during this decade was to validate the “work” or chosen role each woman was pursuing. Everyone made different choices. Patti worked throughout this 10-year period and Donna continued working full-time while raising three active children. As her children were able to take care of themselves, Dolores went back into the work force to supplement her family’s income. She soon found herself propelled into a career track she had not sought and could not turn down. After her children graduated, Betty took a part-time job and began to prove to herself that she had marketable skills. Carole had a couple of short-lived jobs, but welcomed the opportunity to care for her newborn grandson. Anna stayed home and provided in-home care for her grandchildren and her mother. Joanne stayed at home and began to deal with a series of serious physical problems.

The narratives contain increasing numbers of references to a level of acceptance; “whatever they wanted for themselves was great and we wished them success.” The Club women made different choices about returning to work or staying home as their children grew, but nowhere is there evidence that anyone thought that one woman’s

choice was “better” than another. Although the Club women say that they thought the Women’s Movement was silly or irrelevant to their lives, the choices they made in their lives between 1970 and 1980 may reflect the indirect impact of the movement. The Club women lived through and may have benefited from an era of expanding options for women and growing acceptance of the roles women chose for themselves. While their narratives directly endorse more traditional roles, their lives between 1970 and 1980 seem to demonstrate that their world had grown large enough to tolerate both traditional stay-at-home roles and non-traditional outside-the-home work paths for women.

Facing Crises Together From 1980 to 1990

Between 1980 and 1990, two major events influenced the changing role of the Girls’ Club. First, the “girls” began to experience adult crises in their own personal lives and in the lives of their families. Second, many of the Club women and their families were affected by the precipitous decline in Pittsburgh’s industrial economy.

During the 1980s, many of the “girls” faced the declining health of their parents, often necessitating the addition of new roles as care-givers. They dealt with difficult decisions about nursing homes and extreme medical procedures at the end of life for their parents. They turned to each other for information and understanding, for reassurance that they were human, and for solace that perfect choices did not exist. They looked to each other for comfort when the demands of care-giving exhausted them.

They depended on each other when their parents died. With little formality, they developed a behind-the-scenes decision-making process that involved food preparation for the bereaved family, flowers, attendance at the wake, and full participation in church

services and funerals. But these “tangible supports” were symbolic of the central manifestation of their support, which was their utterly dependable physical presence. For example, Anna commented at her father’s funeral that it was a special solace to look out into the faces of mourners and see the “girls” who really knew from the inside what she had lost. The absolute commitment to be present to each other in good times and in bad times was the bedrock upon which stood the edifice of support in the Girls’ Club.

The same absolute commitment was invoked when a member became physically ill or emotionally distraught. The member in need could always count on rides to doctors’ offices, visits in hospitals, cards, and food for her family. All of this tangible aid was indicative of the commitment each Club member felt to be a witness to each other’s life and to testify first hand that “you can get through this, too, just like you did before.”

In addition to changes resulting from personal and family difficulties, the declining industrial economy also changed the lives of several of the Girls’ Club members and their families. Donna and Dolores both lost jobs in large corporations during this time. Both re-entered the work force in new positions in relatively short periods of time. But for several of the women in the Club, the single biggest impact of the economic decline was the financial strain they experienced when closing plants forced their husbands into early retirements and curtailed pensions. For others, the untimely “forced” retirements meant having their husbands at home full-time for the first time in their married lives.

During this difficult period of transition in their adult lives, the Club narratives reveal the evolution of two new support strategies. First, the “girls” begin to emphasize the importance of having people in their lives who have actually faced the same

experiences that they themselves were facing. They state that they feel more sane and able to handle difficult circumstances when they talk with another “girl” who has experienced first hand the very same situation -- what the social psychology literature identifies as “shared knowledge structures that originate in a tight interlocking network of people and experiences” (Morgan, 1986, pp. 403-422). These “shared knowledge structures” resulted in the comforting, almost spiritual, sense of being deeply understood that is evident in their descriptions of the experience of retired husbands at home all day.

The Club women also shared knowledge of the economic and emotional impact of job loss on their marriages -- a knowledge that bred a remarkable ability to respond to each other in a meaningful way. Dolores talked about the sting her husband felt in taking replacement work that paid far less than the job he had held for over 25 years. Donna described the way her husband took on a more “feminine” role, doing the housework and tending to his grandchildren. Betty described her husband’s depression as he began to feel not only occupationally, but also psychologically, deskilled. Anna spoke about the loss of predictable economic stability enjoyed by unionized industrial workers and the subsequent cut-back in her expectations for material comforts and economic security.

In addition to “shared knowledge structures,” the second support strategy that emerged during this third decade of the Club’s existence was the Club women’s expression of encouragement to each other to take care of themselves -- not for others but for themselves. Until this point in the lives of the Club women, identities and roles had been almost synonymous. The women of the Club took on the roles of “women’s work”

in their families and they helped each other to carry out these roles. They were the ones who held their families together, whether they worked outside the home or not.

But as the women aged and were no longer consumed by raising children, there were narrative clues that the “girls” had begun to assist each other construct new and acceptable social realities. The mainstream culture’s interest in self-care and personal development began to appear in their language, as in “You have to put yourself first.” They supported fledgling attempts to live individuated from the expectations of both their parents and their children whose needs pressed in on them. They celebrated whatever joy emerged in their life, such as Betty’s night at the reunion or Donna’s career.

These “new” support roles toward increased individuality and self-assertive independence may seem quite “old” to those familiar with the ideology of the highly individualized wellness movement and what Christopher Lasch (1979) identified as the “culture of narcissism.” And in fact, it is possible to view my narrators’ support of self-care in part as a reflection of contemporary popular culture’s preoccupation with self-improvement. However, after a lifetime of carrying the responsibility for connection and togetherness in their families, I call attention to the particular *way* the “girls” are able to support each other toward a more individualized stance. When they urge each other to “put themselves first,” they do so with an understanding that each of their lives is inextricably intertwined with family commitments and communal obligations. The contemporary theme of supporting individual well-being works for the “girls” because it is tempered by the shared knowledge that to do so to the exclusion of cherished family roles and commitments would be detrimental to their sense of identity and coherence.

Before leaving this decade in the Club's history, the departure of one short-term member, Janet Krieder,⁵ requires attention. Janet was a popular classmate at Rox High, but not someone the "girls" felt close to. She left McKees Rocks after graduation to become an airline attendant. When she returned much later in her life, the narrators saw her at community events such as their reunions. The "girls" invited her to attend a Club meeting as a "guest," and she took them up on it. The "girls" enjoyed having her in the group because her "lifestyle" was different from theirs. She told interesting, sometimes risqué, stories about traveling and the business world. Like the other "girls," Janet was invited to all major celebrations. Early in the 1980s, she attended a wedding reception for one of Joanne's children where the incident leading to her "ousting" took place.

Janet was sitting at a table with the "girls" and their husbands; she was, as the story goes, drinking too much. She made a bold play for one of the husbands and was overheard by Carole. Further, she tried to dance "dirty" with this same husband and perhaps one other. The "girls" who heard and witnessed her behavior were outraged. Carole's narrative in particular emphasizes the theme of betrayal. Clearly, Janet violated the most fundamental unwritten rule of loyalty; she violated the expectation that no Club member would ever do anything to hurt another Club member.

After this incident, Janet attended the next Club meeting, which was described as "cool" at best. From that point on, no one called her to tell her the date of the next meeting. In their minds, this indirect action amounted to "ousting" her. Occasionally, they joke about the image of her sitting by the phone waiting for them to call. Down deep, they suspect that she would have grown bored with them sooner or later, for they

saw their lives as “tame and boring” compared to hers. They state that her departure was a given and that the wedding incident brought it on sooner rather than later.

Janet’s ousting provides the clearest example of how the Club women respond to a violation of one of their most fundamental codes of behavior: “You do not hurt or embarrass another Club member.” The narratives are emphatic that the group’s indictment of her was absolute and unanimous.

Without excusing the inappropriateness of her behavior in the context of Club relationships and norms, I notice in the narratives that no one makes any attempt to understand what theoretically could have been “the other side of the story.” No one calls attention to either of the husbands’ possible part in the incident, other than to exculpate them from any responsibility. I find this story of particular interest because of its impact on the group’s internal diversity -- or lack of it. It seems as though the “girls” were interested in Janet, enjoyed her, and were ready to accept a “different kind of woman” in the group, had her behavior not crossed the most fundamental moral code in the group. The narratives suggest that it was what she did, rather than who she was, that resulted in her excommunication from the group. If the egregious incident had not taken place, and if Janet had not tired of the group as the “girls” conjecture, I speculate that she might still be a Club member, even though she was “different.”

Increasing Authenticity and Self-Acceptance From 1990 to Today

By the end of the millennium, the “girls” of the Club will be 62 years old -- what sociologists now call the “young old.” Several of their narratives show that a process of “life review” is already occurring. The “girls” are in a unique position to validate the

meaning of each other's lives, having been active participants in those lives for almost half a century. They have witnessed the courage each has shown in meeting life on its own terms. They have celebrated each other's successes and mourned each other's sorrows.

The way they now support each other is not altogether coincidental. They started out over 40 years ago validating the choices they were making as young working-class women. They affirmed each other's beliefs in the traditional female values of raising families and staying close to home when those values were idealized by the cultural construction of perfect domesticity in the 1950s, and when those same values were challenged by social and countercultural movements in the 1960s and 1970s. Today, they reassure each other that what they have done with their lives has been worthwhile.

Their narratives in this most recent period reveal a more loving, less role-bound group. The Club women express relief at being unhampered by envy and jealousy toward one another. They acknowledge that long ago they let go of the false fronts they used to try to uphold. The image of being happy, in control, having what they wanted, and inhabiting dust-free homes has been permanently set aside. They unabashedly enjoy belonging to a group of women who think alike, who like to do the same things, who have a storehouse of shared memories, and who genuinely care about each other.

Their appreciation of each other has increased in direct proportion to their own self-acceptance. Several predict that they will be fast friends well into the new millennium. They are aware that health statistics predict that they may live longer than their husbands, and they take considerable comfort in knowing that they have life-long

friends who will always see them through. They publicly joke about going to the same nursing home, while privately, they admit fearing the day when one of them “passes.”

Summary

Asking the narrators to historicize their memories of Club’s development resulted in much more than a group chronology. Telling the Club’s story gave each of them an opportunity in the present to make sense of past events and to situate the role of the Club in those events. The narrating process seemed to catalyze a recommitment to taking care of the bonds of this very special friendship that helps them remember who they are.

Four social support themes emerged across all seven chronological tales. During its earliest period, Club was a supportive “mirror” -- a reflection that validated the transitions every “girl” made from adolescence to adulthood, from single to married, from daughter to wife and mother. In the years during which Club norms stabilized, the “girls” supported each other by witnessing the development changes in their lives. They were physically present to each other for all major celebrations and tragedies throughout this period. As the “girls” began to age, their support system became a reservoir of shared knowledge that buffered them against the fragmenting influence of personal and regional crises. While everything in the social, political, and economic world around them changed, Club provided a touchstone for their identity, values, and sense of coherence. In its most recent stage, the group increasingly supports and encourages each member to accept, respect, and love exactly who she is, with not pretensions. Over the years, social support has come to mean validation, continuity, witnessing, physical presence, and encouragement toward increasingly levels of authenticity.

5.4 How the Girls' Club Works

“Deep down, we’re not kidding about this being our therapy.”

“We’ll drag ourselves to Club, even if we’re not feeling good. Once I get there, it re-energizes me. It puts me back into perspective.”

When asked what belonging to the Club means to her today, each narrator states that the Club is her “therapy.” The use of the metaphor of “therapy” is a critical clue to understanding the members’ perceptions of how the group works. While the narrators describe Club as therapeutic in the original sense of the word -- that is, Club has ameliorative, healing, or curative powers in their lives -- their accounts of how Club actually works reveal a different set of cultural values and “helping” practices from those that characterize professional group therapy. Club works as a kind of “vernacular therapy” with a specific set of assumptions and rules that fits the social and economic conditions of the women’s lives.

The Meaning of the “Club as Therapy”

The Club members dedicate a large part of their narratives to a discussion of the therapeutic benefits they derive from their experiences together -- both the experience of the ritual monthly Club meeting and the experience of their on-going relationships in Club. When the narrators’ assert that “Club is therapy,” I believe that they are expressing a “bi-cultural” perspective on the meaning of therapy. From their perspective within mainstream, middle-class culture, the “girls” assume that therapy, like their Club, is a helpful and healthy experience. But from their other perspective, which has been

influenced by class and culture, their understandings of Club as therapy widely diverge from accepted cultural constructions on the meaning of therapy. Their description of how Club works as a different kind of indigenous therapy has several distinctive features.

Format. First, viewed simply from the perspective of format, Club works as a naturally-occurring, voluntary group of peers rather than a professional group that comes together for a specific “therapeutic” purpose. Club is leaderless and informal. It consists of people who have known each other their whole lives and who want to continue their relationships. Club members have complicated, intertwined relationships that occur as much outside the actual once-a-month meeting as they do in it. Monthly Club meetings usually last three or four hours, but the amount of time Club members give each other outside the meeting and between meetings is flexible and adjusts to what different people need at different times. Obviously, Club meetings do not cost money for services.

“Mini-Clubs,” or smaller groups of friends within the larger Club circle, are acknowledged as a legacy from childhood relationships, and they are respected. Individual members are likely to seek out their “mini-Club” for more in-depth airings of a problem, while driving to or from Club or over the telephone.

Finally, several narrators describe group meetings as multivocal conversations -- verbal free-for-alls where many conversations happen at once. Seldom does the group sit and listen while one member speaks, then followed by another. Multiple conversations are the norm. If someone hears an interesting conversation on the other side of the room, it would not be unusual for her to stop her conversation and listen to what other members are saying, and then resume the conversation she is in.

Club meetings are informal, loud, and punctuated with food and stories. However, under the surface of what may appear disordered and messy lie deeper, more significant codes of behavior that reveal how “Club as therapy” works and clues to understanding the culturally specific meanings the members attribute to “therapy.”

Cohesiveness and conflict. Like many forms of group therapy in the Western tradition, group cohesiveness is the essential quality of the Girls Club. The “girls” view open expression of hostility and conflict as a threat to the group’s cohesiveness. They consider the possibility of inter-member discord as a non-productive rupture that is to be averted at all costs. They avoid conflict for the greater good of the group.

They forego the temporary urgency of expressing anger or engaging in conflict in order to sustain the Club’s long-term social relations. In doing so, they reject a well-known principle on how therapy in group settings helps people to grow: that it is better to be honest, especially when in discord with the group, rather than hold back. They do not subscribe to the notion that working-through conflict achieves higher levels of trust or relationship. For the “girls,” conflict signifies the unraveling of group solidarity.

The consistent manner in which the “girls” disavow conflict in the group might be viewed as “repressed,” or at least, inefficient from the perspective of dominant group therapy models. However, the Club’s extraordinary commitment to avoiding conflict may reflect a cultural priority on sustaining peaceful relationships with others rather than on the therapeutic ideal of expressing an inner, individual self (D. W. Sue & D. Sue, 1990, pp. 35-38). Growing up in a working-class community taught them the lessons of how you take care of the group that in turn takes care of you. To fracture the solidarity of

your family, your extended family, or your friends was to put your own safety in jeopardy. The avoidance of conflict reduced the risk of alienation from stable relationships. These were the people who would be there for you without fail if you got laid off, were sick, or needed protection or help. And from an even deeper level of class consciousness, the Club women's endorsement of cohesiveness over self-expression may reflect their ingrained knowledge that you cannot face or solve all of life's problems on your own, that there are collective strategies for survival as well as individual ones.

Over the 40-year span of their relationship, the Club has perfected specific communication strategies for protecting the cohesiveness of the group. In addition to prioritizing the group's well-being over individual expressiveness, each strategy reflects culturally specific values and preferred patterns of interaction.

Waiting-with-respect. For example, the practice of "waiting-with-respect" is a communication style that often comes into play when someone in the Club has a problem, and another member wants to help that person. The person who wants to help unfailingly shows respect by waiting, by not rushing the other. The strategy of waiting-with-respect may be rooted in the old-world climate of the Rox, where an individual's personal pain or a family's relational problems were considered private -- a part of life that others did not pry into unless invited. Waiting-with-respect as practiced in the Girls' Club may be an unconscious adaptation of the tradition of privacy that characterized the community they grew up in -- a tradition that dictated against the public disclosure of personal or family pain.

The communication style that I identify as “waiting-with-respect” frequently consists of some or all of the following steps:

1. Paying attention to the myriad behavioral cues that communicate someone is in distress.
2. Drawing on your reservoir of shared knowledge about this person to assess how great her distress is.
3. Making yourself available to the person without directly asking if something is wrong.
4. If she remains silent, assuming that she is not ready to speak or that you are not the person she can speak to.
5. If she chooses not to talk with you, not becoming self-centered, assuming that her reticence is about you. She is not ready to talk.
6. Having faith that she will talk with you or someone else whom she trusts when she is ready.
7. If she chooses to talk with you, listening and bearing witness to her story.
8. Encouraging her, sharing your own experience of how she has had the capacity to handle things in the past. Expressing care and concern.
9. Making suggestions based only on your own life experiences and what you have learned from those experiences.
10. Not advising, interpreting, or criticizing.

While I have abstracted these steps from descriptions of waiting-with-respect provided by several narrators, Anna summarizes the steps in one narrative stroke when she explains the way the group understands when Joanne is ready to speak:

It's just that we have respect for each other. We figure if Joanne wants to talk about it, she'll bring it up. Maybe she just doesn't want to deal with it tonight, maybe she just wants to forget about it for the evening. . . . When I see someone is hurting, I steer clear of that subject totally. When they're ready, they'll talk about it. And if they don't want to talk about it with me, that's fine. As long as they have somebody else that they can talk about it with. Because everybody does need somebody.

Some of the women practice respectful waiting with such a high level of precision and attention to detail that they experience it as telepathy, or "reading in-between the lines." The narrators single out waiting-with-respect as part of the therapeutic experience of Club that is particularly well-suited to their needs.

First, the Club women describe waiting-with-respect as a caring and considerate way to interact with their peers. They contrast it to being pushed or invaded by a more interpretive style. Betty, for example, summarizes the importance of not pushing someone to talk -- including herself -- before she is ready. Using both her own experience and her knowledge of how Club works, she tells us that it is simply ineffective to try to make someone talk before they are ready:

There are times when one of the girls will say she just can't talk about it, and she'll say, "I can't talk about it," and we don't talk about it. We let it drop until another time when she's more receptive. We've learned when to talk and when not to talk. Same with me If I say, "No, I don't want to talk about it right now," they'll say, "Okay." And that's good because I don't feel compelled to talk if I don't want to talk. . . I think what I've learned is when to try to be supportive and when just to lay back.

The “girls” view their own initiation of conversation as the signal that they are ready to take responsibility. They are comfortable in talking about a problem when they feel they “have a handle on it”; they shy away from exploring problems through introspection or disclosing their innermost feelings about family and private affairs.

In these ways, the meaning of therapy for Club members corresponds more closely with cross-cultural views on counseling than the dominant group therapy perspective in which an increasing level of self-disclosure is considered a measure of mental health (Fedele & Harrington, 1990; pp. 1-12; Jourard, 1964, p. 21; Yalom, 1970, pp. 270-274). Paralleling the findings from studies on ethnic minorities and contemporary immigrant groups in the United States, the Club members believe that pushing someone to talk about problems before she is ready or requiring the disclosure of personal information about one’s self or one’s family is highly intrusive.

For example, recently-arrived Spanish-speaking immigrants from Puerto Rico, especially those from lower socioeconomic backgrounds, found counseling approaches requiring that they talk about their problems introspectively to be inappropriate, resulting in the immigrants’ early termination of services. (D. W. Sue & D. Sue, 1990, p. 45). To many Asian Americans, the potential shame involved in talking intimately about one’s family renders such practices useless. For this cultural group, loyalty to family is of paramount importance (Root, 1993, pp. 211-224). Similarly, many African Americans have a lifetime of experiences that tell them not to trust whites, including white therapists, especially with intimate information about one’s self or one’s family (Wilson

& Stith, 1993, pp. 101-111). Perhaps rather than asking whether the dominant model of group therapy works, a better question may be “for whom does it work?”

The second reason waiting-with-respect fits for the Club is that, in their worldview, there are no answers but those a person finds for herself. The “girls” believe in the other person’s ability to solve her own problems. They assume that the other person has strengths and personal resources, not just problems. In their world, everyone has problems. Here, the Club women’s behavior widely diverges from what Raymond (1986) called the largely white, middle-class “culture of psychotherapy,” where it is considered normal for persons to routinely seek professional therapy services.

As a group, these women are largely unfamiliar with that perspective. They have used the professional mental health system sparingly only for the most dire crises. The “girls” simply do not translate the idea of “having problems” into “personal deficiencies” that require expert intervention. They see each other as competent people who have problems they will deal with when they are ready -- not as people who are “problematic” or who can or should become “happy” when they work their problems out. For them, “Life is life and what are you going to do?” You take things as they come, you do the best you can, and if you are lucky, at the end of the day, everyone you love is okay.

Additionally, the “girls” are uncomfortable with the idea that anyone could be an expert in someone else’s life. They state that “no one can tell someone else what to do.” They believe answers must come from within to be effective, making advice useless, if not disrespectful. Further, they see advice-giving as a risk to the cohesiveness of the group. Donna most clearly describes the perils advice-giving presents to relationships:

I think it holds friendships this way. I mean if I tell you to do this or that and you don't want to do it, then you're going to feel funny coming back and saying, "Well, I didn't do it that way. I did it this way." You're going to feel guilty around me.

Finally, Anna summarizes how respectful waiting is a uniquely sensitive approach to interacting. She comments on the contemporary practice of directly asking people to talk about their feelings as "not right" for everyone. She uses the distinctively colloquial speech of the Pittsburgh area in her disapproval of people who are "nebbby," or noseey:

Nobody comes out and asks if we are unhappy. Nobody ever asks that. But we know because we can kind of read through the lines. Mental telepathy or something. . . . It's funny that nobody ever steps over that line and asks like an embarrassing question. But we don't. We just know our place. That's something to be proud of too. Because there aren't too many people in this world today that really know how to respect other people and their feelings. Today people don't think anything of asking the most personal questions. They're *nebbby* is what it amounts to. People are so *nebbby*, nothing is too private. They'll ask anything. But we're not like that with each other.

Honesty and direct communication. In a similar vein, the "girls" consider honesty and directness -- commonly accepted as key communication strategies in group psychotherapy -- to have only relative worth. When honest and direct communication carries no emotional threat of hurting anyone in the group, the "girls" readily subscribe to its value. However, if the short-term expression of honesty is potentially hurtful to another member, it is forsaken. It is simply not worth the risk. The decision to be honest hinges on a judgment of whether honesty might injure other people in the group. One of Dolores' narratives shows particularly well the intensive self-scrutiny she submits herself to in order to determine the relative worth of expressing potentially negative feelings:

I try to look at myself and think, "Did I provoke it?" Maybe I just didn't handle it right. I always turn it around and look at myself and say, "Did I do anything to

maybe cause that comment or situation?” I would bite my tongue first before I would say something. I would never ever want to hurt any of them. Or be judgmental in any way. We’re all individuals, but we have our differences. But you would never hurt one another. That’s the way I look at it in Club. We are all individuals. And whatever those differences are, doesn’t mean that I’m right and she’s wrong or vice versa. Beyond that, it’s not worth it. Nothing is worth jeopardizing my friendships.

Carole is the only narrator whose point of view more closely reflects contemporary thinking about the importance of honesty in groups. While most of the Club women agree that honesty’s value is relative, Carole’s story is different. She advocates direct truth-telling in interpersonal relationships, regardless of the outcome:

If something is on my mind, I don’t care if it’s good or bad or whatever, until I confront the person on it, I’m sick inside. I feel low, but once I talk about it, I figure it’s finished. I’m done with it. But I have to talk about it. . . . If you’re honest with somebody, everything else falls in place. But if you’re not honest, how can you be truthful to yourself? I mean, I’m not saying that my life is just a straight and narrow thing. I do things I’m sure that aggravate people. But be honest with me, tell me, tell me what you don’t like.

This position puts Carole in opposition to the other Club members on an important communication strategy. For the rest of the group, “truth” is relative, and the “right thing to do” is the thing that does not hurt individuals or the group. The remainder of Carole’s narrative did not overtly identify any conflict triggered by her differing opinion on honesty. However, what Carole does sometimes contradicts what she says about honesty. The clearest example of the discrepancy is the description of the way she went about suggesting a different menu for the Club meetings. She orchestrates her disagreement in a way that does not hurt anyone’s feelings and does not imply criticism of previous ways of hosting the group. In other words, she follows the group’s norm.

It would be easy to condemn the Club's refusal to subscribe to an absolute standard of honesty as evidence of passivity or lack of agency. However, viewed from an historical perspective where each member is seen in a context of sustained relations with others, their refusal to judge, interpret, or confront each other with "absolute honesty" may be considered a kind of forbearance that fights the urge to be right as an individual. The notion of "standing up for one's own rights" is highly individualistic and characteristic of Western notions of independence and healthy individuation (S. Sue & Morishima, 1982). By unabashedly questioning the accepted value of "always being honest," the "girls" offer a view of a healthy adult that differs from the expressive, assertive, autonomous individual who puts herself first -- a view that dominates the mental health model in the United States (Pedersen, Draguns, Lonner, & Trimble, 1996, pp. 324-326). The Club women's steadfast refusal to prioritize honesty as an absolute virtue might be culturally interpreted as the strength of their inner resolution to put the well-being of the group first, rather than an individual lack of assertiveness.

Catharsis and negative emotion. Similar cultural factors mitigate against the public expression of strong emotion in the Club. The "girls" do not engage in catharsis in its common therapeutic meaning as the emotional cleansing brought about by a verbal expression of deeply held, often negative feelings (Yalom, 1970). If the expression of strong feeling were to happen at all, it is much more likely to occur one-on-one on the telephone or in some other venue outside of the group meeting.

Emotional catharsis seems to hold no intrinsic positive value for Club members. While verbal or emotional expressiveness is frequently cited as a highly desired occurrence

in a well-functioning therapy group (Yalom, 1970; D. W. Sue & D. Sue, 1990), several of the “girls” talk about the release of strong feelings as gloomy and heavy -- a behavior that does not result in anyone feeling better. It violates the women’s desire to keep their group time upbeat and light-hearted. Further, they do not support the exclusive use of group time for individual catharsis. They are sensitive to sharing time, and each makes an effort to participate without dominating the conversation. Dolores summarizes this perspective when she says:

No one has ever dominated our get-togethers. It’s like bits and pieces. As a whole, it’s a lighthearted evening which a lot of us sometimes need, that light-heartedness. But yet, if any of us ever have a need that we needed to talk, we can. But we’ve never ever totally dominated an evening.

Several narrators tell us that Club is seldom a “downer.” Betty says, “We’ve saved a lot of money on psychiatrists . . . we call it our therapy group. But we don’t get into anything real heavy.” The implication in this often repeated perception is that Club is “therapeutic” and helps by “pulling you up,” while professional counseling, on the other hand, is therapeutic by virtue of being “heavy and serious.” Further, the narratives suggest that the “girls” perception of professional therapy as “gloomy” may be related to their belief that such services are reserved for the most horrendous situations in one’s life.

The emphasis placed on the often-mentioned “light-heartedness” of a typical Club meeting suggests that the “girls” prefer a less somber, less serious way of interacting. At no time do they imply that the issues they are dealing with are not serious, but they have developed ways of dealing with serious issues that fit their desire not to pull each other down or dominate the group.

If they are upset, they are likely to understate what happened, knowing that the others can “read between the lines,” or to express it through the use of humor or joking. Thus, while humor is seldom mentioned in the research on how group therapy works, it is a significant strategy for the expression of strong feelings in the Club.

Humor and storytelling. The role of humor and humorous storytelling has a strong presence in the Girls’ Club narratives. The “girls” repeatedly attest to the importance of humor, the ability to laugh at themselves, and the overall light-heartedness of the group as intrinsically therapeutic. Donna describes the link between the talk, the laughter, and the healing qualities of being at Club: “The thing I like best with the Girls’ Club is when we laugh and have a good time. It’s good for us. You get things out and talk about them and laugh.” Patti describes how the hilarity of the group transforms those who may have arrived sad or burdened:

Sometime you come there and you’re sad about something, and all of a sudden, you just start laughing and crying. Sometimes we’re laughing so hard, we can’t hear the story because who’s telling it is laughing so hard. And we’re all just screaming.

There is abundant evidence in the narratives that the sheer physical and psychological pleasure of talking about themselves and laughing together have enormous general benefit for the group. Even if the content of what they are talking about is difficult, the process of talking and laughing is satisfying and therapeutic.

Humor help the narrators to gain perspective and to feel more balanced. Patti observes that the perspective she and others associate with the Club is so powerful that it operates at a distance, even when they are not together:

All of us are getting to that age where we have problems. We laugh about different things that have happened like when Joanne was having the garage redone. Things like that are our whole evening. When you're in the middle of that, you want to cry, but then you think, "Wait till Club hears about this!"

Further, specific uses of humor go beyond its generally well-known health effects on human physiology and psychology.⁶ Humorous storytelling in the Girls' Club has evolved into a ritualized and acceptable way of making private pain public. Betty explains how storytelling protects the private world of each narrator while it simultaneously opens the door to topics that would otherwise be too difficult to broach:

I certainly don't profess to know everything that goes on in each one of the girls' houses. We know a little bit of everybody. But if someone has a problem, she'll talk about it, but it's more like relaying a story. And I do the same thing. We'll tell a story. They turn out to be funny. We laugh about it.

The story functions both to outline the situation and to inform the other "girls" how the speaker may feel without disclosing the private details. In this way, as Donna puts it, the narrator is heard and acknowledged, "but there's a privacy there that still keeps everyone high in esteem with everyone." The frustration is aired and the teller does not lose dignity. A Club member can use a story or a joke to bring up indirectly the folly of one of her children, her spouse, or herself -- topics that may be culturally tabooed material or sources of pain for her -- and know that the others understand. The art of humorous storytelling has reached a high level of sophistication assuring that the real meaning of the narrator's tale is understood. The humor allows the narrator to object to a situation while at the same time accommodate herself to it, as Betty observes:

I can tell a funny story. . . . Everyone laughs and gets a big kick out of it. But in a way what I'm saying is, "He does some really stupid things and it really drives me crazy is what I'm trying to tell you." And I think they've gotten it because

they'll say, "Well, what's he doing now?" And I'll say, "Oh you wouldn't believe it. He's doing this now; he's doing that now." And they laugh and *they know*[my emphasis].

Humorous storytelling serves to voice frustrations, air grievances, and as Mirra Komarovsky (1962) pointed out in *Blue Collar Marriage*, facilitate expression of ritualized criticism of a person or a situation. Humorous storytelling is one of the "marriage-work" strategies (Oliker, 1989) the Club women have devised for dealing with pain in an acceptable manner, allowing the maintenance of individual dignity and interdependent family roles. At the heart of humorous storytelling is a bi-cultural mixture of (a) current therapeutic notions of assertion and speaking out, and (b) older, deeply rooted values of adjustment and accommodation to marital and family commitments..

Summary

Club as therapy is the metaphor the "girls" use to describe the emotional relief they experience at Club. After they go to a Club meeting or talk to a Club friend, they simply feel better. From the insider, culturally specific perspective of the "girls," feeling better is by definition therapeutic. Their therapy with each other is successful.

The goal of their therapy is simple; it is not to solve problems, to gain mastery over life situations, or even necessarily to change anything. Their goals more often are to relieve stress, share a burden by talking or laughing, feel encouraged by people who care about you, and gain perspectives and strategies to cope with the commitments that you have chosen and that continue to represent your values. Dolores explains how the therapeutic effect of Club does not equate with solving problems. She feels relief not from the problem, but from the tension of trying to deal with it herself:

Many times I'll leave there and come home and I feel more peaceful. . . . The problem is still there. The problem hasn't gone away. But just releasing some of that anxiety or the stress that's associated with the problem helps. It is my total group. It's my group therapy.

This is a group where long-time women friends bear witness to each other's lives. They wait with respect, they listen with compassion, they acknowledge that problems exist, they validate a history of resilience in solving problems, and they stand together. When needed, the Club members help each other to manage difficult emotions and accommodate to difficult circumstances. At this stage of their lives, the Club provides a valuable context that allows each women to acknowledge the value of her own life.

When the "girls" use the metaphor of Club as therapy, they refer to the conventional meaning of therapeutic as healthy and ameliorative. But they also use the metaphor in a vernacular way that differs from prevailing Western models of group therapy. While many forms of mainstream group therapy tend to focus on the development, identity, self-expression, and self-actualization of the individual self, they fail to recognize the particularly Western cultural, social, and economic values base from which this individualized view of a healthy person derives (Draguns, 1996, pp. 4-5; D. W. Sue & D. Sue, 1990, p. 10). Therefore, concepts like "therapy" and "mental health" are assumed to have universal meaning, rather than occurring in a cultural context that colors that meaning (Draguns, 1975, pp. 273-289).

The narrators' use of "Club as therapy" describes an indigenous view of a "mentally healthy or normal" adult that differs from the culturally-mediated ideal of the independent, expressive, open, active, insightful, future-oriented individual who is capable

of intimacy and welcomes personal change (Atkinson, Morten, & Sue, 1993, pp. 3-68; Draguns, 1996, pp. 4-5). Although the “girls” were born into the ideological milieu of individualism that characterizes the United States, their specific class and cultural experiences as second-generation daughters of European immigrants shape the meanings they attribute to therapy and mental health. The Club women’s view of therapy favors the restraint of feelings and respects silence and waiting. Even within Club’s close circle, a private sphere of life exists that even the best of friends might not want to discuss openly. The Club prioritizes the cohesiveness of relationships within the group rather than the gratification of individuals.

And finally, in its most radical departure from the individualistic self-oriented goals of Western group therapy, the Club acts as a powerful accommodative force for the maintenance of communal commitments such as marriage and family. While current notions of the “healthy individual” in United States culture emphasize “individualism, independence, self-reliance, autonomy, and the overall ability to separate from groups as hallmarks of emotional maturity” (Spear cited in Frazier, 1998, p. 11), the Club women subordinate self-expression and “honesty” for the sustainability of cohesive social relations in the group. The universally accepted definitions of “healthy” group dynamics and “healthy” group members implicit in many dominant group therapy models in the United States (D. W. Sue & D. Sue, 1990, p. 13) fail to capture the “therapeutic” experiences of the women in the Girls’ Club. These women, who identify first and foremost as members of families and community groups, like their Club, become stronger and healthier through group confirmation of their social commitments.

5.5 How Social Support and Health Connect in the Context of the Girls' Club

“Not that we’re doctors or psychiatrists.
We’re friends, that’s all, we’re just friends, there to support each other.”

“Just a bunch of little things -- bunch of nothing.”

I have previously argued that in spite of 20 years of scientific investigation into the causal connection between health and social support, researchers have not been able to explain the link. While studies that demonstrate a correlation between health and support are prolific, the discovery of a causal connection has remained beyond the grasp of traditional scientific techniques.

Narrative research promises an alternative to statistical and experimental techniques for establishing a causal link between health and social support, for narrative methods have the power to claim the concept of “cause” from its conventional usage in the formal sciences. In this chapter, I clarify the narrative links I found between the outcomes of well-being and coherence among the “girls” -- what I have referred to previously as a “meaning-centered” definition of health -- and the experience of being a Club member. While these narratives do not prove with empirical evidence how health and social support come together, they uncover the phenomenological evidence that ties my narrators’ Club stories to their experiences of well-being.

My goal is to describe the patterned narrative structures I found in the Club women’s stories that connect their Club experiences with their own meaning-centered definition of health. To do so, I searched the narratives for those particular places where

the “girls” repeatedly or emphatically attribute health-enhancing outcomes to being a Club member. Then I examined all of these attributions of health, coherence, and well-being for the form or the narrative structures the narrators used as the vehicle for their attributions.

I found five major narrative patterns linking health and Club’s social support system:

1. Sense of coherence and the Club as a web of shared meanings,
2. Sense of control and the Club as a “progressive narrative,”
3. Sense of personal power and the Club’s light-heartedness,
4. Sense of self-acceptance and the Club as authentic and unpretentious, and
5. Rejection of patient or client role and Club as the quintessence of informality.

In the sections that follow, I discuss the linkages I uncovered between the narrative patterns and the women’s attributions of health. I have drawn these inferences from reading all seven narratives, paying special attention to the narrative patterns the Club women use to express the health outcomes of being Club members. Before turning to the narratives, I describe the process I used to investigate the way narrative links might explain the Club women’s attributions of health and well-being.

What If Club Did Not Exist?

In order to see the connective tissue between the women’s attributions of health and the patterned form of the narratives, I employed a “what-if” strategy suggested by narrative scholars to discover the causal explanations between events in a story.

Narrative researchers Margarete Sandelowski (1991) and Donald Polkinghorne (1988) describe the “what if” strategy as the test for causal significance in narrative studies.

Sandelowski (1991) explains that

Employing a what-if strategy, the researcher looks for what has happened and imagines what has not happened by asking such questions as: What if this particular action had not been taken? What if this particular motivation had not been operative? Would the outcome have changed (p. 164)?

I apply this “what if” strategy to the narratives in order to investigate how health outcomes and Club membership may be connected. Using this narrative strategy, the researcher imagines how particular outcomes would change or disappear if certain antecedent events or human actions did not take place (Polkinghorne, 1988, p. 173). If the particular outcomes would have changed or not occurred at all, then the particular events or human actions under investigation may be defended as causally significant.

Employing this “what if” strategy in my study, I examine whether the Club women’s lives would have been the same if they did not have the Club. Would their well-being and health have been impoverished by the absence of Club as a social support? For example, regarding the individual narrators, I ask myself specific questions like these:

1. What if Dolores had not called Betty to go shopping for her reunion dress on one particularly stressful day in Betty’s life?
2. What if Patti had not had the group’s support in the aftermath of her husband’s suicide? What if Joanne did not have confidants who understood how being ill separated her from her functional relationships with her family?
3. What if Anna had no one outside the family who comprehended what the loss of her family home meant to her?
4. What if Carole had no place where she was accepted for who she was rather than what she did?

5. What if Donna did not have a place apart from the business world where she felt recognized and valued as the “girl from Hufty’s Hollow”?

Taking this interpretive analysis to the group level, I ask larger questions like, “Would the health and well-being of the Club women have been the same if they did not have (a) a web of shared meanings; (b) a ‘progressive’ narrative about their lives; (c) a reliable social setting to be light-hearted and feel authentic, and (d) an informal group in which to deal with difficult situations without feeling deficient or diminished?”

Narrative Links

My argument is that the Club has indeed been a significant, although not unique, explanatory factor in each member’s sense of health, wholeness, and well-being. Specific narrative patterns link the women’s attributions of health to the Club and show that their lives would have been substantially different -- less coherent, less meaningful, and thus, less healthy -- without the enduring influence of the Club and their lifelong friendships. By connecting the patterns that describe how Club functions and the members’ patterned attributions of wholeness, coherence, sanity, and well-being, I conclude that Club is one of the reasons the narrators maintain their overall sense of physical and emotional health. I do not mean to imply that Club is the only location in my narrators’ lives where they have access to shared meaning, humor, stories of resilience, and the normalization of typical life problems, for these strategies may operate in more diffuse ways among other women in working-class cultures like the Rox. Rather I hope to show how Club specifically and emphatically focuses these strategies.

Sense of coherence and the Club as a web of shared meanings. The Girls' Club as a web of shared meanings repeats as a pattern throughout the narratives and often relates to the members' sense of sanity about the conditions of their lives. The "girls" attribute their deep understanding of one another to this web of shared meaning that encompasses the time-depth they have in the Club, the cultural specificity of their backgrounds, and their common experiences growing up and continuing to live in a unique social, cultural, and economic region of the country. As a result of having shared a lifetime of experiences in McKees Rocks, the interpretations each woman makes about life events, including adverse ones, is embedded in a shared worldview. At its foundation, this worldview is shaped by layer upon layer of specific knowledge they have about each other. They know (a) that they have survived challenging personal problems, daunting social change, and painful economic shifts; (b) that they can still laugh; and (c) that they can enjoy the good and meaningful times as well as endure the tough ones.

They have developed a perceptual congruity that is not serendipitous but rather the cognitive and emotional consequence of joint participation in a deep and broad network of social, historical, and economic circumstances. They literally and figuratively keep a record of each other's lives. They know each other's stories firsthand. They have been partners in a 40-year conversation, and they no longer have to explain much of anything about themselves to each other.

Their shared story provides the "girls" with a means for understanding, evaluating, and constructing accounts of experience that make instant "common sense." For example, the agreement among themselves about what it means to have a "good" life and to be a

“good” woman (with only minor variations) is unequivocal. The congruity of their values results in an almost instantaneous understanding of each other’s motives, feelings, and actions; it confers a health-enhancing sense of coherence and stability to their lives.

What if the Club women did not have this sense of shared meaning? This web of shared meanings helps the Club women make sense out of the course of their lives; they mirror and validate the similar choices they made regarding the primacy of family life and family roles. A major path toward comprehending, managing, and finding meaning in the events of their lives and the choices they have made -- what Aaron Antonovsky (1987) referred to as a “sense of coherence” (pp. 16-19) -- derives from sharing this interconnected web of similar life experiences. Without the web of shared meanings, the “girls” would have far fewer resources to make sense out of their past and to put their limited life choices into an acceptable framework. A strong sense of coherence, rooted in their historical, cultural, and class experiences, helps them cope with the ubiquitous stressors of their lives today and hence helps them to maintain their health.

This passage from Joanne’s narrative illustrates how she links her personal well-being to this web of shared meaning in the Club. She attributes her emotional survival during a difficult time in her life to the Club women’s presence and to their deep knowledge and understanding of what she was going through:

And the girls, they knew all about that. . . they were there for that, too. I mean Betty and Dolores knew every single detail of everything, and that’s when Betty used to kid me all the time, “Why aren’t you taking notes and writing this down, you could have a good best-seller.” Like my life is so interesting and hers isn’t? But they were a big part of that. They helped me through that a lot, just talking to them, listening. I didn’t do that by myself at all. I didn’t think of talking to some professional, because I didn’t feel I needed to, I don’t know. The girls were

the people I needed to talk to. I never even gave the idea of a professional a thought, and I thought I was going nutso half the time.

Sense of control and the Club as a “progressive narrative.” In addition to building a sense of life’s coherence, the “girls” share memories that act as a collective record of each member’s current and historical resilience and ability to cope successfully with adversity. Being “Rox girls” is a narrative pattern that signifies the hardiness with which each “girl” meets life’s demands. By referring to themselves repeatedly as “Rox girls,” they remind each other that Rox girls make it through illness, death, children’s problems, and economic turmoil. The narrative pattern of “Rox girls” encapsulates resiliency and reinforces a health-enhancing sense of manageability to their lives.

Although the “girls” remember the problems each has lived through and survived, the culture of the Club is not problem-centered. The Club collectively engages in a consistent pattern of “appreciative inquiry” -- a process that organizational consultants have defined as generating “affirming images which integrate, synthesize, and pull people together” (Bushe & Pitman, 1991). The process of appreciative inquiry works in the Club to amplify the positive in the narrators’ lives and to emphasize resiliency, hardiness, coping skills, and solutions that have already worked, rather than problems and the broken parts of their lives. The “girls” consistently acknowledge the steps, however small, each one takes to increasing her life satisfaction. They validate each other’s successes apparently without jealousy. As such, appreciative inquiry and the members’ focus on their capacities serve a health-enhancing function and contribute to the production of hopeful narratives of progress about each of the Club women.

This particular pattern of the “positive narrative” differs significantly from the literature on women’s friendships that suggests that sharing emotional vulnerability is more typical among close women friends than sharing achievements. Some researchers have even theorized that the intensive use of relational, intimate language may correlate with women’s self-perception as vulnerable and powerless (Cancian, 1986, p. 701). In contrast to this, the language and images that typify the way the narrators talk about themselves and each other as “Rox girls” tend to create a steady story of progress -- of “doing the best we can” -- rather than weakness and disempowerment.

In an essay on the use of narrative for establishing a sense of “self,” social psychologists Kenneth and Mary Gergen (1983) argue that progressive narratives “link together experiences in a way that . . . offers the opportunity for people to see themselves and their environment as capable of improvement” (p. 258 & p. 267). As the “girls” confide stories of strength, accomplishment, and progress, they build a “progressive narrative” that may contribute to a sense of improvement in their lives. While their coping stories may or may not ameliorate situations of inequity, injustice, or pain in their lives, with them the narrators build a positive, upbeat image of themselves as “Rox girls” that helps them deal with difficult situations. This image differs from the “problematized” picture of girlfriends talking about doubts, vulnerabilities, and anxieties that typify some descriptions of women’s intimate friendships.

The narrative pattern of “progress stories” illustrates another link in the Club women’s testimonies between their sense of health and well-being and their membership

in Club. The following passage from Dolores' narrative characterizes the "progress stories" that connect to the women's sense of control and improvement in their lives:

One thing is that we definitely are not envious. Whatever each one of us has accomplished is a source of pride. . . like I'm very proud of Betty, of what she's accomplished in her life and how she went out and was able to find a job as a bookkeeper. Somebody would say "Bookkeeper? What's the big deal about a bookkeeper?" But for Betty to have done that! I'm real proud of her. And Donna, what she has accomplished and how hard she has worked for it. Why would I be envious of their hard work and sacrifice? I'm really proud of the things all the girls have accomplished. And I feel comfortable to say these things to them. Our values are part of our trust in each other.

Sense of personal power and the Club's light-heartedness. No matter what topic they may be exploring, the tendency of the group is to move conversationally away from a sense of hopelessness or despair about problems to a sense of energy and delight in each other's company. They do not defer serious topics; they have faced numerous tragedies together, and they attend to each other's concerns with earnestness. But the group's propensity is away from gloominess toward a more light-hearted atmosphere. The patterned references to "light-heartedness" are a third narrative link connecting the women's health attributions to their membership in the Club.

Researchers have long known that the physiology and psychology of laughter can make a person feel better (Cousins, 1979; Ornstein & Sobel, 1987; Siegel, 1986). Among the far-reaching benefits of a humorous outlook on life are (a) maintaining a sense of balance and perspective, (b) relieving stress, (c) and improving coping abilities (Hafen, Karren, Frandsen, & Smith, 1996, pp. 541-561). In addition to the documented health benefits of laughter, the Club's use of humor may produce another, less recognized one.

The narratives repeatedly describe the use of humor as a strategy for gaining a sense of power over demoralizing or unmanageable situations in the members' lives, from events as mundane as dealing with repair persons to on-going conflicts with their husbands or children. For all of these, humor is a frame-changing strategy; humor alters the potential vulnerability the storyteller may feel and helps dissipate the strong negative emotions. Humor helps some of the Club women deal with their husband's "trained incapacity to share" (Komarovsky, 1962, p. 157) by mediating the frustration they may feel while, simultaneously, turning an irreverent analytic eye on it.

The Club women's use humor turns a sharp lens on the male world; they criticize, they mock, and above all, they do not take the men too seriously. In marital situations where the relational stakes are high, humor allows the women of the Club to feel a sense of power and control over difficult situations. By laughing at the situation or themselves in it, they are able to achieve an "improved" feeling about it. Laughter allows them to let off steam while they reassess their perceptions and dissatisfactions. Laughing together, the Club women affirm the frailties of the person who is the object of the joke. Whether or not she chooses to challenge the situation or accept it, the storyteller can deal with her own emotions in a way that both relieves stress and "saves face," thus helping her to maintain a sense of self-control and personal power.

What if the Club did not exist? Of course, the "girls" could survive without their sense of humor. However, they would have substantially fewer resources for transcending their predicaments and for feeling a sense of power over their circumstances.

Betty's narrative explicitly describes the narrative pattern of humor and the sense of health-giving manageability it brings to the speaker:

All I can say is, I think I've become stronger. . . . And the fact that I have the girls to confide in, even tell a funny story, like my paint story, everyone laughs and gets a big kick of it. But in a way what I'm saying is, "He does some really stupid things, and it really drives me crazy," is what I'm trying to tell you.

Sense of self-acceptance and the Club as authentic and unpretentious. The Club women talk about their group as a place where they can speak authentically without fear of violating socially or culturally constructed standards about who they are supposed to be, or as Donna puts it: "We can act silly around each other and don't have to worry about what your kids or your grandkids would think of you." Within their growing circle of acceptance, they have felt emboldened to be less and less guarded.

The story of increasing authenticity over the years is a fourth narrative pattern showing the connection between the Club women's health and their group membership. While several speak about the early days when they admittedly tried to please each other, their current friendships are characterized by relief from guardedness or pretension. As their sense of authenticity has increased with age, so has their capacity to reveal to each other, and perhaps more importantly to themselves, the lack of perfection in their lives -- things they admittedly would not have talked about years ago.

The Club relationships protect the narrators against the stress of relating to the world through a "false self" -- a term used in psychology to refer to the emotional distress that results when women outwardly project a culturally-conditioned image of perfection while feeling "like shit" inside (Jack, 1991, pp. 56-63). The Club provides a safe social

structure in which the women can be authentic and “real,” while simultaneously receiving the security of total acceptance and belonging. The women of the Club do not ask each other to challenge the roles they inherited or chose. The Club is not a “site of resistance” to traditional female roles; supporting resistance to these roles has never been a part of their culture, nor have they had access to collective liberation struggles that support resistance. However, the Club provides a socially acceptable space in which each member can admit frustration and deal with hurt or confused feelings while she receives her friends’ unconditional acceptance for making the best out of the life she has.

What if the Club did not exist in the lives of my seven narrators? The Club protects its members against feeling “split” between who they really are “within” and who they appear to be with significant others -- a split that Dana Jack (1991) argues is characteristic of depressed women. The narratives repeat the theme of the Club women’s authenticity with each other. Each woman’s health-enhancing self-acceptance has grown in direct relationship to the group’s increasing acceptance of her just as she is.

This passage from Patti’s narrative gives voice to the narrative link between the Club as a social site of authenticity and health-promoting self-acceptance:

The way we have Club, that’s the way we do our life. That’s our lifestyle. What we are is what we show when we’re together. I don’t think any of us are phonies. We’re not going to put on like we’re somebody so great or what we have is so great. Nobody’s trying to out do the other. None of us are like that. . . . What we are, that’s what we are. I used to feel bad because I lived down on Bell Avenue and the situation when we lived down there and we didn’t have a home. I never thought I’d get off of Bell Avenue. What happened years back, deep inside, it did affect my life because I always felt I wasn’t good enough for everybody because of what happened. But with the girls, what we are, we are, and what we have, we just show it.

The Social Meaning of Informality

The patterned references to Club's informality are a critical part of the explanatory narrative link between health and social support. The narrators' patterned description of the Club as informal represents a way that the "girls" assert the "normality" of their lives, even with problems. I suggest here that their insistence on Club as an informal group is a strategy by which they reject the patient or client role that is associated with professional mental health services.

To begin, the members build the narrative pattern of Club's informality with three different kinds of stories: stories that depict a typical Club meeting, stories that represent the Club to "outsiders," and stories that tell the Club's history. First, Dolores gives voice to the Club's informal self-definition when she responds to her husband's query on what the "girls" talk about at a typical meeting with the statement, "just a bunch of nothing." On the surface, this phrase plays down what goes on at a Club meeting, but Dolores uses it to mask the significance of what she feels actually transpires:

There are times Steve will ask me, "What's new at Club?" I don't tell him everything. And I'll say, "Oh, gee, nothing much." "Well what did you talk about the whole night?" he'll ask. "Oh, y'know, just a bunch of little things. Bunch of nothing." There are just certain things that I would not even tell my husband, because he doesn't need to know.

Second, when the "girls" describe the Club to people outside the group, they strongly uphold the image of informality. The uniformity of what they say to outsiders is noteworthy. They are adamant about the fact that they gather together because they *want* to be together, not for any particular purpose. They make it clear that they enjoy meeting without any pretense of purpose, like playing cards, prayer meetings, book

clubs, or knitting -- activities that are traditionally associated with women's sex-segregated voluntary meetings.

Finally, the group reinforces its own internal sense of informality in its "origin story." The narrators repeat the theme that their motivation was, and still is to a large degree, social. They maintain no self-conscious intention to be a woman's group. Joanne summarizes the Club's informality from the early days to the present:

It started out as one thing, and over the years, it's changed and changed and changed and changed. It started out as just keeping in touch with people. Keeping everybody in touch. I don't think we even realized that's what we were doing. And certain ones came in, certain ones left. It was nothing etched in stone. We just did. And we never even attempted once to "do" anything. We just knew we were going to sit and talk. And eat!

Informality is the essence that defines the Club's history, its organization, and its typical functioning. I suggest that informality is one of the most critical connections between the Club as a social support system and its members' overall health and well-being.

While mental health professionals turn to "social marketers" to sell the therapeutic benefits of group experiences to people in health maintenance organizations, and while scholars decry the demise of voluntary community groups (Putnam, 1995, pp. 65-78), the Girls' Club has met voluntarily once a month for 40 years with no stated purpose, no formal organizational structure, and no leader. Yet not one of the "girls" would now think of missing a meeting.

In order to specify how this "un-self-conscious" view of themselves as an informal group has contributed to Club women's capacity to support each other's health, I compare and contrast the community-based vision of support in the Club with the

assumptions of professional support services. First, the narrative pattern of Club's informality embodies a community-based vision of problems as "normal," contrasting with the commodifying and problematizing of everyday needs that, according to researcher Janice Raymond (1986), has transformed therapy into "a way of life" (p. 155). The care and support the "girls" provide in the Club originate in a distinctly different set of assumptions from those that operate among professional service providers.

A worldview that predominates among many helping professionals is that people are "half-empty"; that is, people have "needs" and needs are translated into deficiencies. Mental health and public health professionals tend to define a need as an absence or an emptiness *within* a person -- a personal deficiency. While most professionals would agree that individual problems develop in socioeconomic and political contexts, their common remedial practices treat people as though they were isolated from their contexts. Those of us who provide mental and public health services are limited by the tools, theories, and techniques of our professions; we tend to individualize rather than contextualize people and their problems. And, because we are "experts," our "clients" accept our individualized solutions as right for them, as meeting their needs. In such an environment, the potential for collective action -- for "clients" to see the connections between their health and the economic, social, or political system -- is remote.

The women of the Club, as the quotation at the beginning of this section asserts, are not doctors or psychiatrists. Nevertheless, embedded in their informal structure is a set of assumptions that promote health. First, they see each other as "half full." As several of the narrators say, "Everyone has problems." Yet having problems does not

turn you into a problem. No matter what fallibility they expose, they are still one of the “girls.” They see each other as people who have capacity, and they trust that, as they have in the past, they can and will again solve problems in the present and the future.

The “girls” view experts -- especially mental health experts -- as the court of last resort. They are much more likely to turn to their peers when some problem of daily life is bothering them. They go to their friends not for advice but rather for comfort, love, acceptance, and for the historical reminder that they can persevere. They know that their problems did not develop in a vacuum. Some make the connection between the lives they have today and the constrained gender ethnic experiences they had as young girls. They hold the regional economic structure culpable in their personal financial struggles. They see the double-edged outline of their traditional backgrounds as conferring on them both the closeness and the burdens of complicated family lives. They bring their whole lives to Club, not just their problems. They incorporate the congenial social atmosphere of Club meetings into discussions of dilemmas and tragedies. They have not commodified their emotional needs by turning themselves into regular consumers of therapeutic services. While their transactions are of great value, no money is exchanged. The “girls” are a health-supportive resource for resilient adaptation to difficult life events; they are a health-supportive resource for joy and growth. They are not clients; they are interdependent friends. Their relationships are informal, unmanaged, and voluntary.

In a culture that overvalues professional support services and pays little serious attention to friendship, especially among women, the significance of the health-enhancing role of an informal group like the Girls’ Club is difficult to discern. I suggest that there

are similar unrecognized social, non-professional resources for health that exist in our communities, organizations, apartment complexes, even work groups, though they may lack the not insignificant longevity of the Club. But because our national emphasis is on treating illness rather than strengthening communities, we do not see these groups; they are invisible. The Club narratives allow the special role of an informal, non-problematizing, community group to be seen; they reveal the significance of the group's informal structure as an authentic connection between social support and health. These friends operate as an alternative system to the transformation of ordinary life problems into deficiencies that require professional services for resolution.

What if the Club's informal network of friendship did not exist? Perhaps the "girls" would join the millions of American consumers, who without such an historically rooted, culturally homogenous, and socially supportive group as the Club, seek professional psychotherapy services. The emphatic narrative pattern of Club's informality suggests that the Girls' Club supports health by allowing its members to have problems and travails without seeing themselves as deficient.

Summary

As important as the advances in both biomedical and mind-body approaches have been in furthering our understanding of the complex connections between health and support, those research strategies have also been limited and incomplete. Throughout I have suggested a third approach to studying the connective link between health and social support -- through meaning revealed in narrative patterns. In this essay, I have suggested

that stories explain the meaningful connections the narrators make between two sets of experiences: being in the Club and feeling healthy, resilient, and whole.

By asking the question “what if the Club did not exist,” or more precisely “what if this narrative pattern of meaning that the ‘girls’ attribute to Club did not exist,” I have identified how the story could have ended differently. The sense of coherence, control, personal power, self-acceptance, and wholeness, even with problems, that the “girls” associate with being members of the Club would be greatly diminished or absent. By naming and describing the narrative patterns that link the narrators’ experience of well-being with their experience of Club membership, I have suggested that the narratives explain the connection between health and social support in the Girls’ Club. In the words of narrative researcher Donald Polkinghorne (1988), this approach has yielded “a narrative account that supplies events necessary or causal for the outcome under investigation to have occurred” (p. 173).

5.6 The Form and the Meaning of the Club's Health Narratives

“What keeps us together is that we all think alike.”

“Nothing's worth jeopardizing our friendships.”

“I have finally realized that I deserve to have some consideration, to have my thoughts or my feelings heard. . . . Even if it's little things, now, I'm going to do my best to make it happen.”

When I asked my narrators to tell me about whether their participation in the Club may have “cost” them anything, their responses were remarkably the same. First, each disagreed with the premise of my question: that all relationships, even the best ones, require something from us. They told me that the Club has exacted no emotional cost. They described Club as a consistent source of comfort, support, and pleasure, unencumbered by the burdens they face in their daily lives.

The narrators told a story of unconditional commitment to support each other, or perhaps more important, their perception of unconditional commitment to support each other. They stressed that the support of Club members was freely given, without the guilt or obligation that often accompanied the help they received from their families.

When they told me their unique stories of how they had benefited and grown from being in the Club, they often became overwhelmed with emotion and gratitude for their friends. They did not take their friends for granted and they realized what “treasures” the Club brought into their lives. Three narrators -- Betty, Dolores, and Joanne -- each described themselves as the primary beneficiary of Club's enduring support. Each woman stated independently that she had received the “most” from the Club; that the

“girls” had given her far more than she had given in return. Dolores felt that the Club had brought her the family and sisters she never had as an only child; Betty said that the Club had supported the slow but steady increments in her awareness of her right to being treated with kindness and respect; and Joanne believed that the Club’s steadfast support throughout her lengthy illnesses was unparalleled.

These three and the other four narrators tell a *collective* Club narrative that is uniformly positive in its view of the group experience. The *individual* stories that contradict this seamless story of group cohesion are conspicuously few. When episodes of conflict appear, the “girls” manage the conflict so that the group may return to a state of equilibrium. For example, Anna handled her disappointment about the group’s decision to go out for a party too soon after the death of one of the member’s mother by attributing the decision to the influence of two “outside” members who were really not a part of the core group. Dolores managed her frustrations with the group’s playful behavior when the work of the reunion needed to be done by scrutinizing her own behavior and ferreting out what she could have done to manage the situation more effectively. And Carole tells the Janet Krieder story by paraphrasing one of the husbands to say that such a betrayal could happen only because Janet was really “not one of the Club girls.”

The counterpoint between the Club’s positive collective narrative and their individual stories of managing tension and resolving conflict piqued my interest. I became intrigued by the differences in the positive story the “girls” told about their group experience and their individual experiences of conflict management. I wondered what the

differences meant and what the positive telling of the Club tale might reveal about the meaning of the narrators' relationship to each other and to their history.

Rather than scanning my interviews for examples of text that supported or discredited the narrators' strikingly similar assertions of Club as an unequivocal positive experience, I listened instead for the *meaning* they derived from their adamant position. Whether their story of untarnished group cohesiveness was "true" or not was not the issue; instead I wanted to understand their subjective Club experience and its reverberations in their lives. I asked myself what the narrators' tendency to describe their Club experiences in almost uniformly positive ways might mean, especially in the context of the narrators' past and present life circumstances.

Going to this level of analysis and understanding of the Club narratives required a deeper and broader listening than I had previously engaged in -- what author Dana Jack has called "harkening,"⁷ or listening for individual meaning and cultural meaning coming together (Dana Jack, personal communication, March 30, 1995). I was guided by the work of oral historian Alessandro Portelli whose interviews with ex-steel workers in the Terni Valley of Italy demonstrate that oral historical sources tell us "less about *events* than about their *meaning*" (Portelli, 1991, p. 50). I learned from Portelli that the form of the narrative and the arrangement of story materials reveal a great deal about the narrators' relationships to each other and to their historical circumstances. What narrators believe about what happened rivals the significance of what "actually" happened. When I assumed the "narrative truth" (Spence, 1982) of the Club women's positive attributions, I

could hear what the narrators believed about their group, what they desired from it, and how their story made sense within the context of their lives and time.

I found that the form of the positive story has its own meaning. A belief in the Club's solidarity is vital to the "girls" because it serves three major functions: First, Club is a symbol of personal integration. It helps the "girls" to make sense of who they were growing up in their McKees Rocks neighborhoods and who they are today. Their stories of personal integration show how the "girls" use and adapt their Club memories to hold on to their preferred identities -- their "real selves" -- as everything around them changes.

Second, Club represents a source of support for the strategies the women have used to survive the sometimes difficult personal, economic, and social circumstances they have faced. Their stories of accommodation and survival reveal how the Club assists its members to adjust to the personal and material conditions of their lives.

Third, Club provides acceptable ways for the women to entertain strategies for transforming their lives toward increased levels of autonomy and independence while simultaneously reinforcing lifelong commitments. Their transformation stories explain how Club relationships serve to support new forms of individuality while encouraging responsibility to fulfill marital and family obligations.

The stories the "girls" told about Club as a resource for (a) personal integration, (b) accommodation and survival, and (c) personal transformation expanded my understanding of the meaning of the positive way the narrators tell their tale. Each type of story provided a different angle from which to examine the group's need to maintain an untarnished, ideal view of the Club's cohesiveness.

One of the questions a qualitative researcher must ask in uncovering the positive emphasis each “girl” gives to her Club story is, “What is the meaning of this positive leaning in the stories?” In this essay, I intend to explain the meaning of my narrators’ perception that Club is an overwhelmingly positive experience by describing the vital role it has played in their lives. Additionally, I claim my own part in the production of the positive stance in the narratives, and I explore my understandings of what my complicity as a researcher means to me, the “girls,” and to this work.

Stories of Personal Integration

The narrators cannot imagine their lives without the Club. With the exception of their birth families, Club represents the oldest and most stable set of relationships in their lives. It is a thread that binds together their memories of adolescence, early marriage, family, and the Rox. The addition of similar family and class backgrounds, similar life choices regarding marriage and family, and geographic persistence contribute to the narrators’ perception that they are all the “same.”

The Girls’ Club narratives overflow with iconic images of parallel lives among all seven narrators. Patti talks about the underlying sameness of the “girls” through the metaphor of “changing hats.” She says that different members wear different hats out in public to suit the public roles they play, but when they come to Club, they take the public hat off and become one of the “girls.” What lies “under the hat” and makes the “girls” similar is their authenticity and non-pretentiousness. According to Patti, the girls are the same, because “what we are, we are.” Anna’s assessment of how her friends are all the same derives from values; she says that “we all have the same family values and

therefore we have the same friendship values.” Donna uses the image of common roots to describe what makes the “girls” similar. This common root system consists of hard work, family-centeredness, religious faith and morality, and being “smart,” whether educated or not. The perception of “sameness” produces safety.

Each narrator expresses comfort at being known by valued others who are perceived as essentially the same. Joanne says it is like being with your own family, with those who understand and know you “good from inside out.” Parallel lives act as mirrors that confirm the value and worth of each other’s choices. Looking back, several of them identify how class, gender, and ethnic traditions limited their lives, but the sharpness of this awareness is blunted by the perception that “we were all in the same boat.”

The narrative of “we are all the same” is distinguished by the variety of ways it is told. The narrators identify their similar values and similar choices as a reason the group has survived and thrived. However, I detected equally compelling stories of difference that parallel the “narratives of sameness” in the Club story. I argue that it is the addition of the “narratives of difference” and how those narratives are constructed, more so than the “narrative of sameness,” that are central to the establishment of trust, solidarity, and cohesiveness in the Club -- that are central to the Club as vehicle for personal integration.

While it is true that the “girls” share fundamentally similar social, cultural, and economic backgrounds, the contemporary women of the Club are *not* all the same. First and most obvious, they are not the same in their status as mothers and grandmothers. Patti is currently a widow and Dolores still waits for grandchildren. Joanne has never worked outside the home since she married. Donna and Patti have worked all their lives.

Anna and Carole provide in-the-home care for their grandchildren. Dolores, Donna, and Betty have worked outside the home in professional roles. The Club women have different levels of economic security ranging from comfortable middle-class retirement incomes to strained household budgets that do not allow for anything but the basics. Their physical health status differs. Their levels of marital satisfaction are not equal. For these and other reasons, the “girls” see and know *they are not the same*.

The narrators construct and maintain these parallel stories of sameness and difference through the use of a kind of moral language -- expressions that reflect their judgments of how life and relationships *should* be. Three themes emerge in this moral language: the theme of “cosmic fairness,” the theme of differences as essential, and the theme of similar “cores.” Moral language describes how the world “should be” and supports the narrators’ perception of sameness while accommodating their differences.

For example, cosmic fairness refers to the narrators’ belief that each Club member has something to celebrate and something to bear in her life, that each experiences the gifts that life brings, and that each knows the losses that life requires. While one person may have health problems, another has marital problems, and another has economic problems. While one person has economic security, another has spiritual security. The narratives exhibit the Club members’ shared perception that balance exists between the “good” and the “bad” in everyone’s life. It is not a matter of who has more of this or less of that. Instead, it is more a matter of *when* each person receives her share of happiness and *when* each person must face her share of loss. The narrators’ belief in the way things should

level out so that the “good and the bad” are equalized -- a kind of ultimate fairness, if you will -- helps them adjust to the real differences that do exist among them.

References to the positive and necessary contribution individual differences make to a group comprise the second type of moral expression. Dolores’ cake baking metaphor is the most direct and creative statement of this moral position. Dolores compares the Club members to ingredients in a cake and the Club to the cake itself. She emphasizes that you *need* all the different ingredients to make this cake what it is. When Dolores refers to herself as the flour and someone else as the eggs and someone else as the sugar, she is not politely talking about “valuing diversity.” She is saying that the cake is only possible because of the unique and “diverse” properties of each ingredient.

Expressions of core versus superficial characteristics comprise the third way the “girls” harmonize their differences. For them, core factors consist of traditional beliefs such as the centrality of the family, the importance of hard work, the significance of maintaining ethnic rituals, a respect for others, and a belief in God. These core factors unite them. The “girls” consider these values central to their identities. Superficial factors differentiate them, but do not divide them because they are not considered central to their identities. The factors that differentiate them -- differences in economic status, in who works outside the home, and in who has children and grandchildren -- are viewed as important but not essential to the kind of people they are.

The most difficult of these factors are the differences that exist in their economic circumstances. While most of their families transited the great upheaval in Pittsburgh’s economy from an industrial to a post-industrial base, some suffered more than others

from heavy industry's abandonment of western Pennsylvania. Anna, whose family perhaps felt the adverse economic impact more than others, describes how the group attempts to level economic differences by subordinating their importance:

There isn't anyone in the girls' Club that thinks they're superior to the rest of us. We're all on equal footing. Some may have a little more heartache than the other, but everybody gets their share sooner or later in life. We don't judge our status by material things. That doesn't even enter into it.

What is not said, but may be assumed from the comments of other narrators, is that the "girls" have learned to manage and filter information about their differences, especially the differences in their financial status that have the potential to hurt and divide. They seldom talk about money problems, considering them as private as marital sex.

These three moral expressions -- that life balances the good and the bad; that the "girls" really are the same in their core values; and that some differences, like the different ingredients in a cake, are necessary -- allow the women of the Club to maintain parallel narratives of "we are all the same" and "we are different." These narratives are particularly useful in flattening the impact of factors like financial status, parent and grandparent status, and work outside the home that have the potential to divide them.

By maintaining parallel narratives of sameness and difference, the Club provides a safe social arena in which the narrators experience a sense of personal integration. In spite of similar backgrounds, their lives are different. Their cohesiveness may have taken root in their similarities, but it survives because the Club women have devised strategies to integrate and accept their differences. The Girls' Club is perhaps a unique social location

that permits them to integrate *all* of their past and present identities; it is *both* a celebration of their common values and an integration of their differences.

The Club represents personal integration between the past and the present, between stable values and changing beliefs, between perceptions of sameness and knowledge of difference. These stories of integration provide one lens through which to view the positive leaning in the Club narratives. The narrators cannot imagine their lives without the Club because it helps them to know who they are. Club is a vital social support structure because it assists its members to make sense of change and integrate difference, rather than be divided by it.

Stories of Accommodation and Survival

A second lens through which to view the meaning of the narrators' uniform positive evaluation of Club membership is its survival value. The Club has provided a unique source of intimacy, affection, affiliation, and community as the women have responded to and managed personal, social, and economic constraints throughout their lives. Clearly, these women friends have been involved in the ups-and-downs of their personal lives, their marriages, and their families during a remarkable historical period of change -- a period in which the Pittsburgh area was undergoing enormous economic shifts and the social structure of the nation was changing. During these times of social and economic unraveling, the support, comfort, and counsel of Club friendships meant more to the narrators than any occasional idiosyncratic conflict that may have emerged.

In order to examine the Club's survival value to its members, especially during the social and economic changes for working-class families between the 1970s and the 1990s,

two concepts from the sociology of family and gender -- marriage work (Oliker, 1989, pp. 122-151) and kin work (diLeonardo, 1984, pp. 191-229) -- may be helpful. These conceptual frameworks are particularly useful because they address the supportive role that women's friendships can play in marital and family life.

Marriage work. With the exception of Patti, the Club women have been married over 40 years. Most of the Club women were married between the late 1950s and the early 1960s -- a period in which the middle-class cultural ideal of the companionate marriage began to flourish. Several authors have called attention to how this ideal marital relationship between men and women, where sharing roles, expressing feelings, enjoying social time together, and being mutual, never really became the norm for either middle-class or working-class couples -- as divorce rates show (Hochschild, 1989; Komarovsky, 1962; Rubin, 1994). The narratives suggest that it took the Club women a long time to gain the confidence to share confusions and frustrations about whether their marriages measured up to the companionate ideal or not. It was even harder for some of them to break the cultural taboos that militated against their speaking about the painful, sometimes humiliating, circumstances of their marriages. When they did begin to speak, they helped each other simply by listening. Sometimes however, they assisted each other more actively by engaging in marriage work.

Marriage work, according to Stacey Oliker (1989), refers to "reflection and action to achieve or sustain the stability of marriage or a sense of its adequacy" (p. 123). In accounts of marriage work among friends, Oliker found that friends often helped friends (a) to express negative emotions toward their husbands and (b) to evoke hopefulness for

responding to problems in their marriages. Oliker concluded that women friends help each other to deal with their feelings of rage, disappointment, or resentment within a context that both acknowledges the validity of the original feelings, yet manages their intensity so as to sustain their marriage commitment.

One of the remarkable ways the Girls' Club members engage in marriage work is through the use of humor and storytelling. Some scholars like Pat O'Connor (1992) identify marriage work in general and humor in particular as a "conservatizing force" in women's friendships -- a way to drain off resentment and promote marital stability while possibly contributing to the maintenance of unhappy or unequal relationships. But when the concept of "conservatizing" is applied to the Girls' Club, the narratives themselves call for a more complicated response. While it is true that the Club may be a conservatizing force in that it provides a release for negative emotions in a managed way that reduces threat to marriage, Club is not only a conservatizing force, and it is much more than that. To evaluate social support in the Club as primarily "conservatizing" is a failure to understand the limited choices the women had available, especially in the early days when they were young, newly married, and the mothers of small children. The Club women have adapted to difficult circumstances in their marriages with dignity, but they have rarely, if ever, collaborated as friends in angry resistance against their husbands' domineering, power plays, or lack of sensitivity. Complex structural and cultural factors explain why this is true.

The narratives contain clues that early in their marriages, some of the "girls" experienced domineering and loveless home situations with men who were unable to share

their feelings. But what would it have meant to any of the Club women to have renounced their commitments and to have left their marriages in these early years? It would have meant separation from a significant and defining part of their cultural and social identity in the Rox. It would have meant risking the imperilment of economic hardship, in that only a few of them had any specialized training that would enable them to earn a living. It would have meant the abandonment of life-long commitments that involved religious beliefs and cultural values about marriage. It would have meant taking responsibility for children as a single-parent -- a rare occurrence in the Rox during the times the "girls" were raising their families. In other words, interlocking structural and cultural factors explain how and why the women of the Club supported each other through "accommodative marriage work" (Oliker, 1989, pp. 122-151).

After having interviewed 21 married women, Oliker (1989) observed that "women reinforce each other's commitment because they are dependent upon marriage for survival and mobility" (p. 138). The working-class women friends that Oliker interviewed, like the women of the Club, for the most part, historically supported accommodative marriage work because most of them were young mothers of small children, most of them had little job training or experience, and most of them would suffer the censure of their families and communities if they left their marriages. For these women and the women in the Club, limited options existed for dealing with the difficult marital situations.

Therefore, marriage work that allows accommodation without renouncing either emotions or analysis of the situation, as the Club's razor-sharp humor can do, may challenge the "authoritative ideology of wifely deference" (Oliker, 1989, p. 132) *within*

the constraints of their communal commitments and financial dependence. While the marriage work among Club friends may have encouraged some members to stay in strained relationships, their accommodative interactions did considerably more than reconcile the Club women to unequal, emotionally unsatisfying, and identity-submerging marriages. The narratives show that the Club women were able to think out loud; to express anger and frustration; to reassess their dissatisfactions and satisfactions; to plan communication with their spouses and children; to effect changes in their own behavior, attitudes, and emotions; and to figure out how to change things in their families.

Marriage work supported the women's strategic accommodation to real power struggles in their marriages when leaving was not a choice due to economic constraints, cultural expectations of married women, and personal and religious beliefs. Adaptation rather than resistance to unequal gender and economic power may be judged as "conservatizing" and supportive of dominant social norms. However, taking class, culture, and gender relations into consideration leads me to see marriage work in the Club as a survival strategy based on the specific circumstances my narrators faced. Marriage work helped them to sustain themselves, their families, and their children.

Kin work. Kin work is the second concept that explains Club as an adaptive survival force. In Micaela diLeonardo's (1984) study of the variability of ethnic kinship patterns among Italian-Americans in California, she charted three kinds of labor among her women informants: work in the market (outside the home), work in the household, and the work of kinship. Kin work, according to diLeonardo (1984), "encompasses a variety of activities, including visits, letters, presents, cards, and telephone calls to kin; services,

commodities, and money exchanged among kin; and the organization of holiday gatherings” (p. 194). It comes as no surprise that diLeonardo found that among first- and second-generation immigrant families, the work of kinship is still largely women’s responsibility. She emphasized that the pattern of female dominance in kin work persists in even the granddaughters and great-granddaughters of immigrants, who are not exempted by their involvement in the work force as well as the home.

The Club women are primarily responsible for the work of kinship that knits their own households together with their married children’s households, their remaining parents, and other extended relatives. Kin work for the Club women includes gift purchasing and giving, birthday celebrations, baby-sitting, regular family gatherings for meals and socializing, and larger special holiday festivities. Depending on their health, their economic resources, and their desire to reproduce ethnic and family rituals, all the Club women do some level of kin work. Although the adult children of several members have begun to share tasks, the Club women still take major responsibility for kin work.

The narratives make clear that the Club women feel enormous benefit from close relationships with their children, grandchildren, and extended families. They enjoy having their children and their grandchildren close by and being connected to the everyday occurrences in their lives. Holidays provide a special arena to show their considerable skills to decorate, to organize large gatherings, and of course, to cook and to bake.

But the work of kinship for the Club women is not easy or unambiguous. For example, history, economics, and culture have combined forces to transmit to the Club women a legacy of constraining images of family, gender, and ethnicity. Male dominance,

women who are unremittingly nurturant to men and children, family “togetherness,” and happy holiday dinner tables brimming with traditional foods constitute some of the constraining images in the identities the “girls” inherited. As they have grown older, some of the “girls” have grown tired of the culturally and ethnically constructed images of who they are supposed to be. While they cling tenaciously to close relationships with their children and grandchildren, some are able to admit to themselves that they are weary of shouldering *all* the responsibility for preparing special foods, planning rituals, and carrying the weight of the family’s “ethnic” identity and emotional harmony. Some speak openly about being worn out with the responsibility of keeping everything and everybody together. Others describe family gatherings where they watched painful sibling dissension among their children; still others talked about parents who are more like children themselves, needing constant attention and care.

Kin work does not represent unadulterated warmth and closeness for the Club women. While presiding over family gatherings, orchestrating holiday rituals, and regularly attending to cards, presents, and celebration dinners are central to how the Club women think about themselves, some are ready to withdraw from this work. A few of the Club women have begun to negotiate sharing the load of family celebrations with their daughters and daughters-in-law. However, each time they talk about abandoning the smallest part of kinship work, they seem to feel conflicted.

One of the results of talking about both the joys and the burdens of kin work at Club is the production of shared knowledge about the responsibility each bears for keeping family and traditions alive. The “girls” well understand the complex ramifications

of reducing their kin work patterns -- both on the quality of family life and on their sense of pride in ethnic and family identity. The Club serves as a modulating force in managing their conflicted feelings about kin work. Club members encourage each other to moderate the amount of kin work they do to a level that is healthy and bearable. If someone expresses a desire to cut down on the number of Christmas presents or to bake fewer cookies, she has the group's support. If someone talks about her guilt over losing patience with an aging relative, she garners the group's sympathy and understanding.

The Club serves as an acceptable social space in which the women can talk freely about the mixed blessings of kin work. They support each other in renegotiating the meaning of the kin work in their lives. Club women help each other think through what parts of family and kin responsibilities they want and what parts can be modified or eliminated. They help each other normalize the anxiety, worry, and confusion they feel when they must make decisions about the care of aging relatives. While the women support each other's newly developing boundaries toward unwanted or overwhelming kin work demands, they also remind each other that kin work and family is at the center of their lives and their identities. Thus, the maturing friendships of the Club women assist in the negotiation of identities that allows each woman to adopt new health-enhancing practices while maintaining parts of the valued roles of the past.

Using the concepts of marriage work and kin work as analytic tools, I suggest that the Club has enormous meaning as a survival aid in the narrators' personal lives, marriages, and families. The Club plays a significant support role in assisting the narrators to find livable stances that accommodate both life-long family and marital

commitments and personal change, both traditional kin work and newly acquired patterns of self-care. Sharing the positive and negative side of kin work empowers the women to renegotiate long-standing gender and cultural prescriptions about the roles they have always believed they are supposed to fulfill in their families. Similarly, marriage work has survival value for many of the women of the Club. It allows them to denounce the burdensomeness of a situation without renouncing their commitments; it encourages them to defuse emotions that could be destructive to their marriages and their families.

These two functions -- marriage work and kin work -- are vital to the Club women whose commitment to marital stability and family closeness has been culturally ingrained and whose identities as wives, mothers, and daughters are central. These stories of accommodation and survival provide a second lens through which to view the meaning of the positive bias in the telling of the Club tale; they add to our understanding of how and why the Club is vital to the "girls" -- worth protecting against any petty problem.

Stories of Transformation

A third way to examine how Club functions to support the narrators' sense of wholeness is through stories of transformation. While the accommodation and survival stories show how Club helps its members to manage emotions so that traditional marital and family roles can be maintained, I now suggest that Club friendships also encourage a new stance that supports self-awareness, self-worth, and self-care. Club relationships have assisted the women to become more individual, independent, and autonomous *within* the joys and constraints of marital and family life -- not separate from it. The

“individualism” encouraged by the Club and adopted by its members in their maturing years does not submerge their family or collective values. It co-exists with them.

These stories show how the Club women, who are now 61, are in transit toward a kind of individualism that differs from what we typically think of as the “American individual.” It is a constrained individualism that is rooted in interdependence and family responsibility, yet allows new values of self-care and self-worth to take wing.

The “girls” are in the process of transforming and adapting a more individualistic view of themselves. Joanne becomes less tolerant of the burdens of kin work and struggles to break free of constraining ethnic gender roles; Betty and Anna seek a household balance between their own needs for privacy and the constant presence of retired spouses; Donna and Dolores focus on taking care of themselves and openly enjoying their achievements, recognizing that they have been the dominant force in their households throughout their marriages. Patti stands up to corporate abandonment and declares that she is important and that her life and pension matter. All of the “girls” express increasing awareness of their needs for assertive expression and independent authority; each becomes more willing to give voice to those needs. Yet the “girls” know that their self-identities and their commitments to family and marriage are intertwined.

While the historical legacies of ethnicity, gender, and class circumstances may have limited the scope of their individualism, the Club provides a safe place to construct a new form of individuality. What may at first appear to be a contradictory stance -- supporting needs for individuation and lifelong commitments to family and marriage -- in fact reveals a consistency with the Club women’s sense of self, identity, and wholeness.

On the one hand, they are beginning to espouse a more contemporary agenda of self-awareness and self-care. At the same time, however, they reinforce family and marriage relationships that represent the best chance for these women to maintain a sense of coherence with older, deep-rooted values -- and not inconsequentially, to keep the economic stability and social status they inherit as married and family women.

Given the women's traditional backgrounds and the deep submersion of their identities in family and kin relationships, the Club is a significant resource that gives them an acceptable -- and perhaps unique -- forum for exploring emerging needs for individuation. I suggest that the ideal of cohesiveness dominating the collective Club narrative is understandable in the light of the Club's function as an arena of personal transformation toward increased individuality while simultaneously maintaining traditional ideals. The uniform positive evaluation of Club represents the unparalleled function of the Club both to support individuated identity and to reinforce communal roles as wives, mothers, daughters, friends, and kin women. The Club provides a satisfactory way for women whose identities were forged in the crucible of ethnic and gender traditions to transform their lives, at least enough to feel satisfied, well, and whole.

Summary of the Positive "Bias" from Within the Narratives

The unblemished positive story of group cohesiveness in the Club "fits" the narrative truth of the women's experience. The Club serves first as a "home" where collective memories of the past and individual experiences in the present are integrated -- a place where similarities and differences co-exist. Second, the Club specializes in adaptive strategies that empower its members to manage impulses, emotions, and perceptions in

support of family and marital commitments. And third, Club provides an acceptable social arena in which to explore newly acknowledged desires to “put themselves first” within the contexts of marriage, family, and sometimes work. The Club represents a safe place for each woman to bring together a *traditional* and a *transformed* sense of her self among a group of peers who support both identities.

The dominant positive note in the telling of the Club tale has a meaning of its own within the narrative. It reflects the effectiveness of Club as a resource for personal integration, accommodation and survival, and transformation. To this point, I have sought to explain the meaning of the positive bent from within the narratives themselves. Now I turn briefly to two other explanations that arise outside the actual narratives.

Performance of Life Review as a Positive Experience

The first possible source of the positive tone may emanate from the performative aspects of the oral historical interviews. The narrators in this study -- just as others who participate in oral interviews -- derive a sense of pleasure in talking about themselves and the past, which translates into an overall positive tone in the narratives.

Oral historian Linda Shopes has suggested that the performative aspect of social interaction in interviews is a satisfying, almost euphoric, experience for both narrators and interviewers. Further, this performative aspect of speech may account for the positive, upbeat tone in this study as it does in other oral history projects (Shopes, 1994, p. 6). The process of talk about one’s past may be so existentially pleasing, if not therapeutic in its effect, that it creates an overall positive tone, apart from the content of the story.

Additionally, the story the “girls” tell may take on a positive tone because they are in at a stage of life where the act of making sense of past events is a common experience.

The performative and pleasurable aspects of reminiscing are not limited to the narrators; they are interactional. As narrators tend toward a positive bent in the stories they tell, interviewers may also override the presentation of more critical questions. The relational quality of the interview sets up a kind of “positive feedback loop,” in which narrators focus on upbeat interpretations of events while interviewers concurrently pull back from asking challenging questions. At this point, interviewers may engage in a kind of collusive relationship with narrators -- a relationship in which plunging into a more critical tone becomes difficult, if not impossible.

This collusive dynamic may have taken place in my interviews with the Club women. I have written previously about my hesitancy to ask questions that pushed my narrators into painful memories. But the issue of my collusion in the production of a positive stance in the narratives is more complex than merely not asking certain questions. It requires a deeper look.

Complicity in the Production of a Positive Stance and Its Possible Meanings

First, I approached this entire study with my own a priori research expectation, which may be viewed as positive. As a public health educator, I wanted to effect a positive change in the way health professionals view social support, health, and their complex interaction. Unabashedly, I hoped that the Club narratives -- both in their content and in my methodological approach -- would offer valuable information to those who want to understand how social support authentically operates in the contexts of

lives. Prior to starting the interviews, I assumed that the Club had been effective as a social support system throughout the narrators' lives. Although my findings have revealed a much more nuanced picture of how social support works in the Club than I had originally expected, to a great extent my assumptions about the efficacy of the Club's support role have been confirmed. Given my speculation that using the Club narratives would uncover a deeper, more complex understanding of how health and social support work than exists in biomedical and psychosocial studies, it is not surprising that the story I created with the "girls" ended up slanted toward the positive.

Second, as I am sure is obvious by now, I admire these women and I feel honored that they trustingly opened up their lives and homes and gave me their stories. But there is no reason they should have felt or done otherwise. After all, Joanne -- a Club member whom they know well and trust -- asked them to do this for me, and I was by no means a stranger to them. I was Joanne's little sister, a cousin, a friend, and maybe most persuasive, another Rox girl. They had every reason to believe that I would bring them into this research with the same respect, fullness of feelings, and positive expectations with which they took me into their lives and into the Club.

For example, during the course of the interviews and the lengthy conversations we had afterwards, my narrators occasionally told me things they assumed I would not use in the study. Sometimes they were explicit, asking me to turn off the tape recorder or not to repeat a confidence. Much more frequently, however, they would say something "forbidden" and then assume, based on concrete past social experiences in the Rox, where we both learned what you say publicly and what you keep to yourself, that I would

know not to write about it. In the light of our shared history and culture in the Rox, they expected that I would recognize certain topics as culturally tabooed material -- things that were not to be repeated in the wrong places, public places that would cause shame, embarrassment, or other repercussions. They were right; as another Rox "girl," I distinguished the forbidden topics when they came up and I knew that my dissertation would be the equivalent of a "wrong place" in which to make such material public. The "girls" said certain confidences in the interviews that I did not and would not write about because to do so might hurt one of the them, their families, or even the Club itself.

What the "girls" want, feel, think, and hope about the outcome of this project matters to me. Regardless of the number of times I have explained the research goals and objectives, I know that they see this enterprise as essentially a "history of the Girls' Club." That is what it has always been to them. Therefore, it is important to me that they recognize the Club and themselves in both the content and language of this study.

Although my perceptions as someone who left McKees Rocks over 30 years ago, and their perceptions as the people who stayed, are not and could not be the same, I feel responsible to render a picture of their lives and the Club that is congruent with the perceptions they themselves hold. Essentially, I want to portray them as closely as I can to how they see themselves. I feel a sense of loyalty to them -- a parallel process, if you will, with the loyalty they feel to each other. I have embraced their code of behavior: I do not want to betray or embarrass them. I want to treat them with the same respect and dignity they accord each other. Although the possibility always exists that I might

produce a story that the “girls” will not recognize as valid, I have worked hard throughout the project to minimize this possibility by checking my perceptions of them with them.

Further, I believe that who I am and where I am situated in this study -- a scholar who brings my working-class consciousness to bear on what I say and how I say it, writing about people who matter to me -- may act as a filter to guard against the potential of research that objectifies. I want to tell the Club women’s stories in the light of what I know about public health, but I do not want to “use” their stories in the sense that middle- and upper-middle class academic researchers have traditionally sought out the experiences and stories of working-class people for use in shaping theory about them (Kadi, 1996, pp. 39-57). I do not want to participate in the re-enactment of how mainstream research treats the experiences of women from working-class backgrounds and other marginalized groups -- that is, by ignoring them or reconstructing them to fit the dominant belief system of what they are “supposed” to be. Simply, I do not want to objectify them; the Club women are my “family.”

But at the same time, I feel equally responsible to understand and interpret their lives in light of what I know about how culture and history shape us and how we in return shape events. My life has been influenced by a more materialist than cultural feminism. I do not separate the struggle for gender equality from class or race. For me, there can be no social justice without economic equality. As a result, I bring to bear on this study the other part of who I am -- the Rox girl who left and returned with an explicit political vision of the structural conditions that lead to particular social behaviors, a vision that the “girls,” none of whom consider themselves feminists, may not recognize as valid.

In the tension that exists between how the “girls” and I may interpret these narratives, I hope this work may hold up a different mirror -- a mirror where the “girls” will see their stories against the backdrop of historical, social, cultural, and class circumstances in the Rox, a mirror that will reflect the substantial work of their lives, including the Club. I hope that what they see will reveal a different view of themselves -- a view that will resonate as “true” even when not familiar, a view that promotes a greater empathy for and pride in their considerable achievements. In those instances where our perceptions do not agree, I hope that they will see my interpretations as respectful and thoughtful reflections on their lives, with no intent to harm them.

As this discussion demonstrates, I have engaged in this work with high intentions to respect both my narrators’ and my own authority. I have agonized over the ethics of working with the “girls” and what it means to “share authority”⁸ for a very long time. And, I have suspected that my level of engagement with my narrators -- Rox girl to Rox girl -- is not conventional even for contemporary qualitative research, itself a marginalized methodology. The truth is that sometimes I have been embarrassed by the passionate and autobiographic quality of my relationship with the “girls.” The critic in my head says, “How could anyone this close to her ‘subjects’ produce a credible piece of scholarship?”

But in the course of thinking about the *meaning* of events rather than the events themselves, I have discovered not only the legitimacy of my (hyper)engaged position with my narrators, but also its potential contribution to this work, to the “girls,” and of course, to myself. I had an insight into this conundrum when I recalled a line in one of my favorite movies -- *Moonstruck* -- from a scene in which Olympia Dukakis is explaining

the simple ethics of mutual responsibility: “You don’t shit where you eat.” And I thought to myself, “I wonder how many good-intentioned researchers like myself have wittingly or unwittingly ‘shit’ in the very place where they have eaten, because some larger ‘purpose’ like tenure, a doctoral degree, another publication, or perhaps just pure academic arrogance or financial gain took precedence over commitments to the people whose lives they studied?”

I thought too of the hours I have spent as an editor dedicated to accurately presenting the Girls’ Club story, while simultaneously guarding against compromising vulnerable areas of my narrators’ lives -- things that may have made for interesting material but did not directly pertain to the Club story. I realize that I am guided here by more than the ethics of academic scholarship and that I am motivated by more than the promise of achievement. I am influenced by another ethical principle -- Anna’s principle that “If you’re going to do something that’s going to really hurt the people you love, it’s not right.” The Rox is a place where I still “eat.” By this I mean, I cherish the family and extended kin relationships I have there; I derive a sense of personal identity from the old neighborhoods; and I take pride in my working-class background, which I know is at the root of my own resiliency. I respect the place and the people from which I come.

I acknowledge that interpretive conflict may exist in what I produce -- that is, there may be places where the “girls” do not recognize themselves or do not agree with what I selected to write about from their narratives (Borland, 1991, pp. 63-75). But I believe that I have held to my resolve to be responsible to my narrators *and* to myself as best I could. I have cared about them and taken their expectations into account. I have

tried not to befoul the source of what has fed me, that is, their stories. At the same time, I have taken seriously my responsibility to reflect on and to interpret their lives, respecting the experiences that have brought me to where I stand.

So while I accept the interpretive tension that exists in all narrative studies, I believe that, for the most part, I have found a “loving way out” of the struggle. I account for my part in producing the positive stance in these narratives *not* by virtue of exaggerating what the Club women say, and certainly not by misrepresenting it, but rather by virtue of consciously engaging in “loving perception.” Loving perception, according to author Maria Lugones (1990), contrasts with the objectifying stance that results when the researcher acknowledges no connection to the person or the thing or the event being studied. Lugones identifies “arrogant perception” as the failure to see our connections to what we are studying, and as a result, we turn our “subjects” into “objects”; we use them; we fail to love them. For Lugones (1990), approaching research through loving perception opens up the possibility that we can travel inside the worlds we seek to understand and render them visible to others (pp. 390-402).

The word “love” jumps off the pages of the Lugones essay; it is not a word I am accustomed to seeing in academic writing about research. What does it mean to love these women in the context of a research study? Rather than being ashamed of my love for them, viewing it as a “limitation of the study,” or covering it up because it seems “unscholarly,” I believe that my respect and care for Anna, Betty, Carole, Donna, Dolores, Joanne, and Patti and my connection to them *is* the reason I can *see* them.⁹

My personal, cultural, and class relationships with my narrators, together with the distances I have traveled away from them, conjoin to allow me to recognize the knowledge they have about health and social support. Given only the academic lens of professional experiences, I would not have been able to recognize the Club women's knowledge. Books and research studies do not contain what I learned from the "girls" about the cultural, historical, and class influences on health. Conversely, I would not have been able to see their contribution to public health education without my educational and professional experiences. To do this work, I have needed all my identities.

By engaging with the Club women in this research, I believe that the "girls" and I have created a vivid example of the very point I have been trying to make: The narrative power of the "and," that is, the power of stories to make connections and to restore that which has been falsely divided. What made this study possible was the fact that I am from McKees Rocks *and* that I left; that the "girls" are my family *and* the subjects of this study; that stories *and* science are needed to understand health and social support. Perhaps more research needs a loving story that connects the researcher to the people, or even to the thing being studied. I wonder what more we could learn about health, social support, and for that matter, atoms, cells, agriculture, or the oceans if more researchers were connected explicitly to the subject of the research rather than dissociated from it? As I have throughout, I am not arguing against science, but rather for the addition of a social, historical, cultural, and class consciousness to the pursuit of knowledge, even in the sciences.

It is the addition of historical and class understandings that rejoins me to McKees Rocks and to a working-class consciousness that I did not know I had given up to leave and travel elsewhere. I left McKees Rocks because by the time I was old enough to have an “identity,” I also knew that I wanted something different from what I saw in the lives of the women all around me. I did not want to be a wife, a mother, a secretary, or a nurse, and as far as I could see, those were the options available. I used the only tools I had -- books -- to do the work of leaving what would become my destiny if I did not do something to change it. Perhaps I was more like my father than I ever dreamed -- a “different kind of immigrant,” someone who wanted more than what seemed possible.

I left the Rox believing that there was nothing there to feed me -- my leave-taking an implicit critique of life in the working-class town I had grown up in. Thirty years later, I returned for another look, and I found the reminders of why I had to leave: The working-class women in my family still seem to have far fewer choices than I have grown accustomed to. Overt racism and homophobia shock me, and I feel afraid that maybe even I am not immune from judgments and suspicions about being “not normal,” not being worthy of love. The television constantly drowns out the sounds of conversation and of my own thoughts, and I remember as a child myself fighting to hold on to the concentration needed to see things within the noise and activity of the family, feeling hopeless that I ever could.

But what I also find is a history of a working-class town and memories of a hard-working family that make me feel strong and whole and proud of where I come from. I am the daughter of a different immigrant, a man who was progressive and ambitious

among his peers. I grew up in a town where immigrants like my father joined unions and fought against factory owners for the good of their families and for the rights of other working families. I hear a history of resiliency in the stories that were shared with me about how working-class families, like those at the turn of the last century and those who are left in McKees Rocks today, still struggle against enormous economic odds and social pressures to lead decent lives, full lives, lives they can find meaning in and enjoy.

And I find a group of remarkable women who give me more hope about social commitment, community, and caring than I have had for a very long time. I have grown frustrated by the vague notions of the “commons” I find in some contemporary communitarian writing that seems oblivious to the obvious connections between the decline in civic participation and underlying economic forces. Authors like Robert Putnam (1995), for example, seem unaware that underneath the statistics on declining participation in civic and social organizations is the profit-driven dislocation of working-class neighborhoods and the harried, sped-up lives of the middle-class, who seem to have lost their connection to those poorer than themselves and who deny responsibility for them.¹⁰ Similarly, I have grown fearful of the right-leaning communitarians who use the call to civic responsibility to mask their radical endorsement of drastic reductions in the role of the national government to protect the welfare of all citizens.¹¹

What I find in the Girls’ Club is an unsentimentalized picture of the way the “commons” works in one actual social support system made up of women from the working-class. Of course, the “girls” are not without flaws, and their group is far from perfect. I acknowledge that their web of interconnectedness does not stretch to women of

different ethnicities or sexual orientations, as the ideal of social commitment would promise. But I agree with journalist Lise Funderburg (1998) who recently observed that, in the search for actual social experiments in “community” that work, attempts that fall short of the mark of ideal pluralism are often dismissed for the ways in which they fail.

I suggest that what the “girls” have achieved should not be dismissed. They have moved beyond the dominant cultural ethos of individualism and selfishness that characterizes our competitive and capital-driven consumer economy. They have not lost their understanding that the collective well-being of the group -- be it their families or their Club -- and their individual well-being are inextricably linked. They know that it is neither healthy nor sustainable to always go it alone or to think that you should. They teach us that it sometimes takes the subordination of individual will and even personal feelings -- two sacrosanct symbols of our highly individualistic and psychologically serviced society -- in order to gain and to preserve a greater and common good.

5.7 Summary and Conclusions

These five essays constitute the results of my narrative research with the Girls' Club. I have made no effort to standardize or "scientize" the essays; rather I used them to tell the story of the Club from five different points of view. With these five overlapping essays, my goal was to formulate a "thick" and authentic description (Geertz, 1973, pp. 9-10) of the lived experience of health and social support in the Girls' Club. In the first four essays, I focused on the narratives themselves and the devices the "girls" used to make meaning in their stories. In the fifth and final essay, I relied on a more implicitly derived "meta-interpretation" of all the narratives.

What knowledge then has emerged in this analysis? What patterns of ideas do the narratives suggest, and what does this knowledge add to our understanding of health and social support? The clearest conclusions that are strongly supported by the narrative data include:

1. First and foremost, context matters in this study of health and social support.
2. History, culture, class, and regional conditions shape the narrators' lived experience of health and social support. Conversely, the narrators' strategies for staying whole and well reflect the collective culturally specific strategies they learned as working-class Rox girls.
3. History, culture, class, and regional conditions also influence the help-seeking behavior of the narrators. They show a clear preference for informal family or friend help-providers over professional providers of psychological services, which they reserve for dire situations.

4. Narrative research uncovers presumably culture-free, but actually mainstream-oriented, Western meanings for concepts like health, therapy, and support. The narrators use these concepts in ways that significantly vary from the premises of universality encapsulated in the Western worldview.
5. Narrative research explains “cause” between health and social support using the criteria of storied coherence rather than empirical validity. The narrative expression of causality takes the form of storytelling, that is, one event happens because of another (Polkinghorne, 1988, p. 172).
6. Narrative form as well as narrative content conveys meaning about the narrators’ understanding of their world, including their view of health and social support. The uniformity of the positive, progressive narrative suggests the vitality and efficacy the Club has in the narrators’ lives.

These conclusions depart from the typical findings of research in the health sciences. Despite the enormous influence of poststructuralist thought on the humanities and social sciences over the last 15 to 20 years, most scholars in the field of public health education treat the health sciences and health education as though they were built completely on objective knowledge unsullied by questions of power (Petersen & Lupton, 1996, pp. ix-xvi). Little attention has been given to exploring the meaning of health in its sociocultural, political, economic, and historical contexts. Similarly, students of public health education have traditionally been trained in the quantifiable techniques of epidemiology, biostatistics, health promotion, health economics, and demography. They are given little time to explore the cultural, economic, or social determinants of health.

This narrative study provides solutions for the analytic problems that typically plague the health and social sciences. First, the narrative approach captures the way health and social support systems actually operate in a particular real-life class, social, and cultural context. Narratives capture the ways people make sense of their own experiences, and therefore, they remove the artifice that both dominates the positivist research process and obscures the contextual links between health and social support.

Second, this research situates the study of health and social support within the larger frame of a unique regional culture and a particular political economy. Far from dismissing these cultural and economic conditions as mere variables to be controlled in a research design and statistical analysis, they are examined as constituents of the narrators' lived experience of health and social support. What surfaces at the intersection of my narrators' personal biographies and the social and economic history of the Rox is a different cultural perspective, a cross-cultural view of health and social support from a particular group of working-class women.

5.8 Chapter 5 End Notes

¹ An excellent explanation of various assessment strategies appropriate for narrative research, as well as specific bibliographic references, are available in Chapter 8 of *Narrative research: Reading, analysis, and interpretation*. See Lieblich, A., Tuval-Mashiach, R., & Zilber, T. (1998). *Narrative research: Reading, analysis, and interpretation*. Thousand Oaks, CA: Sage Publications, pp. 165-174.

² In interviews I conducted with Father Regis Ryan and Sister Ruth Bearer, administrators of the McKees Rocks Focus on Renewal program in June 1996, I learned that new Asian and Hispanic immigrants in McKees Rocks experience discrimination in housing and jobs today similar to the experiences of European immigrants in the Rox between 1900 and 1920.

³ These are all pseudonyms as none of these women were interviewed for this project.

⁴ I refer here to the quotation from which Paula Giddings takes the title of her book, *When and Where I Enter*: "Only the BLACK WOMAN can say 'when and where I enter, in the quiet undisputed dignity of my womanhood, without violence and without suing or special patronage, then and there the whole . . . race enters with me.'" (Ann Julia Cooper, 1892). See Giddings, P. (1984). *When and where I enter: The impact of black women on race and sex in America*. New York: William Morrow.

⁵ This is a pseudonym because this Club member was not interviewed for the project.

⁶ Research on the health effects of humor have shown that there is a relationship between immune response and scores on humor scales. Studies are reported in which subjects who rate high on the humor scale show very little change in immune function when subjected to stressors compared to those who rate low on the same scales. Similarly, there are psychological benefits of humor. Researchers have found that a humorous outlook on life can have far-reaching benefits including enhancing self-esteem, promoting creativity, improving negotiating and decision-making skills, maintaining a sense of balance, improving performance, bestowing a sense of power, relieving stress, and improving coping abilities. See Hafen, B., Karren, K., Frandsen, K. Smith, N. (1996). *Mind/body health: The effects of attitudes, emotions, and relationships*. Boston, MA: Allyn and Bacon, pp. 544-550.

⁷ Dana Jack talked about "harkening" at a meeting of the CAW (Crones at Work) narrative study group that we belonged to at Western Washington University between 1995 and 1997. This on-going conversation sparked some of my earliest interest in bringing social and historical contexts to bear on the personal stories of narrators. A discussion of "harkening" will appear in Dr. Jack's forthcoming book *Behind the Mask: Destruction and Creativity in Women's Aggression*, which is scheduled to be published by Harvard University Press in the Fall, 1999.

⁸ I have been influenced by Michael Frisch's work on sharing authority with the subjects of oral history, especially people from the working-classes. I understand sharing authority as a much more complex task than merely rendering a true account of interviews or giving narrators opportunities to read and comment on transcripts. I see the process of sharing authority as neither automatically privileging the narrators' first person account of events, nor of privileging the researcher's perspective informed by history, but rather telling the story as a dialectic so as (a) to reveal the considerable analytic and synthetic skills narrators have, (b) to show the dignity and strength of those voices in context, and (c) to explain adequately the large structural forces that shape those voices. I have learned from Frisch that we, as interviewers and editors, reveal our own class consciousness in how we ask questions, how we listen, how we edit, and how we report what our narrators said. I recommend: Frisch, M (1990). *A shared authority: Essays on the craft and meaning of oral and public history*. Albany, NY: State University of New York Press.

⁹ I believe Marilyn Frye's now dated essay on how the arrogance of the male gaze erases women's reality still does an excellent job at making the connection between where one stands in a hierarchy of power and what one is able to "see" and acknowledge as real. See Frye, M. (1983). To be and be seen: The politics of reality. In M. Frye, *The politics of reality: Essays in feminist theory*. Trumansburg, NY: The Crossing Press, pp. 152-174.

¹⁰ Although Robert Putnam's comments on the dynamics of civic disengagement have been widely acclaimed, I find his perspective in articles like "Bowling Alone" to lack an analysis of the relationship between the direction of economic life and the decline of community. See Putnam, R. (1995, January). *Bowling alone: America's declining social capital. Journal of Democracy*, 6(1), 65-78.

¹¹ I found Francis Fukuyama's argument particularly disturbing. He seems to blame poor economic performance on working-class mistrust of the market economy. He also accuses government "welfare" of destroying the American philanthropic spirit. See Fukuyama, F. (1995). *Trust: The social virtues and the creation of prosperity*. New York: The Free Press.

CHAPTER 6: IMPLICATIONS OF THE NARRATIVE STUDY OF
HEALTH AND SOCIAL SUPPORT

6.1 Introduction

This narrative study of health and social support in the First Thursday Girls' Club takes its place among a diverse group of intellectual voices from within the ranks of the health professions who are challenging the common belief that the approach of the physical sciences is the only way to know and solve problems of human health. Medical sociologists, medical humanists, mind-body specialists, health psychologists, public health activists, and the growing ranks of "socially responsible" health-care professionals are calling for innovative research and applied practices that acknowledge people's (a) material status and means, (b) social roles and connections, (c) comparative position in the dominant hierarchy and consequent inequalities, and (d) culturally based meaning-making systems. Recognition grows that the pathways to healthy function are not exclusively or even mainly through the health-care provider, but more and more through society and the economy. With this study, I join these voices calling for the addition of new ways to think about health and illness in society that challenge the reigning biomedical-technological model of disease.

Knowledge gained from analyzing the Club women's narratives informs the implications I draw and the recommendations I make in this chapter. Much of my thinking emerges from the Girls' Club narratives, where I gleaned insights about (a) the health-supportive capacities of "indigenous" community groups, and (b) the historical, cultural, and economic determinants of health.

However, implications arise from this study that are *not* overtly in the Girls' Club narratives. It is true that these narratives illustrate how one particular group of women from working-class backgrounds uses specific strategies to confront social and economic inequalities. But they do not instruct us on how to dismantle the economic inequalities, political barriers, and social injustices that underlie huge health differentials based on economic and social class.

While the narratives show the ways in which the "girls" have forged positive lives and a sense of coherence in the face of hardship, these women have lived in a world that is neither economically nor socially just. Therefore, in this chapter, I turn to address the larger social, political, and economic implications of their story, and I make recommendations for the addition of a analytic framework for understanding health that takes into account economic justice and social equality. Thus, while I base these recommendations on what I have learned from the Girls' Club, I also step away from the narratives to state in my own voice the larger implications of this narrative research on health and social support. I ask these questions: What is the relationship between social and economic structures and people's health? What changes are needed in these structures to create healthful conditions for more and more people? What responsibility and role do health professionals, and specifically health educators, have in these changes?

My goal is to contribute to the interdisciplinary dialogue among health professionals who are calling for a broader and deeper understanding of health in the context of society. I believe the findings from this project have both substantive and methodological implications for (a) the way health professionals think about health-in-

society, (b) the way we train health professionals, and (c) the way we educate the public about the care of health.

6.2 Implications for the Way We Think About Health-in-Society

It is shocking that we know so little about health, considering the vast number of state, federal, and worldwide agencies devoted to its analysis and pursuit. Despite all the budgets, mission statements, and bureaucratic good works, we are still far better at opposing illness than at understanding health. Definitions of health usually center either on biomedical status or on physical, emotional, and psychological fulfillment attained through programs of exercise, nutrition, stress management, and lifestyle engineering, all associated with the philosophy of wellness. Wellness is not just aimed at preventing illness but at maintaining the very best possible health status. Agreeing with author David Morris, I find the assumption of complete health promised by the idea of wellness hard to criticize, “except for its reinforcement of almost irresistible tendencies toward bourgeois self-absorption” (Morris, 1998, p. 248).

I believe this study shows that context matters in the way people experience their lives, including their health and their supports for health. The Girls’ Club health narratives, based in their cultural, economic, and regional life experiences, vary from the biomedical and wellness definitions of health and well-being. History, class, and social relations shaped the narrators’ specific experiences of physical and mental health.

Qualitative research such as this can demonstrate to the field of public health the value of giving credence to the role of context in shaping peoples’ experiences of health. Adopting a view of health like the one embodied in these narratives would represent a

shift in perspective for health educators from both the narrow biomedical notion of illness and from the individualism of the wellness movement, with its exaggerated emphasis on personal responsibility, to a more socially, culturally, and economically complicated perspective on health-in-society. Moreover, such a shift would have far-reaching implications for the way we in the United States address our ongoing health-care “crisis” and for the way we serve the health needs of our most recently arrived immigrants.

The Health-Care “Crisis”

One reason we have made little progress in solving our chronic health-care crisis is that the “crisis” is not about health at all. The crisis is mainly about the current economic system that manages health services and somewhat less about the organization of health services, but it is not about broad prevention and care measures that reduce illness and improve health. I am not suggesting that we lessen our efforts to reform medical insurance, medical technology, and the cost of access to care, for assuredly all of these factors need drastic revision.

Rather, I am arguing for a better understanding of health as the convergence of physical status with meaning -- meaning derived from one’s social, economic, cultural circumstances. Once we liberate health from its identity with medical care, we may begin to view health from a society-and-health perspective from which we measure our health in our capacity (a) to reasonably meet daily challenges in a fast-paced, market-driven, mobile society through fair access to social and economic resources; (b) to make sense out of our daily experiences; (c) to contribute care to and receive care from sustainable social relationships; (d) to have work or to fulfill some role that is meaningful and pays or

provides a living wage; (e) to feel hope in the future through collective political action; and (f) to live with reasonable expectations for safety, respect, and dignity. While there will always be a need for the valuable craft of scientific medicine, these criteria for a new definition of health will shift our focus from the illusory perfectibility of our biopsychological status toward a social idea akin to well-being, growth, security, and respect.

If we continue to try to solve the health-care crisis by focusing on medical care and the false belief that more scientific medicine is going to make us feel better, we are destined to have a “crisis” that will remain “chronic.” A radical redefinition of health, in which social and economic reform take precedence over medical care reform, is needed. Reshaping health care without rethinking the meaning of health itself and its social and economic determinants is a mistake. This study suggests a rebalancing of perspectives. A contextual view of health-in-society does not reject the advantages of modern technological medicine; it rather includes the meaning people make of their lives when they are able to live with social equality and economic justice, and to die with dignity.

The adoption of this health-in-society definition would shift the center of gravity in the health-care crisis from its inward fixation on the health-care industry outward to the sociopolitical and economic conditions of the nation, such as poverty, homelessness, wage disparities, racism, inadequate housing, and violence, that damage people’s health. I further speculate that the reformists’ preoccupations with the mechanisms of health care serve to distract the public from addressing the larger issues underlying the crisis.

The Health of Our Newest Immigrants

From this consideration of the effect of a non-medicalized view of health on health-care reform, I turn now to a more specific application of a revised definition of health. I have previously discussed how the worldview of my narrators' first- and second-generation immigrant parents and grandparents may have influenced their view of health. Now I return to a focus on immigrants. The adoption of a contextual view of health-in-society would assist the health-care profession deal with the full impact of serving immigrants who have arrived in the United States since the 1980s, the second largest wave of immigration since the mid-1920s (Daniels, 1990, p. 388).

Through my narrators' life histories, I saw immigration not as an event but as a process that evolved through succeeding generations. For example, the Club women often connect the influence of their immigrant parents and working-class life in the Rox to their positive view of family life and to their expectations of solidarity and reciprocity among friends. While the Club women appear thoroughly modern and have achieved a middle-class standard of living, to assume that they see their health in the same way as other white middle-class women who do not have similar immigrant or working-class backgrounds would be an error. The immigrant and working-class backgrounds of the "girls" echo through the narratives as still-living, still-adapting "systems of thought" (LeGoff, 1974/1987).

Following from this recognition, health professionals who work with contemporary immigrant people may be well advised to start with the understanding that

not all cultures define or experience health in the same way, jettisoning any ahistoric view of scientific medicine. Culturally relevant interventions begin with understanding what health means to the people we are working with -- a simple but often neglected step in the work of health-care professionals. It is true that many health-care providers receive some kind of cultural diversity training that focuses on different belief systems about disease etiology, the role of the family in health care, the role of religious beliefs, and expectations for treatment (Spector, 1991, pp. 47-70). This knowledge is valuable, but an even deeper understanding of the problems surrounding the delivery of adequate health services to immigrants may reside in recognizing what health means to the immigrant and how their expectations of "healthy function" may be shaped by their complex encounter with United States culture and capitalism.

Second, health-care providers and health educators should not assume that second- and third-generation immigrants have shed their culturally conditioned views of the world, including their views of health. As the Club women's narratives demonstrate, culturally different views of health and support have longevity. Immigrant adaptation to this country is a long-lasting process that should not be presumed to be "over" when health-care professionals work with either the children or the grandchildren of immigrants.

In the next sections, I discuss the impact of the health-in-society viewpoint on the training of health professionals, especially those who work with immigrants and other marginalized groups. Further, the addition to this training of what medical ethicist Kathryn Montgomery Hunter calls a "narrative self-consciousness" (Hunter, 1991, p.

172) suggests culturally specific ways to implement narrative projects with persons from different cultures so that their stories may become part of their “health history.”

6.3 Implications for the Way We Train Health Professionals

Modern health professionals, including both care-givers and educators, are trained to locate and solve problems. What I am about to say is not an argument for less well-trained or less skilled health-care professionals, but rather a recommendation from within our own profession that we wake up to the fact that the training we receive may reproduce the system many of us criticize. Reductionistic, problem-focused, ahistorical training that focuses on diagnosis of dysfunction produces health-care professionals who see disease and risk factors rather than people with specific histories, coping with particular material and cultural conditions.

I emphasize that I am talking about not only medical education, but also the educational experiences of diverse health-related professionals including clinically-oriented social workers, psychologists, and public health educators. For example, in my work with university students, an overwhelming number of whom are “majoring in psychology,” I am continually struck by my students’ inability to discuss “mental health.” Eager and involved in their studies, they are able to describe in detail a variety of individual and group psychopathologies, but they easily admit that they have not had a course on “mental health.” And they are completely nonplused by questions that challenge them to analyze the “function” that rapid increases in certain diagnoses like attention deficit disorder, depression, and eating disorders may play in society. The implication that psychological diagnoses may be shaped or constructed by culture

perplexes them. They and a broad spectrum of health-care professionals are trained to see health problems exclusively as experiences which occur *inside people* rather than as interactive experiences between people and specific cultural or material conditions.

It is true that when a person is facing life-threatening illness or severe physical or emotional trauma, successful therapy and recovery often depend upon scientific reduction of what has gone wrong and the full power of biological, psychological, neurological, and immunological medicine to make it right. However, what I have learned from my study of social support and health in the Girls' Club, where function and capacity prominently figure into the narrators' stories, prompts me to ask this question: Has the internal problem-centered focus in the training of health professionals led to corresponding decreases in demand for expensive health services because of increases in the experience of health? The answer is, of course, yes, to some degree. There is no question that millions of people have gained both relief from pain and also improvement of function from therapeutic drugs, surgery, medical management, and medical services. These cures and ameliorations represent much of what we buy with our medical budget, and we cannot underestimate the restorative effect of various medical interventions on afflicted persons. Without the relief that medical care and technology provide to the ill and injured, we would have what one group of public health epidemiologists has called a "national disaster" (Bunker, Frazier, & Mosteller, 1995, p. 305-341).

But as the United States approaches expending nearly a quarter of its gross national product on health care by the year 2000 (McKnight, 1995, p. 57), I question whether this extraordinary care to the ill and injured reflects a corresponding improvement

in the public health of the nation -- the population as a whole. I believe not. Americans do not seem to translate their exceptional medical care into feelings of health or well-being. In nationwide polls, Americans say they are less satisfied with their health and their physical condition than they were at a time when a whole range of human miseries and misfortunes, including everything from poor school performance to unwanted physical characteristics such as baldness, infertility, and even the process of growing old itself, were considered outside the doctor's jurisdiction (Barsky, 1988, p. 19). In fact, biological, demographic, and medical research of the last decade has shown that medical achievements alone contribute in an insignificant way to the medically defined level of health in a population (Illich, 1996, p. 24). For example, there have been advances in the earlier detection and diagnosis of breast cancer tumors (Early Breast Cancer Trialists' Collaborative Group, 1992, pp. 71-85), but there has been no corresponding decrease in overall mortality from breast cancer. Put differently, the medical screening and diagnostic technology has been a great success, but women are still dying. More important, the number of women who get breast cancer is increasing -- a fact that biomedical science pays little or no attention to (Steingraber, 1991, pp. 91-102).

Additionally, while this disease-focused system has produced improvements in life expectancy in the United States and other industrialized countries, persistent, even widening, socioeconomic inequalities in life expectancy and health status exist among different groups within this country and others (Marmot, Bobak, & Davey Smith, 1995, p. 172). Gender, ethnic, and regional variations in mortality persist. For example, despite striking gains in life expectancy at birth over the course of this century for both Blacks

and whites (in 1900 life expectancy at birth was 47.3 years for the entire population and 33 years for Blacks), the gap between Blacks and whites persists, and the gap between Black men and white men has recently been widening. In 1988, life expectancy at birth for white males was 72.3 years, compared to 64.9 years for Black males. For white women, life expectancy is 78.9 years, compared to 73.4 for their Black counterparts (King & Williams, 1995, pp. 93-130).

My work with the Girls' Club points out to me the dangerous and anti-health emphasis that characterizes the way I and other health professionals have been trained to ignore the very health outcomes we seek. In my interviews with the members of the Girls' Club, I learned that conversations about troubles were always peppered with stories of personal triumphs and daily survival. I heard that life's satisfaction was measured not so much in the absence of travail but in meeting it with dignity and courage. I saw how people with chronic illnesses or persistent worries wrenched physical and emotional normality from their daily routine. Because I was interested in my narrators' perceptions of health and social support, I often asked direct questions about their health or lack of it, but the Club women answered not by talking about health status per se, but by telling me about their families, their holidays, their vacations, and their daily lives in McKees Rocks. I learned that my narrators were much more interested in telling stories about the way they *lived* rather than in reporting how they dealt with health or illness.

By focusing upon malady, disease, and risk, and by doing so in isolation from the conditions of people's lives, we literally erase the raw material of health -- their strengths and capacity to make meaning and wrest purpose from everyday experiences of living,

even negative experiences. What does our profession know about the origin of health as a larger, more pervasive sense of well-being beyond the physical? Are we training health professionals who are capable of addressing the question that medical sociologist Aaron Antonovsky asked nearly two decades ago, “Why are people located toward the positive end of the health ease/dis-ease continuum, or why do they move toward this end?” (Antonovsky, 1987, p. xii). I believe our ability to answer Antonovsky’s question, that is, to understand the origin of health, depends on learning to see people within the contexts of their lives and listening to their histories and their stories.

While the entire history and philosophy of training health-care professionals is beyond the scope of these observations, my work with the Girls’ Club has implications for remedying the lack of narrative understanding and the individualized problem-centered focus characterizing that training. I suggest four strategies that might balance the training of health-care professionals, which is currently weighted toward an individual disease perspective, with a more integrated, systems-oriented health-in-society perspective. While not significant enough to be called a trend, there are other recommendations emerging from within the medical system, for a broader education of health professionals relevant to a changing world, and my four suggestions may be placed among them. For example, a 1994 joint report from the Pew Health Professions Commission and the Fetzer Institute called for the education of health professionals (a) who can develop and maintain compassionate relationships with those who consult with them, and (b) who can see those who are ill as whole persons, “not just a set of symptoms, but individuals within a

context” -- people with families, cultures, and communities that play a role in their health and health care (McLeod, 1999, p. 39).

Teach A Capacity-Centered Model of Human Beings and Social Systems

The women of the Club showed me a living example of people who have health and other problems, but do not consider themselves “problems.” For the most part, they have been reluctant and infrequent users of professional mental health services, choosing instead to see “Club as therapy.” They support each other’s capacities and emphasize past resiliency; they do not diagnose or focus on deficiency. The “girls” insist on informality and eschew any notion of managing their interactions -- even on occasions like planning their high-school reunion. They are skeptical of experts and those who judge; they doubt that anyone can really know the entire circumstances of another’s life enough to risk giving advice. Their gatherings are essentially social and marked by storytelling, ritual, celebration, or lamentation. They care about each other. At their foundation, they are a social and historical community, and they are not unique.

Since I started my research with the Girls’ Club, each time I tell someone about them, I am met with an exuberant story of another club -- another group of women in another place who care about each other, see each other at regular intervals, and enjoy the benefits of close community. People tell me about their aunts, their mothers, grandmothers, girlfriends, and sisters who belong to groups like the Club; they send me newspaper clippings from all over the country, featuring human interest stories on yet another version of the Girls’ Club. I am convinced of the existence of many informal, local, culturally-specific, community-based groups like the Girls’ Club. They belong to

the sociological category of friendship, less institutionalized and less studied than more structured categories of social relations like marriage, family, and kinship. Groups like these make an important difference in the lives of their members, but they are given little recognition as indigenous systems that support people's health. As one result, these groups remain unrecognized by the health-care profession as allies in supporting people's search and struggle for health and wholeness.

I am not suggesting that groups like the Girls' Club necessarily *need* anything to continue to do their friendship work in a more structured fashion. In fact, the idea of "commodifying" them by funding, writing policy and mission statements, and devising protocols for their activities would be anathema. However, because of the lack of focus on a "systems perspective" in the training of many health professionals, we are unable to recognize the existence and supportive health function of naturally occurring, physically proximate, indigenous groups in people's lives. In these groups, stories and friendships, obligations and wisdom, and healthful ways of helping each other are part of everyday life and common knowledge. When problems occur in an individual's life, these groups knit their friends back into the fabric of community with amazing deftness. Perhaps instead of asking how we can provide more individualized professional services, we need to ask ourselves how we as health professionals can (a) discover the natural systems that join people to their communities and (b) support health policies and public policies that ensure that people have the economic and geographic stability needed to integrate into these systems to establish longer term social relations, "community" if you will.

I believe this shift toward a “societal systems” perspective on health might turn the gaze of health professionals from the individual determinants of illness to the social, cultural, and economic determinants of health status. An analysis such as this would require the addition of political education on the intersection of health policies, political policies, and economic policies. However, the first steps toward a health-in-society perspective need not be overwhelming for our profession. Perhaps it would be enough merely to teach health professionals that not everyone needs a professional service, or more specifically a health service, to cure every ill in their lives.

In his critique of the “careless society,” author John McKnight accuses the health-care system of assaulting healthy, informal groups like the Club, not explicitly as in causing their demise, but rather implicitly by valorizing professional services as the *only* way to meet the demands of modern life. He suggests that the health professions reproduce themselves in a profit-driven, service-oriented culture by promulgating the following insidious and health-compromising messages on the public through the media and the health insurance industry:

1. You are deficient and we, the professionals, are the solution to your problem. You are not the answer. Your peers are not the answer. The political, social, and economic environment is not the answer.
2. You are the problem, and we, the professionals, know what problem you have.

3. You have a collection of problems and you cannot understand them or the solution. Only we, the professionals, can decide whether the solution has dealt with your problem (McKnight, 1995, pp. 37-52).

In other words, the health professions accomplish the individualization and commodification of everyday human problems by replacing “stories with studies, friends with professionals, obligations with fees, and wisdom with technology and expertise” (McKnight, 1995, p. 68).

I was trained in this very system. Its central flaw is the nearly exclusive emphasis on the ahistoric individualization of risk and disease. I learned that problems of physical and emotional health originate *in* the person and I found my professional purpose in gaining the academic expertise I needed to help individuals “take responsibility for their problems.” To an extent, I value this training and support the efforts that we undertake one-by-one to keep ourselves and our families healthy.

But my experience with the Girls’ Club was a revelation that allowed me to see the contextual determinants of health-in-society. I was privileged to see the power of a naturally occurring peer group who, for the most part, unconsciously used their shared historical and cultural knowledge to help each other achieve and maintain wholeness and health. By attending to the stories and the strategies of a naturally occurring group, I came to appreciate a non-professionalized, non-individualized definition of need and a communal, peer-based support system that focuses on what works, what gives life, and what enhances healthy functioning. With the stories of the “girls” in mind, I turn to my second recommendation for training health professionals.

Teach the Narrative Nature of Health and Health Care

While the field of medical humanities has recently registered some interest in conceptualizing the patient as a storyteller and the doctor as a listener,¹ it would be safe to say that narrative or meaning-making is not considered the primary focus of the clinical enterprise in mainstream medicine. Neither are public health educators trained to ask people to specify what they mean when they tell us they desire to decrease a health risk or to increase a health-enhancing behavior.

The stories people tell about their lives, health, or illness are as vital to the “health history” as are records of immunizations and hospitalizations. In his book about his experience of testicular cancer, sociologist Arthur Frank (1991) observed that the skeleton outline of his life that the physician obtained in his “social history” showed how the health profession simultaneously invoked and ignored his story. What bothered Frank was not the brevity of the social history, but the illusion that some kind of knowledge had been gained. While he gave the information as a part of his story, it was recorded as a categorical variable, not much different than his blood pressure (Frank, 1991).

My experience with the Girls’ Club instructed me that to ignore their life stories and to focus only on their health or illnesses was to look at them as a half-empty glass of water. During the interviews, I saw that I was predisposed to seek out their needs and deficiencies; I was interested in how the Girls’ Club had helped them to cope and meet those needs. However, the very nature of my narrative methodology, in which I determined to gather a whole life review rather than elicit answers to a diagnostic questionnaire, forced me to shift my perception to the half-full glass.

Their stories first directed me to the ways they functioned, to their strengths, to their capacities. Second, by listening to their needs in the contexts of their social, cultural, and economic circumstances, I was less prone to individualize their stories and more apt to “historicize” them. I began to see specifics such as marrying early, not going to college, subordinating assertion for collective harmony, using humor to express pain, as not simply “individual choices,” but also as the impact of culture, class, and history on them.

Listening to people’s stories with special attention to how they have coped is a way to promote health. Attention to life stories is not a sentimental call to “soft” methods; it is rather a strategy for excavating capacity and strength, which often lie buried in the non-problematic parts of people’s lives. These buried tales of capacity are like abandoned story lines of hope and health in the dominant individualizing narrative of both “having problems” and “being a problem” (White & Epston, 1990, pp. 1-37). They are therefore a powerful and unused resource in the search for health and wholeness.²

Recognition of people’s stories as a way to help them construct a sense of coherence about health or illness could be even more important in this era of failed health-care reform. As more people become under-insured and uninsured in our down-sizing, mobile, urban society, where binding communal ties are at best memories, health-care professionals need knowledge about people’s lives in order to be health allies. Health professionals who know how to acknowledge the conditions in which illness and pain take place -- especially the pain that medicine, psychotherapy, and health education cannot touch -- may be better equipped to help those who consult with us.

We live in an era when even people who have health insurance change “preferred providers” as often as they change jobs. The family physician who knew the patient’s story from womb to tomb is a rarity if not a relic. The role of the story as a context for physical and psychological symptoms grows in importance as the patient-provider encounter is likely to be that of strangers, or as medical ethicist Kathryn Montgomery Hunter (1991) has commented, “The medicine of neighbors that once augmented the physician’s knowledge in a small or stable community now must be the object of special, reconstructive attention” (p. 172) -- what I would call narrative. Learning to listen with “special, reconstructive attention” to the stories of those we serve could be a small, inexpensive, low-technology but highly effective therapeutic tool for health professionals.

Perhaps these two recommendations for training -- the addition of narrative understanding and the focus on capacity of individuals and their natural associations in societal systems -- may seem far-fetched, even “primitive,” to those who understand the complexities of training public health and health-care professionals in an era of increasingly sophisticated technology. At the very least, these suggestions may sound time-consuming and expensive. However, I wonder what the health and social outcomes might be of training health professionals in such a way that gives us the perspective we need (a) to revivify the still existing health-enhancing capacities in people and their communities, (b) to express cultural sensitivity in our interventions, and (c) to balance an individualizing and problematizing view of sick persons with a health-in-society perspective.

What might a professional so trained do differently? What would this shift look like? I envision the next generation of health professionals as having the additional capacity to be (a) reflective interviewers, persons who seek out health-enhancing practices in individuals and groups, like a “health anthropologist” using fieldwork observational and reflective interviewing skills, and (b) political activators, persons who spread awareness of the fundamental interconnections between social conditions, economic status, and health. Such training may provide health professionals with increased capacity to identify the “salutogens” -- the origins of health -- in the lives of the people who consult with us. Further, I believe this training may be particularly relevant to those who work with marginalized groups in our society, with people who are accustomed to being treated as “problems.”

Teach Fieldwork Skills of Observation and Reflective Interviewing

Health professionals who work in the model I am suggesting would look like anthropologists who enter a culture seeking to understand how it works rather than to ferret out what is wrong with it. One of the goals of reflective interviewing in the health-care setting would be the ability to identify and reflect back that which is already working in a person’s life or community, that is, competencies already demonstrated, resiliencies already practiced, strengths already manifest.

Such a technique is low-cost because it does not involve problem diagnosis, problem-solving, treatment, technology, or intervention. Its sole purpose is to find and amplify the power of what already works. The defenses, denials, and vulnerabilities a person or group may have are relatively inconsequential in such a capacity-finding

process, and frankly, I believe, are none of the interviewer's business. Listening to people's stories does not require that we find contradictions in those stories or that we break down their defenses. The objective is simply to hear what healthy function means to them and to build a record of competence, capacity, and resiliency to balance the customary focus on dysfunction, illness, and break-down.

Further, by listening to an individual's capacities to solve problems and to live in the non-problem parts of life, health professionals who become health anthropologists may experience a salutary shift in our own perceptions. The exclusive problem-focus of our encounters with people will be interrupted, and we will see people who have ability, not just patients with disability. Such a shift would be healthy for us as professionals, as well as for the people who consult with us.

This practice of interviewing people in natural groups may be of special benefit to traditionally marginalized persons who are accustomed to being assigned a "problem" identity. Consider, for example, the effect such a strategy might have with newly arrived immigrant groups in our country. First, to have one's own group story of support, mutual understanding, and connection reflected back by a health-care professional could act as an antidote to the potential loss of identity and isolation immigrants may experience. Second, reflective health narratives, like the Girls' Club narratives, are by definition culturally sensitive because they are the group's record of its own indigenous practices -- practices that may have historically helped them maintain a sense of identity. Third, if health anthropologists needed translators to cross language barriers for the purposes of recording health narratives, naturally occurring "partnerships" between the

professional health community and members of the immigrant community might emerge -- partnerships that could be useful at times of health-care crises.

For the second- and third-generation children of immigrants, reflective health narratives, which preserve the stories of naturally occurring support groups within their communities, may have several significant benefits. Children and adolescents acculturate faster than parents to a new culture. This process often causes a decrease in appreciation and adherence to traditional values, resulting in the loss of authority by the adults, loss of cultural identity for children, and intergenerational conflicts (Bemak, Chung, & Bornemann, 1996, pp. 243-265). Health "experts" who witness their culture and respect adults in their culture may send a powerful message to quickly acculturating younger generations that their "old world" culture has positive aspects. Additionally, such a record of functional communal systems may act as an antidote to the loss of historical memory and cultural identity, empowering a new generation to keep useful aspects of their indigenous culture while adapting to a new culture.

I believe it was the absence of any such reflective experiences on the positive aspects of my own working-class culture that led me to individualizing my position in society, to not understanding the connections between my perspectives and my origins, and to being stripped of the strong immigrant and working-class history that is my birthright. Learning to historicize my past and seeing my life in the context of working-class history has been health-enhancing; it contributes to my resolve to take my place and to act in the ongoing struggle to fight for justice in a global economic system whose very premise is that some benefit at the expense of many others.

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The addition of training experiences in which health professionals learn the skills of “health anthropology” may constitute an important shift in how we see healthy functioning, a signal that the health profession recognizes that socioeconomic factors and nonmedical measures can enhance or compromise health. Such a shift suggests the last training strategy: making visible to those who consult with us the connection between context and health.

Teach Political Activation Skills

I use the word “activation” rather than “activism,” not to diminish the importance of politically and economically motivated health activism. Rather, I use this terminology to acknowledge my awareness that the identity of health-care professionals and the culture of health care itself are deeply embedded in a worldview that sees individuals rather than systems. Further, consumers of health-care far too often go to providers expecting to be “fixed,” unwilling or unaccustomed to taking a broader, more systemic perspective on their health-in-society. Therefore, I make this call for a systems perspective in the training of health professionals neither facilely nor naively implying that health providers should become involved in politics. Instead, I use the words “political activation skills” to suggest the particular role that health professionals might have in igniting a systems perspective, or what I would call a political perspective, in the consciousness of the people who consult with us. I believe that telling the truth about the connections between context and health could be the needed spark.

Medical research and public health research has already demonstrated the connections between (a) patterns of unequal wealth and negative health outcomes;

(b) patterns of unemployment and negative health outcomes; (c) patterns of discrimination, hate, and negative health outcomes; (d) patterns of poor housing and negative health outcomes; and (e) patterns of environmental degradation and negative health outcomes. The connections have already been made and the information is available. What I am promoting is a new legitimacy for health professionals to raise awareness about the connective tissue between health and its social and economic determinants so that the “hidden injuries”³ to health that result from social injustice and economic inequality become, through our efforts, more visible. I believe that health professionals, and in particular, health educators could be effective and credible spokespersons for this systems perspective on health.

Because health is at once an intensely personal and a complex political and economic issue, it may have the power to personalize for the public what appear to be out-of-reach, overwhelming problems like economic and social injustice. Widespread awareness of the connections between health and its underlying determinants has potential political power but remains dormant. There are complex reasons for the invisibility of these connections. But first and foremost, it is profitable in an advanced capitalistic system to maintain the idea that individuals are exclusively responsible for their health risks and to suppress awareness that unbridled market-driven abuse of natural and human resources for profit creates unhealthy conditions for almost everyone except the few at the top of the socioeconomic hierarchy. I am not suggesting that health professionals alone can untangle this economic and political dilemma. However, I am arguing that the addition of a systems perspective, which is currently absent or subdued

in the training of health professionals, may contribute to our capacity to raise the public's awareness about the connections between health, equality, and justice.

Imagine what would happen if a majority of the people in this country really understand how their health -- their personal well-being and that of their families and communities -- was inextricably linked to the political economy, to the environment, to social conditions. I believe such awareness could (a) provoke the public's insistence on policies to improve the level and quality of employment and to distribute income and wealth more evenly, (b) stimulate the public's torpid political will to repair the damaged social fabric, and (c) catalyze the public to refuse to have their communities' resources used for corporate profit. In order to fulfill the promise of public health to improve the health of more people, public health educators are called upon to say what we already know about the connections between social and economic disparities and diminished health status. By giving voice to these connections, we will use, in my words, political activation skills.

Summary

What then would be the broad implications of teaching public health educators and health professionals the four strategies that I have suggested? I suggest that health professionals who are trained in a capacity-focused, systems perspective would have the following competencies:

1. Ability to see people as whole and as having strength: Simply said, health professionals will be able to see people living in society, not just clients.

People may need us for specialized health services, but we also need them so

that we can work collectively for the social and economic conditions that make healthy functioning possible for more people.

2. Ability to identify the relationship between economic and health status: A broad health-in-society viewpoint requires that health educators take seriously the enormous number of studies demonstrating that health outcomes are linked to socioeconomic position. Therefore we would include in our definitions of health (a) the information that economic equity is good for health, one of its primary determinants, and (b) the recommendation that reducing economic inequalities is a way to improve the public's health status (Kaplan & Lynch, 1997; Sen, 1993).
3. Ability to recognize how social inequality influences health: As complex and difficult as it is to address the economic improvements needed for all people to enjoy healthy functioning, a health-in-society perspective will also require that health professionals (a) understand how exclusion, disrespect, and discrimination are bad for health (Miller, 1995, pp. 343-345), and (b) expand our definitions of health to include repairing the social fabric as another way to improve the health of more people.
4. Capacity to animate solidarity: The health professional that I envision develops a philosophical and cognitive framework for connecting personal health issues to larger social and economic issues. By making these connections explicit in our therapeutic and educational interventions, health professionals may have the power to animate the public's political and

economic sense of solidarity. I intentionally use the word “solidarity” here rather than “community.” A word much more widely used in Europe than in the United States, solidarity implies a mutual concern and responsibility among those who are doing well for those who are doing poorly, not just vague commitments to community (Miller, 1995, p. 353).

6.4 Implications for the Way We Educate the Public About the Care of Health

While I was conducting the Girls’ Club interviews, and then later when I reflected on their meaning, I noticed I was in a different intellectual position than I am accustomed to as a health educator. I was trying to understand the unfolding of my narrators’ lives as people situated in a specific historical time, in the unique economic, cultural, and geographic conditions of McKees Rocks. In other words, I was equally focused on their individual choices and behaviors *and* the contexts that had shaped them.

By contrast, in my work in disease prevention and health promotion, I am often focused either (a) on individuals and the reduction of their risk through behavior change *or* (b) on environments and their potential toxicity, and how to clean them up. I realized that health education lacks the narrative tool of the “and,” that is, the quality of stories to put things together and to illuminate how people, motives, events, and environments are all interconnected. Without this connective tool, our perspective on health is limited, and unwittingly we often end up engaging in blaming paradigms. We blame the victim or we blame the system.

By “blaming the victim,” I refer to the branch of the public health model that teaches us it is somehow something we have done in the past that is causing our health

troubles now. For example, we didn't exercise enough. We drank too much coffee, smoked, or ingested too much "bad" cholesterol. We didn't have a positive attitude. We are working out our karma; what goes around comes around. This form of thinking says that our health is completely in our power. If we do the right physical, emotional, or spiritual ablutions, good health is ours. If we become ill, we must have done something wrong.

By contrast, "blaming the system" refers to the current in public health that teaches us that environmental influences, things "out there," cause our problems. The Jets -- a gang of juvenile delinquents in the musical *West Side Story* -- memorably synthesize this perspective when they plead to Officer Krupky to pardon them for a crime because they were "depraved on account of having been deprived."

I am equally uncomfortable with both these viewpoints on health, the idea that on the one hand, I have complete power over my health because the environment does not matter, and on the other hand, I am powerless to do anything in the face of overwhelming pathogenic environments. Either I have all the power, or I have none. This dualistic kind of thinking appeals to the American sense of individualism. Total power and total powerlessness define a continuum, but the continuum remains one of *individual control*.

Individual control -- expressed in the language of personal power, health habits, risk reduction, and the lifestyle emphases of modern public health -- is the dominant prevention paradigm of our contemporary era. Further, our health educational emphasis on individual control of illness and individual responsibility for health makes those of us

in public health complicit in the public's fundamental lack of understanding of the "story" of health as an *interaction* between individuals *and* their environments.

For example, by referring to cancer "risks" rather than environmental "carcinogens," we, in public health, frame the cause of cancer as a problem of individual behavior rather than a problem of exposure to environmental disease-causing agents. By referring to HIV "risk behavior," rather than to our culture's conflicted and contradictory sexual values, we frame the cause of sexual disease as a problem of individual behavior rather than a problem of life in a society that simultaneously exploits and suppresses sex. Addressing prevention in this dualistic way, we keep the focus off the political and economic structure of market capitalism, which produces both the carcinogens and the chemotherapy, both the billion-dollar sex video industry and the condoms. We keep the public's attention on personal behavior framed as risk factors, and we divert attention from the collective political and economic action required to end the build-up of toxic environments. Public health education has done very little to change and redirect all of this. Public health education has remained beyond the fray of politics, and has only recently tiptoed into the arena of public policy in such areas as tobacco legislation.

When we turn our attention toward the psychological health industry, things look very much the same. The psychological corollary for public health's focus on individual control is the dominant mental health paradigm that tends to locate the resolution for all emotional distress in either intrapsychic changes or biochemical changes, both of which occur *within* the individual. Whether person-centered, cognitive-behavioral, or psychodynamic, the tendency of the mental health profession is to ignore the wide array

of individual backgrounds that so affect who and how we are as human beings (D. W. Sue & D. Sue, 1990, pp. 143-144). In essence, this worldview, deeply encoded in the theoretical orientations of many counseling approaches, valorizes the individuals who can control and cope with their environment and ignores the enormous influence of cultural, social, and economic issues on mental health.

My work with the Girls' Club, where I heard first-hand how the external social and economic world interact and shape the internal experience of health, spurs me to call upon colleagues in public health education and counseling psychology to desist from our complicity with the media and marketplace in defining physical and emotional health problems as residing *in* the person, thereby enabling society to ignore the social, political, economic, and cultural factors relevant to health. Similarly, I caution against a dualistic shift to blaming all individual health problems on the social, political, and economic systems in which we live, thereby exculpating individuals from our personal responsibility. I advocate instead for a new story -- a *contextual definition of health* -- a view of health-in-society in which individuals hold themselves accountable for wise personal and public choices, *and* simultaneously recognize how their individual lives and health are shaped by larger historical, cultural, social, and economic forces. Only in collective action can they have the power to change these factors.

What is done about a problem depends on how it is defined. As long as we continue to teach the public that their health problems are "their problems," all of our resources will be directed toward changing individuals. We will inadvertently strengthen the stereotype of the solitary person who becomes and stays healthy in isolation, the

“medicalized” person who exists without context, without history, without a cultural or a political base.

However, if we make this shift to help the public see that their problems are also systems problems, it may redirect our will and our resources toward changing those systems, as well as toward influencing individual behavior. If public health education is going to fulfill its historical mission to improve the health of more people in society, this shift is crucial. Without it, public health education becomes complicit in robbing people of their capacity to see (a) the collective struggle needed to protect health and well-being and (b) the solidarity possible when people recognize their common health interests.

For example, without an awareness among working-class people that corporations had a choice in leaving the western Pennsylvanian communities they had profited from for generations, there was little to no collective action demanding public policies that would disallow such callous economic abandonment of once stable, working-class communities, and the consequent physical and mental ill health that resulted. Without an awareness among women with breast cancer that well-documented breast cancer clusters have been mapped in communities located near chemical factories, refineries, nuclear reactors, and pesticide-laden farm fields, women will continue to monitor their caffeine intake and to scour their family histories for genetic predispositions rather than demand that factories and corporate farming be accountable to the people in communities where they profit. Without an awareness among white working-class people that they have far more in common, in the way they live, get sick, and die, with Black working-class people than with white middle- and upper-middle class professionals, working-class people will

remain separated rather than united in the commonality of their health predicaments. Without an awareness among working-class people that government has a role in regulating economic and ethical reciprocity between corporations and the communities they inhabit, working communities that support the development of long-term, stable social relations like those in the Girls' Club are likely to become relics. With these examples, I am suggesting that the way health educators teach the public about the connections between "internal" well-being and "external" circumstances may be the first, and perhaps most important, step in the new public health education.

This project has served to sharpen the sense of urgency I have long felt as a health educator (Fabiano, 1994) to take this step and to show how being and feeling healthy is not just a simple act of will of an individual, but rather a meaningful condition that emerges at the complex intersection of biology, history, economics, and culture. Consequently, even though I am not an historian or economist, I felt compelled throughout to bring historical and class perspectives to bear in order to situate this study of health in the time, place, social, and economic realities of my narrators' lives.

In addition, I have been equally committed to applying a phenomenological approach and narrative methods to research on health and social support. I have shown how the human act of meaning-making -- meaning conditioned by history, culture, class, and region, and expressed through narratives -- may explain how the internal world of health and external world of support are linked. The power of these narratives to explain the connection between health and social support is not superior to the explanations found in the health and social sciences, but rather additive, amplifying, and humanizing.

I see my work as an example of scholarship in which researchers acknowledge the role of context in the experience of health and in expectations of health care. Within this trend toward understanding health in context (McLeod, 1999, pp. 36-42), my use of in-depth interviewing with women from working-class backgrounds brought special focus to the influence of social and economic class on the development of my narrators' physical and emotional well-being. The interviewing process allowed me to probe and understand the specific meanings the Club women attributed to health and social support within the context of their working-class culture. The same narrative strategies that limited the generalizability of my conclusions opened a new way to think of a contextual definition of health. Thus, in-depth interviews and narrative analysis enabled me to organize my observations on health and social support in a working-class community into a theory on health-in-society that I hope will invite future research using similar narrative approaches.

Developing this concept of health-in-society has required me to grow personally and professionally. As a health professional, this concept has advanced my understanding of the ways in which the societal emphasis on "individual health risks" masks the underlying social and economic determinants of health. The Club women's stories made plain the limits of narrow biomedical and psychological definitions of health. Their narratives expanded my view of health to include the way we function in our everyday lives, our relationships with others, the material conditions we face, the respect and dignity we are accorded, and the meaning we are able to make of our circumstances.

On a personal level, the concept of "health-in-society" helped me to understand why my own sense of "personal health" had been plagued for so long by a vague sense

that I was not enough, or that I did not belong in the academic workplace. By putting my own life and “choices” in context, I began to see how social, economic, and cultural forces affected my own growth and development. I learned to appreciate how much my own working-class background has weaved its way tenaciously into my behavior and perspective. As I learned about the history of McKees Rocks, the community that once flourished there, and the role working people like my own family played in the struggles that took place there, I felt restored -- as though something important that had been taken from me away without my consent was now back in its place.

Thus, it is obvious that my scholarly research and my personal journey are connected; they are like two sides of a continuous Möbius strip. On the scholarly side of the Möbius strip is my development of the concept of health-in-society -- a concept I use to signify that we can no longer separate health from the historical, class, and cultural forces in people’s lives. At the same time, on the personal side of the strip is my experience as a “healthy person-in-society.” As I place myself in an historical context, I am strengthened by my class identity and consciousness; I understand the material and cultural conditions that shaped my life and perspective. I am connected in spirit to others who have struggled before me for economic justice, and I am connected in solidarity with those who continue to struggle in the ongoing collective effort to produce knowledge and take action for transformative social and economic change.

Throughout this work I have argued for a broadened research agenda that investigates health in the intertwined contexts of history, social relations, economic conditions, and culture. But finally, because class is considered by the United States

media, political establishment, and capitalist system to be either non-existent or “un-American,” I especially hope future health scholarship will advance the use of class as a dynamic mode of analysis beyond the well-documented relationship between low socioeconomic status and negative health outcomes. Instead, I look for more research that shows, as did the stories of the Girls’ Club, the proactive and positive ways working-class people wrest meaning, coherence, and health from the conditions of their lives.

6.5 Chapter 6 End Notes

¹ An exceptional overview of resources for the study of the patient-physician encounter as a narrative text is available on-line on the following database: Hevern, V. W. (1998, January). *Narrative Psychology: Internet and Resource Guide* [On-line]. Syracuse, NY: Author. Available: <<http://maple.lemoyne.edu/~hevern/narpsych.html>> Two exceptional articles covering the emergence of narrative thinking in the medical humanities are (a) Sandelowski, M. (1991). Telling stories: Narrative approaches to qualitative research. *Image: Journal of Nursing Scholarship*, 23, 161-166 and (b) Mishler, E. G., Clark, J., Ingelfinger, J. A., & Simon, M. P. (1989). The language of attentive patient care: A comparison of two medical interviews. *Journal of General Internal Medicine*, 4, 325-335.

² Narrative therapy contends that problems do not represent the whole story of people's lives -- that other non-problematic parts of people's lives have become "subjugated knowledges" in a dominant pathology narrative. Narrative therapists assist persons to investigate abandoned and healthier "story lines." Narrative therapy represents one of the few examples I have found of a therapeutic system that acknowledges and uses people's political, economic, and social relations as constituent parts of a person's mental health. In this way, narrative therapy situates people in the actual contexts of their lives, in opposition to the individualized and decontextualizing effects I associate with traditional Western psychotherapies. For a detailed description of narrative therapy, see White, M. & Epston, D. (1990). *Narrative means to therapeutic ends*. New York, NY: W.W. Norton, pp. 1-37.

³ I refer here, of course, to Sennett and Cobb's famous book on the "hidden injuries of class" in order to draw a parallel between their thesis about the internalization of inferiority embedded in class position and my thesis about the internalization of individual responsibility embedded in the public's lack of awareness regarding the social and economic determinants of health. See Sennett, R. & Cobb, J. (1972). *The hidden injuries of class*. New York, NY: W. W. Norton.

AFTERWARD

It was April of 1999, and four years had passed since I conducted the first interviews with the women of the Girls' Club, when I received a letter from Betty describing her experiences of participating in the project. I will never forget how I felt standing in the kitchen, reading Betty's letter. It had been a rough day. The relentless routine of coming home from my full-time job and working the "second shift" (as I had come to think of it) on my dissertation had sucked away the little energy I had left. In my darkest moments, like the day Betty's letter came, I wandered if I were fit to write the dissertation, assailed with doubts about the validity and usefulness of my work.

Betty's letter startled me; waves of goose bumps rippled through me and tears flowed. The grace and clarity in her words shot through my leaden fatigue. It was as though she had translated what I had been trying to say about the social context of health into her own words, breathing life into the ideas I was writing about. Having gotten a perspective on her own *story in context*, Betty wrote about a transformation -- about a shift from seeing herself as a sad and "deficient" person to recognizing herself as a survivor with strengths and capacity to grow. This is how she put it:

I have been wanting to write to you about my transcript for a long time. When you gave it to me, I put it aside. I think I was afraid I wasn't going to like what I read. After I did, I felt this great sadness -- not at what you wrote, but at the realization that I wasn't happy with my life, and there it was in print staring back at me. Then I remembered you telling me that a few of your colleagues liked my "story." So I decided to re-read it from another viewpoint -- that the person in the story was someone else going through all the stuff in my life. All of a sudden, I felt that this "other person's" life was interesting, even inspiring. . . . I learned a lot about myself, and in a funny way, I felt respect for the person I was reading about for everything that she was able to do -- not that she did all that much, but

the way she was able to keep progressing. I am profoundly grateful to you to have my life validated in such an unexpected way. (Personal correspondence, Betty Borden, April 1, 1999).

As I reflected on Betty's words, my thoughts drifted to what has now become for me a self-evident connection between understanding our own history, culture, and material circumstances, and constructing the stories that help us make sense of our lives and feel whole. In and through my effort to write about the Girls' Club, I have learned and relearned that health as a lived experience is as much meaning-making as biological or psychological. Because health and meaning are indivisible, like the field that bridges the illusion of separation between the "north" and "south" poles of a magnet, it seems that what is at stake in comprehending the meaning of the larger narrative of history, culture, and economic circumstances is the real possibility for "individual" health. Trying to understand health as separated from its "field" of culture and class is as much a fallacy of thinking as trying to understand an unbroken magnetic field as divided into distinct poles, when in fact, the "poles" have no separate existence.

I was moved by the realization that participating in this research had profoundly influenced Betty's view of her life. And I was struck by the way she described the simple act of looking at herself as though she were someone else "going through all that stuff" -- what I would now describe as acknowledging herself as an historical actor in a real-life context. I also realized that Betty was holding up a mirror for me.

Finally, after all these years disconnected from McKees Rocks and my history as a woman from the working-class, I am able like Betty, to see my story in context, and as a result, feel my life validated in an "unexpected way." I identify strongly with Betty's

view of her “character” as someone who puts one foot in front of the other and keeps “progressing,” even when times are tough. I see both of us as women gaining possession of our histories, inseparably fused in knowing that, given the circumstances we have faced, our lives have made sense after all. It is not surprising to me that, when I finally believed I could write a doctoral dissertation, I chose to write about Betty and the other Club women, and thus about myself.

Soon after receiving her letter, I called Betty to get her mother’s recipe for *arrancini* -- small fried breaded balls of rice and eggs -- to take to a potluck. After we had talked for quite a while, I found myself revealing to her the self-doubts and the demons that regularly visited me as I fought off exhaustion and struggled to finish this project. I told her that I was not sure I could do it -- write a dissertation on health and social support, get a Ph.D., and do justice to the Girl’s Club story all at the same time. Without missing a heartbeat, she answered, “Of course you can,” and she was right.

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Appendix A

Informed Consent

[from Human Subjects Review Application, Reviewed and Evaluated

by Union Doctoral Committee on 1/27/96]

First Thursday Girls' Club Oral History Project
Patricia M. Fabiano Learner ID 106382
The Union Institute Graduate School

INFORMED CONSENT

Project Director's Statement:

The purpose of the proposed project is to conduct in-depth interviews with the "Girls' Club"--first with each of you individually and then as a group. I want to talk with you about (1) your view of the Girls' Club, (2) your view of your overall sense of well-being and health, (3) your memories of McKees Rocks, the neighborhoods, and growing up, and (4) your opinion of what it was like to participate in this project.

I will follow the same process with each of you: First, I will tape record our sessions. We will probably meet at least two times, with each session lasting approximately one and a half to two hours. If possible, I would like to meet in your home. When we finish, I will transcribe the tapes; that is, I will listen to the tape and type exactly what we said into a document called a transcript. I will return the transcript to you for corrections of spelling and names. You are free to insert additional thoughts into the transcript at this point. You are also free to delete things, although I recommend that you do not greatly change the original conversation we had. I will also send you my thinking about the conversation we had--my interpretations of things you said in light of the four areas listed above. I will invite you to comment on what I wrote: what you think I got right and what might not be accurate. Hopefully, we will have a meeting after all the interviewing where we can talk about the whole experience, about what I wrote, and about any ideas or concerns you may have.

In a project like this, there are benefits and risks to those who participate. Some of the benefits include the fact that I will be asking you to review your thoughts and feelings about the group. This gives you the chance to reflect on what the Club means to you and its worth in your life. Furthermore, participating in this project is a statement that you believe--as I do--that your group is important and that each of you has something of value to say. A third benefit is that this work that we do together will become a part of a knowledge known as Women's Studies. We will create a record of the Girls' Club that others may read about and learn from. Lastly, what we learn together might help shed light on how "talking about the past" helps "make sense" about the past and about the present. Other people have found this process empowering.

Along with all these possible benefits, however, there are also some possible risks or discomforts in participating. First, although I commit myself to protecting your confidentiality and identity in these interviews, I question whether we can completely

protect your anonymity over the long-term. During this project which is part of my doctoral degree at the Union Institute, I will remove your names from the audio tapes and assign each of you a number which only I will be able to correspond to your name. Additionally, I want to know if you give me permission to use your actual names. If you want, I can assign each of you a "pseudonym" which will mask your identity. I would like to use your names because, of course, your names are meaningful to me and I would like others to know you.

Remember although we talked about a lot of things in the interview, I will use only those parts where you speak directly about the Club and its meaning in your lives in my dissertation.

Only seven people at The Union Institute who comprise my doctoral committee will read the document. However, after getting my Ph.D., my dissertation will be placed in a library and made available to all other researchers who want to study long-term friendships among women. Additionally, I would place all the tapes and transcripts in an archive in Pittsburgh (the Archives of the Industrial Society at the University of Pittsburgh) so that they can be preserved for future use. Even though your real names will not be used and the tapes and transcripts will only have a number on them, you seven are well-known in the McKees Rocks area. Others from afar who study the group will probably not be able to identify you, but anyone from McKees Rocks may know who you are. Although I do not think this a necessarily harmful risk, I want you to be aware of it.

Another risk is this: When people participate in a project like this--a project that asks you to think and talk about things that usually never get spoken out loud--it can cause change. It is possible that just by participating in the project, your relationships and the group itself will change. It could affect how you feel and how you think about individuals or the group. Again, this is not necessarily a bad thing, just something I want you to be aware of.

Lastly, there is a risk that I will not accurately reflect what you said or I will represent what you said in a way that you do not agree with. I will be working with your words and I commit myself to make every effort to share with you the interpretations and the meanings in your interviews. In most cases, we will probably agree; in some, we may disagree. The point is that we will talk about the areas of agreement and disagreement so that both of us feel satisfied and comfortable about what I will write.

I will ask you to sign a document called "a gift of deed." This gives me permission to quote you in my dissertation. It will also give me permission to store the tapes and transcripts in a library archive. Furthermore, there is a section where I can stipulate a date (most people say 5 to 7 years) when I give the archive full permission to make your transcripts and tapes available to others who may want to use them. Until that time, no

one may read the transcripts or listen to the tapes. I will also make copies of your transcripts and tapes available to you so that you may have them for your own family's keeping.

Of course, your participation in this project is entirely voluntary. At any point in the project you may decide that you no longer want to participate. Some of the things we will talk about may stimulate thoughts of personal matters that could trigger feelings and emotions. I want to emphasize that you are totally free not to talk about any topic with which you may feel uncomfortable. Your conversations with me are completely confidential. You may share whatever you said with whomever you want, but I will keep your comments confidential.

Patricia Fabiano, Project Director

Date

Participant's Statement:

The study described above has been explained to me. I understand that any questions I might have about the research will be answered by the project director. I understand that I may choose not to answer questions as I like and that I am free to withdraw from participation at any time. I understand that my participation and any information I provide will be kept strictly confidential by the project director.

Participant Signature

Date

Appendix B

Release Agreement

**The First Thursday Girls' Club Oral History Project
Patricia M. Fabiano Learner ID 106382
The Union Institute Graduate School**

RELEASE AGREEMENT

I am a participant in the oral history project, entitled The First Thursday Girls' Club: Living Lessons in Friendship, Support, and Health, taking place in McKees Rocks, Pennsylvania, on _____.

I agree to be interviewed by Patricia Fabiano and release as a donation all recordings and transcripts of our interviews for use in her scholarly research. I grant Patricia Fabiano the copyright to use the taped interviews and transcripts for her educational purposes as she sees fit, except for any restrictions listed below.

I understand that the transcripts and recordings will be preserved in the Archives of the Historical Society of Western Pennsylvania, and made completely available for educational purposes, except for any restrictions listed below. At such time, this gift will not preclude any use which we may want to make of the information in the recordings or transcripts ourselves.

Narrator's Name _____

Narrator's Signature _____

Address _____

Date _____

Restrictions _____

Appendix C

Interview Protocol:

Brief Agenda and Model Questions

PROTOCOL FOR GIRLS' CLUB INTERVIEWS

I used a one page outline guide to sequence and structure the interviews (page 2) . However, the mental infrastructure I carried into each interview was more detailed. Many of the substantive questions and probes I used in the interviews are found on these pages While these questions may appear linear, I used them in the natural flow of the interview process as both conversation starters and probes, not as a lockstep questionnaire.

Brief Agenda

INTERVIEW GUIDELINE: LIFE STORY QUESTIONS

1. Life at Home and Family
 - Mother
 - Father
 - Family
2. The Neighborhood and Ethnic Aspects of Growing Up
3. Pittsburgh and Ethnicity
4. Domestic Routine
5. Meals
6. Family Activity
7. Parents Other Interests
8. Religion
9. Politics
10. School
11. Work
12. Life at Home after Graduation
13. Marriage
14. Making a Living
15. Children
16. Family Life after Marriage
17. Life Now

PERCEPTIONS OF HEALTH AND WELL-BEING

1. Overall physical health and well-being?
2. Overall emotional health and well-being?
3. Use of professional services?
4. Club and role played in physical and emotional health. How? When? In what way? Importance?
5. Meaning of support?

THE GIRLS' CLUB

1. Club: History
2. Club: Relationships
3. Club: Group Dynamics
4. Club: Effect On Your Life
5. Club and the World Around It
6. Closing Questions

MODEL QUESTIONS: LIFE STORY QUESTIONS

LIFE AT HOME AND FAMILY

Mother Let's talk about your family

How about your mother? What was her background?

Demographics: Where born? When? Grandparents?

When did he come to McKees Rocks?

Languages she spoke other than English?

Did she ever work outside the home? What did she do? Belong to a union?

What do you remember about her activities outside the home?

Did she do anything inside the home (cook, sew, etc.) that was paid?

What was a typical day like for her?

What did she do when she wasn't working?

Was she easy to talk to? Did she show affection?

If you had worries, could you share them with her?

What was important to her?

Father

How about your father? What was his background?

Demographics: Where born? When? Grandparents?

When did he come to McKees Rocks?

Languages he spoke other than English?

Where did he work? What were his jobs?

Do you remember that he always had work?

What did he do with his money? His pay? Did he bring it home?

Did he belong to a Union?

What was a typical day like for him?

What did he do when he wasn't working?

How did he expect you to behave toward him?

What about alcohol?

What did he teach you about what was important in life?

What was important to him?

Family

How did you get along with your brothers and sisters?

What are your earliest memories of your family life?

Did you have a room of your own? Shared it?

Was there one family member you felt particularly close to?

One you could not get along with?

Were you and your brothers treated equally?

Did any of them rebel? How? What happened?

Was there any person other than your parents who was special?

Did you rebel in any way against your parents?

THE NEIGHBORHOOD AND ETHNIC ASPECTS OF GROWING UP

Describe where you lived and what it was like.

Describe the house you grew up in?

Describe the neighborhood?

Did you as a child speak a language other than English? On what occasions?

Did your parents speak a language other than English at home?

Did you attend an ethnic church?

Were your parents members of ethnic clubs?
 When you were a child, were your best friends the same ethnicity?
 Were your neighbors the same ethnicity?
 Did everyone have about the same standard of living?
 Do you remember differences between racial groups? Religious groups? Immigrants?
 Do you think your parents (family) thought of themselves as the same or different s?
 As a child, who did you play with?
 Were there any favorite stories that your family told?
 How would you describe your childhood?
 Did you own or rent the house you lived in?
 Did your parents have enough money? Who paid the bills?
 Who made the decisions about money?
 Did your parents had to struggle to make ends meet? Did your neighbors?

PITTSBURGH AND ETHNICITY

Let's talk about Pittsburgh? What do you remember about it?
 Do you remember any major "strikes" ? Did they affect your family?
 What did your father do during long strikes?
 Is being the ethnicity you are important to you? In what ways?
 Do you cook ethnic foods more than just on holidays?
 What else do you do that reflects how you feel about your ethnicity?

DOMESTIC ROUTINE

Tell me about life at home when you were a child.
 Who did the housework?
 Were any clothes used secondhand?
 Did you have chores or tasks to do? Did you have brothers? Did they share equally?
 Sleeping arrangements for whole family.

MEALS

Tell me about the role of food in the family.
 Where did the family eat?
 Who did the cooking?
 Did you have anything different on certain days? Like Sundays?
 Did anyone keep a garden?
 Were certain kinds of ethnic foods important? What? When?
 How did the family talk to each other over dinner?

FAMILY ACTIVITY

Describe your family: did you see your grandparents, uncles, cousins?
 Were there books in the house? Newspapers? Magazines?
 Did you have any musical instruments in the home?
 Do you remember a funeral in the family?
 Do you remember a wedding in the family?
 Were you taken out visiting neighbors, friends, relatives?
 Were you taken shopping? Did you ever go to Pittsburgh?
 Did you ever go on vacation? For how long? Who went? Where?

PARENTS OTHER INTERESTS

When your parents were not working, how did they spend their time?
 Did your mother have any interests outside the home?

When did your father get home from work?
 How much was he home on weekends?
 How would he spend his time?
 Did they drink?

RELIGION

What would you say religion meant to you as a child?
 Could you tell me how you spent weekends? Saturdays? Sundays?
 Did your parents go to church? How often? Where?

POLITICS

Was your father or mother interested in politics?
 Why do you think he or she held those views?
 Do you remember either of your parents voting?
 Do you know what party he or she voted for?

SCHOOL

Describe your attitudes toward school. As a child. As a teenager.
 How did you get there? Did you walk? Did you go alone?
 How did you feel about the teachers? Them about you?
 Did your parents encourage you to do school work?
 What kinds of grades did you get? Were grades important to you or to you parents?
 Did you have a best friend? Name? Describe your friendship.
 When did you meet any of the "girls" of the Club?
 What did you want to be when you grew up? Why?
 Was there a role model (a woman or a man) you looked up to?
 Did you want to go to college?
 What would you have studied?

WORK

While you were in school, did you have a part time job?
 Did you continue to live at home after you started work?
 How much of your wage did you give to your parents?
 Did you like your work?
 What did you think about being financially independent?
 How long did you work? Why did you stop?
 Did you belong to any unions?
 How did you get along with others workers? Did men and women work together?

LIFE AT HOME AFTER GRADUATION

Let's talk about life between the time you graduated and before you got married.
 Describe the processes you went through to make the decisions about your future.
 What options did you have?
 Did you go out? Where ? With whom? How often?
 Tell me about serious boyfriends you had before you got married.
 How late were you allowed to be out at night?
 Did your parents disapprove of any of your activities at this time?
 Do you remember your parent's attitudes towards sex?
 Did you feel prepared for puberty? Who prepared you?
 Did you have any sex education before marriage?
 How did your attitudes about sex agree (or disagree) with your parents? Your friends?

MARRIAGE

Tell me about meeting your husband, getting engaged, and getting married.
 How long had you known your husband? How did you meet?
 What age were you when you married? Age of your husband?
 What kind of family was he from? Ethnicity? Religion?
 Did your parents help you in setting up a home? Later?
 What did you expect of marriage? Of your husband?
 What were the happiest moments during the early years of your marriage?
 How did having children change your life as a couple?
 How important would you say sex is to marriage relationship?

MAKING A LIVING

What was your husband's job when you married?
 Did he ever work for the mills?
 Was he in a union?
 What was his work like in the 1960s? 1970s? 1980s?
 What kinds of things did you spend money on?
 Describe what happened when he got laid off?
 Did you ever think of going elsewhere for work? Leaving Pittsburgh?
 Did you work after you married?
 Was being laid off hard on the marriage?

CHILDREN

Did you and your husband both want children?
 Did you plan to have the number you did?
 Did you use contraception? What kind?
 Did you know what to expect in childbirth?
 Describe the births of your babies.
 If you needed advice with your babies, who did you ask?
 How much did your husband have to do with raising your children?
 Did you believe that a husband should help at home? How?
 Did you raise your children differently than you were raised?
 Did any of your children have difficulties? What was like for you?

FAMILY LIFE AFTER MARRIAGE

How did you and your husband manage the house in the early years?
 Did you know what your husband earned?
 How much of that would he give to you?
 Did he pay any of the bills himself?
 How did you decide the money should be spent?
 How would you describe the relationship you had then?
 Did you and your husband have same ideas about bringing up children?
 Was there anyone you used to talk to if you worried about the children?
 Did you believe that girls should be treated the same as boys?
 Who looked after the children while you worked?
 If your job was staying at home with the children, describe how that was.
 Describe an event that was difficult for you as a parent of teenagers and how you handled it.

LIFE NOW

How long have you lived at the same zip code?
 How many times have you moved? Why did you move?
 How often do or did you see your parents after you were married?
 How often do you see your children now?
 How did you feel when your children married and left home?
 How did you feel when your grandchildren were born?
 Describe being a grandparent.
 How do you feel about women who work when their children are young?
 How do you feel about women who have young children and who work?
 What family traditions have been important for you to carry on?

MODEL QUESTIONS: PERCEPTIONS OF HEALTH AND WELL-BEING

Overall, how would you describe your health? Your overall well-being?
 When have you felt best about your health? Worst?
 Describe how you feel about your body? How has that changed?
 Tell me about your physical health. How has that changed?
 Describe how you typically take care of yourself physically.
 How often would you say you consult a medical professional each year?
 When you are concerned about your physical health, what else--besides consulting a physician--do you do?
 Tell me about your emotional health. How has that changed over time?
 Describe how you typically take care of yourself emotionally.
 How has your physical or emotional health affected what you have been able to do, or accomplish, in life?
 What are the sources of feelings of satisfaction with life?
 What do you believe has brought you your greatest sense of personal satisfaction?
 Thinking back over the years, what kinds of experiences generally make or have made you feel useful (important, competent)?
 Describe what brings you peace of mind?
 Describe times when you feel happy and relaxed.
 Describe times you have felt pessimistic. How do you cope?
 What were the most difficult times over the years? How did you survive?
 When you feel blue or want to talk, to whom do you turn?
 Describe any use of professional mental health or psychological services.
 How Club played a role during difficult times? Specific individuals in Club?
 What things would you like to have done in your life, but haven't?
 If your children and grandchildren would take your advice about having a good life and getting through tough times, what would it be?

MODEL QUESTIONS: THE GIRLS' CLUB

Describe a typical Club get together.
 What goes on at the Club meetings? What is a typical meeting like? What do you like best about meeting?
 Describe a particularly memorable Club meeting.
 What has being in Club meant to you over the years?
 Has that changed over time?
 What's it like to be a part of this group?

Club: History

What do you make out of the fact that you have been together this long?
 Who were the original members?
 Why did each leave?
 How long have you all known each other
 In what ways were you similar to each other? Different from each other?
 What moments stand out for you?
 Did you ever think of leaving the Club? Why?
 Describe some of Club's customs, traditions, activities

CLUB: RELATIONSHIPS

Describe your relationships to different people within the Club?
 Do you or have you depended on different people for different things?
 What does support mean to you?
 Are you always supportive? Do you ever not feel supportive?
 Are others always supportive of one another?
 What about honesty? Are you honest with one another?
 How would you describe changes the club has gone through?
 Tell me about any changes in your own personal feelings about the Club.

CLUB: GROUP DYNAMICS

Describe your role in the Club. What do others count on you for?
 How would you describe the other girls in the Club?
 How would they describe you?
 Friendships, even the best ones, sometimes require things of us. How have these relationships required things of you?
 What things can't you or don't you talk about?
 Have hurtful or painful things happened?
 What about jealousies?
 Are there things that never get resolved? Do you know why?
 How does the group deal with conflict?
 What sort of contact do members have outside of the Club meetings?
 What do you think your husband, mother, daughters, sons, friends think of Club?

CLUB: EFFECT ON YOUR LIFE

Describe when the Club has felt most important to you? What else was going on in your life?
 Describe when the Club has felt least important to you? What else was going on?

CLUB AND THE WORLD AROUND IT

When was the first time you voted? Do you remember whom you voted for? Did you talk about voting with anyone? Were you influenced by anyone? Anything?
 Modern conveniences have changed drastically over the years. How have these changes affected you?
 What do you recall about the war in Korea? Describe any impact it had on you.
 Do you remember when Kennedy got shot? What was going on in your life?
 Do you recall the news about the beginning of the National Organization of Women (NOW)? What did you think?

Did the anti-war movement (Vietnam) have personal impact on you? Relatives?
 Did the women's movement have personal impact on you? Relatives?
 What do you think about the women's movement now?
 When new presidents got elected (Johnson, Nixon, Carter, Reagan, Bush, etc.) did
 you ever talk about it at home? At dinner? At Club?
 As TV and the news started to talking large numbers of women going back to work,
 what did you think about it?
 How has your children's life been affected by women's working outside
 the home as well as or instead of having families?
 Describe how your daughter's life differ from yours?
 Describe how women's lives in general have changed in your lifetime.

CLOSING QUESTIONS

How has being interviewed been for you? Describe
 What have we talked about that has been especially difficult to you? Is there any
 information I can give you or assistance
 What did I not ask that you thought for sure I would?
 What else do you want to tell me about the Club?
 What have you gained from doing this interview?
 How would describe this experience to someone else?