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Stigma

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Stigma is part of the complex of factors that transform impairment into disability. The term refers to the disapproval and disadvantage that attach to people who are seen as different; its repercussions can be far-reaching. Stigma affects employment, social recognition, educational opportunities, friendship and sex, housing, and freedom from violence. *Stigma* in Greek means to prick or to puncture, and the word originally referred to a sharp instrument used to brand or cut slaves or criminals. The fact that stigma is still closely associated with visible forms of difference—leprosy, needle tracks, missing limbs, and obesity, for instance—recalls this history, as does the fact that it retains associations of moral disgrace. Today, the term is more abstract and more general and refers to social forms of stigma—to the discredit or dishonor that attaches to a wide range of human variation.

Stigma's associations with enslavement lasted through the nineteenth century, when the term described the brands and marks used to identify and to punish enslaved people in the United States, and it also connoted a moral taint or sign of disgrace. Along with these associations of infamy, the term is linked via the Christian tradition to the idea of grace. Stigmas (or stigmata) refer to the spontaneously bleeding wounds of saints, understood to imitate the wounds of Christ.

Since the late nineteenth century, stigma has been more stably correlated to pathology and to *kinds* of people rather than to individuals. Paralleling the large-scale processes of normalization and the management of populations that Michel Foucault has identified with Western modernity, stigma gradually lost its punitive and religious connotation; instead, it was associated with medical pathology and social groups deemed inferior as a result of poverty, racial and ethnic difference, occupational status, gender and sexual nonnormativity, and many forms of cognitive and physical difference. For scholars of disability, the rise of statistics in the nineteenth century was essential in shifting views of the visibly different from wonder to deviation from the norm (Davis 1995; Garland-Thomson 1997). The emergence of a "normal body" is instrumental in shifting stigma from individuals to broader, more systematic forms of oppression.

Human difference and its regulation have long been an object of study, but the modern concept of stigma emerges around the same time as the discipline of sociology, where it played an important role in Émile Durkheim's (1895) account of social deviance. Durkheim understood deviance as relative, the product of the sorting processes internal to communities, and as an effect of asymmetrical power relations. His understanding of deviance was crucial to the development of labeling theory, which argues that deviant behavior is not inherently pathological but is categorized by society as aberrant. During the twentieth century, stigma was understood as a sign of deviance, and it continues to play an important role today in sociology as well as in anthropology, legal studies, psychology, education, ethnic studies, and the medical humanities.

Stigma is crucial to the emergence of disability studies as a field and to the definition of disability itself. The Americans with Disabilities Act (ADA) of 1990 recognizes the importance of social opprobrium to determining who will qualify for benefits. In defining disability, the law covers not only those with impairments but also

those who "are regarded as having such an impairment" (Section 12102 [3]); the authors of the ADA have deemed that the discrimination attending physical and mental impairment is disabling even in the absence of such conditions. The American Medical Association's *Guides to the Evaluation of Permanent Impairment* (2007) also incorporates stigma. Stigma is central to its criteria for compensation and accommodation, which judge facial differences as some of the most disabling impairments. How the effect of social stigma might be quantified, for instance, in cases of employment and other forms of discrimination, remains a pressing legal and political question.

The sociologist Erving Goffman developed the most influential account of stigma in his classic study *Stigma: Notes on the Management of Spoiled Identity* (1963). Although he was not solely concerned with disability, Goffman has been influential in disability studies. His account of the maintenance of social norms through the rituals of everyday life and his emphasis on the discrediting effects of stigma have set the terms for contemporary discussions of stigma in relation to disability and beyond. Goffman defines stigma as a break with expectations for "normal" appearance or behavior that results in the denigration of the stigmatized person. His definition emphasizes copresence and perception. He is less concerned with the inherent trait or the nature of the behavior than he is with the societal perception of the "stranger" who appears "different from others." Like Durkheim, Goffman understands stigma as a dynamic social situation where fitness is defined in the context of the community rather than in absolute terms. As his description of the stigmatized person as "bad, dangerous, and weak" implies, Goffman is blunt in representing the effects of stigmatization, and he does not offer a positive account of difference. His writing highlights a paradox

of scholarship on stigma: in describing the conditions of stigmatization, one risks repeating them, making a spectacle of the denigrated object.

Goffman identifies three categories of stigma: "abominations of the body," his term for physical "deformities"; "blemishes of individual character," which refers to moral transgressions such as homosexuality; and, finally, "the tribal stigma of race, nation, and religion" (1963, 4). Of these three categories, the last gets the least attention: race, ethnicity, nationality, and religion appear fairly rarely in his examples, in part because his definition of stigma turns on an individual out of place rather than the fate of an oppressed group. The rise of the disability rights movement over the past half-century has shifted the understanding of mental and bodily difference from an individual to a group phenomenon.

Moral taints are of interest to Goffman because of the way such faults discredit the entire person. While many of his examples seem dated, his analysis of blemishes of character remains relevant. The stigma attached to sexual or social deviance such as HIV infection or drug addiction is powerful, all the more so because, as Goffman argues, stigmatized people may internalize rather than contest the norms by which they are judged inferior.

Visible disability (or "abominations of the body") furnishes key examples for Goffman because of his emphasis on live scenes of interaction. Lennard Davis (1995) has argued that appearance is one of the main modalities by which disability is constructed. Rosemarie Garland-Thomson (2009, 44) considers the social dynamics and effects of staring, tracing the power of the starer over the staree. Public scenes of staring produce conditions of vulnerability for people with visible differences; however, under usual conditions not only the staree but also the starer is exposed to view. As the title

of the edited collection *Staring Back* implies, people with disabilities are not the passive objects of stigmatization but rather engage in a range of strategies for resisting, refusing, and reversing stigma.

Although stigma is primarily associated with forms of difference that are readily visible, nonvisible and transient forms of stigma have equally powerful effects. Invisible disabilities such as forms of cognitive and affective difference, epilepsy, and vocal impairment raise important questions about disclosure, secrecy, and information management. Goffman and others have analyzed the acts of passing that stigmatized persons engage in on a temporary or permanent basis. While passing might shield an individual from certain forms of denigration or abuse, lack of recognition can also have negative consequences. In an essay on the complexity of passing, Tobin Siebers (2008a) argues for the significance of "disability as masquerade," or the performative acts people with disabilities engage in to minimize or exaggerate impairments in order to gain control over self-representation, as well as access to accommodations.

Such control is always tenuous, since the attribution of stigma is volatile. As work on the experience of the parents, children, and siblings of people with disabilities has shown, stigma is contagious. To be seen in the company of someone who is visibly different is to be understood as different oneself. In addition, stigmatized traits or behaviors can amplify each other, as Susan Schweik (2009) demonstrates in her study of the "ugly laws" in the late nineteenth- and early twentieth-century United States. These laws legislated against the public appearance of beggars and people with disabilities, categorizing both as "eyesores" and confounding them with each other. Once a person is stigmatized, other qualities tend to be interpreted through the lens of this trait; even relatively minor differences can have major and snowballing consequences in the life of an individual.

Writing on stigma invariably raises questions about the constitution of social norms. In a memorable moment from the end of *Stigma*, Goffman quips, "In an important sense there is only one complete unblushing male in America: a young, married, white, urban, northern, heterosexual Protestant father of college education, fully employed, of good complexion, weight, and height, and a recent record in sports" (1963, 128). Disability studies scholars have followed Goffman in interrogating the category of the "able-bodied" or "non-disabled" in order to undermine the self-evident distinction between the normal and the pathological.

This view is valuable because it suggests that stigma is not essentially linked to particular traits or behavior, nor is it permanently fixed to individuals or groups. A person who is stigmatized in one context may be seen as unexceptional in another; once-stigmatized behavior or traits may become acceptable or even enforced as new norms down the line. According to this view, stigma is a system, a way of sorting persons into categories of normal and deviant along the lines of preexisting social hierarchies. Still, there are drawbacks to this universalizing account. It tends to underestimate the extent to which stigma attaches to individuals who are visibly marked as different. In order to understand stigma's role in the construction of disability, we must recognize its status not just as a universal experience of difference but also as a concrete force in the lives of particular individuals.

The disability rights movement has been instrumental in transforming the meaning and public perception of the stigma associated with disability. Collective redefinitions of what counts as normal and the standards for ethical treatment of those perceived as different are crucial. Nonetheless, stigma remains a powerful and unpredictable force in the lives of many, and it shapes the

way individuals and groups can expect to navigate the social world. In the concrete effects of stigma, we see the afterlife of its origins as both a punishment and a technique of identification. Stigma is sticky, and it has the power to confer identity; it is general, but it attaches to particular individuals; once one is marked with stigma, it may be difficult to escape its hold.