hustlers and do not go on to other hustling careers. The main reason perhaps that most boys do not move on in hustling careers is that they never conceived of themselves in a hustling role or as participants in a career where there was a status gradation among hustlers. Hustling, to the peer hustler, is simply another one of the activities which characterizes a rather versatile pattern of deviating acts. It is easier, too, to move out when one has never defined oneself as homosexual. It is in this sense, perhaps, that we have reason to conclude that these boys are not involved in the activity primarily for its homosexual basis. Peer hustlers are primarily oriented toward either delinquent, and later criminal, careers, or toward conventional conformity in lower-class society. They become neither hustlers nor queers.

SUMMARY

This paper explores a special form of male prostitution in American society, a homosexual relationship between adult male fellators and delinquents. It is seen as a financial transaction between boys and fellators which is governed by delinquent peer norms. These norms integrate the two types of deviators into an institutionalized form of prostitution and protect the boys from self-definitions either as prostitutes or as homosexuals.

The conclusions offered in this paper must be regarded as tentative, because of limitations inherent in the data. Study of the fellator population might substantially change the conclusions. Cross-cultural studies also are necessary. Discussion of these findings with criminologists in Denmark and Sweden and exploratory investigations in several larger American cities, however, suggest that the description and explanation offered in this paper will hold for other American cities and for some other social systems.

DEVIANCE DISAVOWAL: THE MANAGEMENT OF STRAINED INTERACTION BY THE VISIBLY HANDICAPPED

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A recurring issue in social relations is the refusal of those who are viewed

as deviant[1] to concur in the verdict. Or, if in some sense it can be said that they do concur, they usually place a very different interpretation on the fact or allegation than do their judges. In our society this is especially true of deviance which results from ascription (e.g., the Negro) as against that which partakes to some significant degree of election (e.g., the homosexual). And, while it may be conjectured that ultimately neither the Negro nor the homosexual would be cast in a deviant role were it not for society's devaluation of these attributes in the first place, barring such a hypothetical con-

tingency it remains the more persuasive argument in a democracy to be able to claim that the social injury from which one suffers was in no way self-inflicted.

In these pages I wish to discuss another kind of non self-inflicted social injury, the visible physical handicap. My aim though is not to survey and describe the many hardships of the visibly handicapped,[2] but to analyze certain facets of their coping behavior as it relates to the generalized imputations of deviance they elicit from society, imputations which many of them feel it necessary to resist and reject.

There are, of course, many areas in which such imputations bear heavily upon them: employment, friendship, courtship, sex, travel, recreation, residence, education. But the area I treat here is enmeshed to some extent in all of these without being as categorically specific as any. I refer to situations of sociability, and more specifically to that genre of everyday intercourse which has the characteristics of being: 1) face-to-face, 2) prolonged

enough to permit more than a fleeting glimpse or exchange, but not so prolonged that close familiarity immediately ensues, 3) intimate to the extent that the parties must pay more than perfunctory attention to one another, but not so intimate that the customary social graces can be dispensed with, and 4) ritualized to the extent that all know in general what to expect, but not so ritualized as to preclude spontaneity and the slightly novel turn of events. A party or other social affair, a business introduction, getting to know a person at work, meeting neighbors, dealing with a salesman, conversing with a fellow passenger, staying at a resort hotel—these are but a few of the everyday social situations which fall within this portion of the spectrum of sociability, a range of involvement which can also be thought of as the zone of first impressions.

In interviews I conducted with a small number of very articulate and socially skilled informants who were visibly handicapped[3] I inquired into their handling of the imputation that they were not "normal, like everyone else." This imputation usually expresses itself in a pronounced stickiness of interactional flow and in the embarrassment of the normal by which he conveys the all too obvious message that he is having difficulty in relating to the handicapped person[4] as he

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[1] Following Lemert, as used here the term deviant (or deviance) refers 1) to a person's deviation from prevalent or valued norms, 2) to which the community-at-large reacts negatively or punitively, 3) so as to then lead the person to define his situation largely in terms of this reaction. All three conditions must be fulfilled for it to be said that deviance exists (secondary deviation, in Lemert's definition). In this sense the Negro, the career woman, the criminal, the Communist, the physically handicapped, the mentally ill, the homosexual, to mention but a few, are all deviants, albeit in different ways and with markedly different consequences for their life careers. Edwin M. Lemert, *Social Pathology,* New York: McGraw-Hill, 1951, 75-77.

[2] Comprehensive and excellent reviews are to be found in R. G. Barker et al., *Adjustment to Physical Handicap and Illness: A Survey of the Social Psychology of Physique and Disability,* New York: Soc. Sci. Res. Council, 1953, Bulletin 55, 2nd ed. and Beatrice A Wright, *Physical Disability, A Psychological Approach,* New York: Harper, 1960.

[3] Six were orthopedically handicapped, three blind and two facially disfigured. Additional detailed biographical and clinical materials were secured on one blind and four facially disfigured persons, making for a total of sixteen records.

[4] Throughout this paper, whether or not the term 'handicap' or 'handicapped' is joined by the qualifier 'visible,' it should be read in this way. Unfortunately, it will not be possible to discuss here that which sociologically distinguishes the situation of the visibly handicapped from that of persons whose physical handicaps are not visible or readily apparent, and how both differ from what is termed the 'sick role.' These are though important distinctions whose analysis might illuminate key questions in the study of deviance.

would to "just an ordinary man or woman." Frequently he will make *faux pas,* slips of the tongue, revealing gestures and inadvertent remarks which overtly betray this attitude and place the handicapped person in an even more delicate situation.[5] The triggering of such a chain of interpersonal incidents is more likely with new persons than with those with whom the handicapped have well-established and continuing relations. Hence, the focus here on more or less sociable occasions, it being these in which interactional discomfort is felt most acutely and coping behavior is brought into relief most sharply.

Because the visibly handicapped do not comprise a distinct minority group or subculture, the imputations of generalized deviance that they elicit from many normals are more nearly genuine interactional emergents than conventionalized sequelae to intergroup stereotyping as, for example, might obtain between a Negro and white. A sociable encounter between a visibly handicapped person and a normal is usually more subject to ambiguity and experimentation in role postures than would be the case were the parties perceived by each other primarily in terms of member group characteristics. The visibly handicapped person must with each new acquaintance explore the *possibilities* of a relationship. As a rule there is no ready-made symbolic shorthand (e.g., "a Southerner can't treat a Negro as a social equal," "the Irish are anti-Semitic," "working class people think intellectuals are effeminate") for anticipating the quality and degree

of acceptance to be accorded him. The exchange must be struck before its dangers and potentialities can be seen and before appropriate corrective maneuvers can be fed into the interaction.[6]

THE HANDICAP AS THREAT TO SOCIABLE INTERACTION

Before discussing how the visibly handicapped cope with difficult interaction, it is appropriate to first consider the general nature of the threat posed to the interactional situation *per se* as a result of their being perceived routinely (if not necessarily according to some prevalent stereotype) as "different," "odd," "estranged from the common run of humanity," etc.; in short, other than normal. (Achieving ease and naturalness of interaction with normals serves naturally as an important index to the handicapped person of the extent to which his preferred definition of self—i.e., that of someone who is merely different physically but not socially deviant—has been accepted. Symbolically, as long as the interaction remains stiff, strained or otherwise mired in inhibition, he has good reason to believe that he is in effect being denied the status of social normalcy he aspires to or regards as his due.) The threat posed by the handicap to sociability is, at minimum, fourfold: its tendency to become an exclusive focal point of the interaction, its potential for inundating expressive boundaries, its discordance with other attributes of the person and, finally, its ambiguity as a predicator of joint activity. These are not discrete entities in themselves as much as varying contextual emergents which, depending on the particular situation, serve singly or in combination to strain the framework of normative rules and assumptions in which sociability develops. Let us briefly consider each in turn.

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[5] In the sections that follow the discussion draws heavily on the framework of dramaturgic analysis developed by Erving Goffman. See especially his "Alienation from Interaction," *Human Relations,* 10 (1957), 47-60; "Embarrassment and Social Organization," *American Journal of Sociology,* 62 (November, 1956), 264-71; *Presentation of Self in Everyday Life,* New York: Doubleday and Co., Inc., 1959.

[6] Cf. Anselm Strauss, *Mirrors and Masks,* Glencoe, Ill.: Free Press, 1959, 31-43.

A Focal Point of Interaction

The rules of sociable interaction stipulate a certain generality and diffuseness in the attentions that parties are expected to direct to each other. Even if only superficially, one is expected to remain oriented to the whole person and to avoid the expression of a precipitous or fixed concern with any single attribute of his, however noteworthy or laudable it may be.[7] When meeting someone with a visible handicap, a number of perceptual and interpretative responses occur which make adherence to this rule tenuous for many. First, there is the matter of visibility as such. By definition, the visibly handicapped person cannot control his appearance sufficiently so that its striking particularity will not call a certain amount of concentrated attention to itself.[8] Second, the normal, while having his attention so narrowly channeled, is immediately constrained by the requirements of sociability to act as if he were oriented to the totality of the other rather than to that which is uppermost in his awareness, i.e., the handicap. Although the art of sociability may be said to thrive on a certain playful discrepancy between felt and expressed interests, it is perhaps equally true that when these are too discrepant strain and tension begin to undermine the interaction. (Conversely, when not discrepant enough, flatness and boredom frequently ensue.)[9] Whether the handicap is overtly and tactlessly responded to as such or, as is more commonly the case, no explicit reference is made to it, the underlying condition of heightened, narrowed, awareness causes the interaction to be articulated too exclusively in terms of it. This, as my informants described it, is usually accompanied by one or more of the familiar signs of discomfort and stickiness: the guarded references, the common everyday words suddenly made taboo, the fixed stare elsewhere, the artificial levity, the compulsive loquaciousness, the awkward solemnity.[10]

Second-order interactional elaborations of the underlying impedance are also not uncommon. Thus, for example, the normal may take great pains to disguise his awareness, an exertion that is usually so effortful and transparent that the handicapped person is then enjoined to disguise his awareness of the normal's disguise. In turn, the normal sensing the disguise erected in response to his disguise . . . and so forth. But unlike the infinitely multiplying reflections of an object located between opposing mirrors, this process cannot sustain itself for long without the pretense of unawareness collapsing, as witness the following report by a young woman:

> I get suspicious when somebody says, "Let's go for a uh, ah [imitates confused and halting speech] push with me down the hall," or something like that. This to me is suspicious because it means that they're aware, really aware, that there's a wheelchair here, and that this is probably uppermost with them. . . . A lot of people in trying to show you that they don't care that you're in a chair will do crazy things. Oh, there's one person I know who constantly kicks my chair, as if to say "I don't care that you're in a wheelchair. I don't even know that it's there." But that is just an indication that he *really* knows it's there.

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[7] Kurt H. Wolff, ed., *The Sociology of Georg Simmel,* Glencoe, Ill.: Free Press, 1950. 45-46.

[8] Cf. R. K. White, B. A. Wright and T. Dembo, "Studies in Adjustment to Visible Injuries," *Journal of Abnormal and Social Psychology,* 43 (1948), 13-28.

[9] In a forthcoming paper, "Fun in Games: An Analysis of the Dynamics of Social Interaction," Goffman discusses the relationship between spontaneous involvement in interaction and the manner in which "external attributes"—those which in a formal sense are not situationally relevant—are permitted to penetrate the situation's boundaries.

[10] Cf. Goffman on "other-consciousness" as a type of faulty interaction. "Alienation from Interaction," *op. cit.*

Inundating Potential

The expressive requirements of sociability are such that rather strict limits obtain with respect to the types and amount of emotional display that are deemed appropriate. Even such fitting expressions as gaiety and laughter can, we know, reach excess and lessen satisfaction with the occasion. For many normals, the problem of sustaining sociable relations with someone who is visibly handicapped is not wholly that of the discrepancy of the inner feeling evoked, e.g., pity, fear, repugnance, avoidance. As with much else in sociability, a mere discrepancy of the actor's inner state with the social expectation need not result in a disturbance of interaction. In this instance it is specifically the marked dissonance of such emotions with those outward expressions deemed *most* salient for the occasion (e.g., pleasure, identification, warm interest) that seems to result frequently in an inundation and enfeeblement of the expressive controls of the individual. With some persons, the felt intrusion of this kind of situationally inappropriate emotion is so swift and overwhelming as to approximate a state of shock, leaving them expressively naked, so to speak. A pointed incident is told by a young blind girl:

> One night when I was going to visit a friend two of the people from my office put me into a taxi. I could tell that at first the taxi driver didn't know I was blind because for a while there he was quite a conversationalist. Then he asked me what these sticks were for [a collapsible cane]. I told him it was a cane, and then he got so different. . . . He didn't talk about the same things that he did at first. Before this happened he joked and said, "Oh, you're a very quiet person. I don't like quiet people, they think too much." And he probably wouldn't have said that to me had he known I was blind because he'd be afraid of hurting my feelings. He didn't say anything like that afterwards.

The visibly handicapped are of course aware of this potential for inundating the expressive boundaries of situations and many take precautions to minimize such occurrences as much as possible. Thus, an interior decorator with a facial deformity would when admitted to a client's house by the maid station himself whenever he could so that the client's entrance would find him in a distantly direct line of vision from her. This, he stated, gave the client an opportunity to compose herself, as she might not be able to were she to come upon him at short range.

Contradiction of Attributes

Even when the inundating potential is well contained by the parties and the normal proves fully capable of responding in a more differentiated fashion to the variety of attributes presented by the handicapped person (e.g., his occupational identity, clothes, speech, intelligence, interests, etc.), there is frequently felt to be an unsettling discordance between these and the handicap. Sociable interaction is made more difficult as a result because many normals can only resolve the seeming incongruence by assimilating or subsuming (often in a patronizing or condescending way) the other attributes to that of the handicap, a phenomenon which in analogous connections has been well described by Hughes.[11] Thus, one informant, a strikingly attractive girl, reports that she frequently elicits from new acquaintances the comment, "How strange that someone so pretty should be in a wheelchair." Another informant, a professional worker for a government agency, tells of the fashionable female client who after having inquired on how long the informant had been in her job remarked, "How nice that you have something to do."

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[11] Everett C. Hughes, *Men and their work*. Glencoe, Ill.: Free Press, 1958, 102-06.

Because the art of sociability deigns this kind of reductionism of the person, expressions of this type, even when much less blatant, almost invariably cast a pall on the interaction and embarrass the recovery of smooth social posture. The general threat inherent in the perceived discordance of personal attributes is given pointed expression by still another informant, a paraplegic of upper middle class background who comments on the attitude of many persons in his class:

> Now, where this affects them, where this brace and a crutch would affect them, is if they are going someplace or if they are doing something, they feel that, first, you would call attention and, second— you wouldn't believe this but it's true; I'll use the cruelest words I can—no cripple could possibly be in their social stratum.

Ambiguous Predicator

Finally, to the extent to which sociability is furthered by the free and spontaneous initiation of joint activity (e.g., dancing, games, going out to eat; in short, "doing things") there is frequently considerable ambiguity as regards the ability of the handicapped person to so participate and as regards the propriety of efforts which seek to ascertain whether he wants to. For the normal who has had limited experience with the handicapped it is by no means always clear whether, for example, a blind person can be included in a theater party or a crippled person in a bowling game. Even if not able to engage in the projected activity as such, will he want to come along mainly for the sake of company? How may his preferences be gauged without, on the one hand, appearing to "make a thing" out of the proposal or, on the other, conveying the impression that his needs and limitations are not being sufficiently considered? Should he refuse, is it genuine or is he merely offering his hosts a polite, though half-hearted, out? And,

for each enigma thus posed for the normal, a counter-enigma is posed for the handicapped person. Do they really want him? Are they merely being polite? In spite of the open invitation, will his acceptance and presence lessen somehow their enjoyment of the activity? It is easy to see how a profusion of anticipatory ambiguities of this kind can strain the operative assumptions underlying sociable relations.

PROCESS OF DEVIANCE DISAVOWAL AND NORMALIZATION

The above features then, may be said to comprise the threat that a visible handicap poses to the framework of rules and assumptions that guide sociability. We may now ask how socially adept handicapped persons cope with it so as to either keep it at bay, dissipate it or lessen its impact upon the interaction. In answering this question we will not consider those broad personality adjustments of the person (e.g., aggression, denial, compensation, dissociation, etc.) which at a level once removed, so to speak, can be thought of as adaptive or maladaptive for, among other things, sociability. Nor, at the other extreme, is it possible in the allotted space to review the tremendous variety of specific approaches, ploys and stratagems that the visibly handicapped employ in social situations. Instead, the analysis will attempt to delineate in transactional terms the stages through which a sociable relationship with a normal typically passes, assuming, of course, that the confrontation takes place and that both parties possess sufficient social skill to sustain a more than momentary engagement.

For present purposes we shall designate these stages as: 1) fictional acceptance, 2) the facilitation of reciprocal role-taking around a normalized projection of self and 3) the institutionalization in the relationship of

a definition of self that is normal in its moral dimension, however qualified it may be with respect to its situational contexts. As we shall indicate, the unfolding of these stages comprises what may be thought of as a process of deviance disavowal or normalization,[12] depending on whether one views the process from the vantage point of the "deviant" actor or his alters.[13]

Fictional Acceptance

In Western society the overture phases of a sociable encounter are to a pronounced degree regulated by highly elastic fictions of equality and normalcy. In meeting those with whom we are neither close nor familiar, manners dictate that we refrain from remarking on or otherwise reacting too obviously to those aspects of their persons which in the privacy of our thoughts betoken important differences between ourselves. In America at least, these fictions tend to encompass sometimes marked divergencies in social status as well as a great variety of expressive styles; and, it is perhaps the extreme flexibility of such fictions in our culture rather than, as is mistakenly assumed by many foreign observers,

their absence that accounts for the seeming lack of punctiliousness in American manners. The point is nicely illustrated in the following news item:

NUDE TAKES A STROLL IN MIAMI

MIAMI, Fla., Nov. 13 (UPI)—A shapely brunette slowed traffic to a snail's pace here yesterday with a 20-minute nude stroll through downtown Miami. . . .
"The first thing I knew something was wrong," said Biscayne Bay bridgetender E. E. Currey, who was working at his post about one block away, "was when I saw traffic was going unusually slow."
Currey said he looked out and called police. They told him to stop the woman, he said.
Currey said he walked out of his little bridge house, approached the woman nervously, and asked, "Say, girl, are you lost?"
"Yes," she replied. "I'm looking for my hotel."
Currey offered help and asked, "Say, did you lose your clothes?"
"No," he said the woman replied, "Why?"
Currey said that he had to step away for a moment to raise the bridge for a ship and the woman walked away. . . .[14]

Unlike earlier societies and some present day ones in which a visible handicap automatically relegates the person to a caste-like, inferior, status like that of mendicant, clown or thief —or more rarely to an elevated one like that of oracle or healer—in our society the visibly handicapped are customarily accorded, save by children,[15] the surface acceptance that

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[12] As used here the term 'normalization' denotes a process whereby alter for whatever reason comes to view as normal and morally acceptable that which initially strikes him as odd, unnatural, "crazy," deviant, etc., irrespective of whether his perception was in the first instance reasonable, accurate or justifiable. Cf. Charlotte G. Schwartz, "Perspectives on Deviance— Wives' Definitions of their Husbands' Mental Illness," Psychiatry, 20 (August, 1957), 275-91.

[13] Because of the paper's focus on the visibly handicapped person, in what follows his interactional work is highlighted to the relative glossing over of that of the normal. Actually, the work of normalization calls for perhaps as much empathic expenditure as that of deviance disavowal and is, obviously, fully as essential for repairing the interactional breach occasioned by the encounter.

[14] San Francisco Chronicle, November 14, 1960.

[15] The blunt questions and stares of small children are typically of the 'Emperor's Clothes' variety. "Mister, why is your face like that?" "Lady, what are you riding around in that for? Can't you walk?" Nearly all of my informants spoke of how unnerving such incidents were for them, particularly when other adults were present. None the less, some claimed to value the child's forthrightness a good deal more than they did the genteel hypocrisy of many adults.

democratic manners guarantee to near-
ly all. But, as regards sociability, this
proves a mixed blessing for many.
Although the polite fictions do afford
certain entrée rights, as fictions they
can too easily come to serve as sub-
stitutes for "the real thing" in the
minds of their perpetrators. The in-
teraction is kept starved at a bare sub-
sistence level of sociability. As with
the poor relation at the wedding party,
so the reception given the handicapped
person in many social situations: suffi-
cient that he is here, he should not ex-
pect to dance with the bride.

At this stage of the encounter, the
interactional problem confronting the
visibly handicapped person is the deli-
cate one of not permitting his identity
to be circumscribed by the fiction
while at the same time playing along
with it and showing appropriate re-
gard for its social legitimacy. For, as
transparent and confining as the fiction
is, it frequently is the only basis upon
which the contact can develop into
something more genuinely sociable. In
those instances in which the normal
fails or refuses to render even so small
a gesture toward normalizing the situ-
ation, there exists almost no basis for
the handicapped person to successfully
disavow his deviance.[16] The following
occurrence related by a young female
informant is an apt, if somewhat ex-
treme, illustration:

> I was visiting my girl friend's house and
> I was sitting in the lobby waiting for
> her when this woman comes out of her
> apartment and starts asking me questions.
> She just walked right up. I didn't know
> her from Adam, I never saw her before
> in my life. "Gee, what do you have?
> How long have you been that way? Oh
> gee, that's terrible." And so I answered
> her questions, but I got very annoyed
> and wanted to say, "Lady, mind your
> own business."

*"Breaking Through"—Facilitating
Normalized Role-Taking*

In moving beyond fictional accept-
ance what takes place essentially is a
redefinitional process in which the
handicapped person projects images,
attitudes and concepts of self which
encourage the normal to identify with
him (i.e., "take his role") in terms
other than those associated with im-
putations of deviance.[17] Coincidentally,
in broadening the area of minor verbal
involvements, this also functions to
drain away some of the stifling burden
of unspoken awareness that, as we
have seen, so taxes ease of interaction.
The normal is cued into a larger reper-
toire of appropriate responses, and
even when making what he, perhaps
mistakenly, regards as an inappropriate
response (for example, catching him-
self in the use of such a word as
cripple or blind) the handicapped
person can by his response relieve him
of his embarrassment. One young in-
formant insightfully termed the proc-
ess "breaking through":

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[16] On the other side of the coin there
are of course some handicapped persons
who are equally given to undermining
sociable relations by intentionally flaunting
the handicap so that the fiction becomes
extremely difficult to sustain. An equiva-
lent of the "bad nigger" type described
by Strong, such persons were (as in
Strong's study) regarded with a mixture
of admiration and censure by a number of
my informants. Admiration, because the
cruel stripping away of pretenses and forc-
ing of issues was thought morally refresh-
ing, especially since, as the informants
themselves recognized, many normals re-
fuse to grant anything more than fictional
acceptance while at the same time imagin-
ing themselves ennobled for having made
the small sacrifice. Censure, because of the
conviction that such behavior could hardly
improve matters in the long run and would
make acceptance even more difficult for
other handicapped persons who later came
into contact with a normal who had re-
ceived such treatment. Cf. Samuel M.
Strong, "Negro-White Relations as Re-
flected in Social Types," *American Journal
of Sociology*, 52 (July, 1946), p. 24.

[17] George H. Mead, *Mind, Self and So-
ciety*, Chicago: University of Chicago Press,
1934. See also the discussion on inter-
action in Strauss, *op. cit.*, 44-88.

The first reaction a normal individual or good-legger has is, "Oh gee, there's a fellow in a wheelchair," or "there's a fellow with a brace." And they don't say, "Oh gee, there is so-and-so, he's handsome" or "he's intelligent," or "he's a boor," or what have you. And then as the relationship develops they don't see the handicap. It doesn't exist any more. And that's the point that you as a handicapped individual become sensitive to. You know after talking with someone for awhile when they don't see the handicap any more. That's when you've broken through.

What this process signifies from a social psychological standpoint is that as the handicapped person expands the interactional nexus he simultaneously disavows the deviancy latent in his status; concurrently, to the degree to which the normal is led to reciprocally assume the redefining (and perhaps unanticipated) self-attitudes proffered by the handicapped person, he comes to normalize (i.e., view as more like himself) those aspects of the other which at first connoted deviance for him. (Sometimes, as we shall see, the normal's normalizing is so complete that it is unwittingly applied to situations in which the handicapped person cannot possibly function "normally" due to sheer physical limitations.) These dynamics might also be termed a process of identification. The term is immaterial, except that in "identifying" or "taking the role of the other" much more is implicated sociologically than a mere subjective congruence of responses. The fashioning of shared perspectives also implies a progressively more binding legitimation of the altered self-representations enacted in the encounter; that is, having once normalized his perception of the handicapped person, it becomes increasingly more compromising—self-discrediting, as it were—for the normal to revert to treating him as a deviant again.

The ways in which the visibly handicapped person can go about disavowing deviance are, as we have stated,

many and varied. These range from relatively straightforward conversational offerings in which he alludes in passing to his involvement in a normal round of activities, to such forms of indirection as interjecting taboo or privatized references by way of letting the normal know that he does not take offense at the latter's uneasiness or regard it as a fixed obstacle toward achieving rapport. In the above quote, for example, the informant speaks of "good-leggers," an in-group term from his rehabilitation hospital days, which along with "dirty normals" he sometimes uses with new acquaintances "because it has a humorous connotation . . . and lots of times it puts people at their ease."[18]

Still other approaches to disavowing deviance and bridging fictional acceptance include: an especially attentive and sympathetic stance with respect to topics introduced by the normal, showing oneself to be a comic, wit or other kind of gifted participant, and, for some, utilizing the normalization potential inherent in being seen in the company of a highly presentable normal companion.[19] These, and others too numerous to mention, are not of course invariably or equally successful in all cases; neither are such resources equally available to all handicapped persons, nor are the handicapped equally adept at exploiting them. As a class of corrective strategies however, they have the common aim of overcoming the interactional barrier that lies be-

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[18] Parallel instances can easily be cited from minority group relations as, for example, when a Jew in conversation with a non-Jew might introduce a Yiddish phrase by way of suggesting that the other's covert identification of him as a Jew need not inhibit the interaction unduly. In some situations this serves as a subtle means of declaring, "O.K., I know what's bothering you. Now that I've said it, let's forget about it and move on to something else."

[19] Alan G. Gowman, "Blindness and the Role of the Companion," *Social Problems*, 4 (July, 1956).

tween narrow fictional acceptance and more spontaneous forms of relatedness.

Inextricably tied in with the matter of approach are considerations of setting, activity and social category of participants, certain constellations of which are generally regarded as favorable for successful deviance disavowal and normalization while others are thought unfavorable. Again, the ruling contingencies appear to be the extent to which the situation is seen as containing elements in it which: 1) contextually reduce the threat posed by the visible handicap to the rules and assumptions of the particular sociable occasion, and 2) afford the handicapped p e r s o n opportunities for "breaking through" beyond fictional acceptance.

The relevance of one or both of these is apparent in the following social situations and settings about which my informants expressed considerable agreement as regards their preferences, aversions and inner reactions. To begin with, mention might again be made of the interactional rule violations frequently experienced at the hands of small children. Many of the informants were quite open in stating that a small child at a social occasion caused them much uneasiness and cramped their style because they were concerned with how, with other adults present, they would handle some bare-faced question from the child. Another category of persons with whom many claimed to have difficulty is the elderly. Here the problem was felt to be the tendency of old people to indulge in patronizing sympathy, an attitude which peculiarly resists re-definition because of the fulsome virtue it attributes to itself. In another context several of the informants laid great stress on the importance of maintaining a calm exterior whenever the physical setting unavoidably exposed them to considerable bodily awkwardness. (At the same time, of course, they

spoke of the wisdom of avoiding, whenever possible, such occasions altogether.) Their attitude was that to expressively reflect gracelessness and a loss of control would result in further interactional obstacles toward assimilating the handicapped person to a normal status.

> It makes me uncomfortable to watch anyone struggling, so I try to do what I must as inconspicuously as possible. In new situations or in strange places, even though I may be very anxious, I will maintain a deadly calm. For example, if people have to lift the chair and I'm scared that they are going to do it wrong, I remain perfectly calm and am very direct in the instructions I give.

As a final example, there is the unanimity with which the informants expressed a strong preference for the small, as against the large or semi-public social gathering. Not only do they believe that, as one handicapped person among the non-handicapped, they stand out more at large social gatherings, but also that in the anonymity which numbers further there resides a heightened structural tendency for normals to practice avoidance relations with them. The easy assumption on such occasions is that "some other good soul" will take responsibility for socializing with the handicapped person. Even in the case of the handicapped person who is forward and quite prepared to take the initiative in talking to others, the organization and ecology of the large social gathering is usually such as to frustrate his attempts to achieve a natural, non-deviant, place for himself in the group. As one young man, a paraplegic, explained:

> The large social gathering presents a special problem. It's a matter of repetition. When you're in a very large group of people whom you don't know, you don't have an opportunity of talking to three, four or five at a time. Maybe you'll talk to one or two usually. After you've gone through a whole basic break-

down in making a relationship with one —after all, it's only a cocktail party— to do it again, and again, and again, it's wearing and it's no good. You don't get the opportunity to really develop something.

Institutionalization of the Normalized Relationship

In "breaking through" many of the handicapped are confronted by a delicate paradox, particularly in those of their relationships which continue beyond the immediate occasion. Having disavowed deviance and induced the other to respond to him as he would to a normal, the problem then becomes one of sustaining the normalized definition in the face of the many small amendments and qualifications that must frequently be made to it. The person confined to a wheelchair, for example, must brief a new acquaintance on what to do and how to help when they come to stairs, doorways, vehicle entrances, etc. Further briefings and rehearsals may be required for social obstructions as well: for example, how to act in an encounter with —to cite some typical situations at random—an overly helpful person, a waitress who communicates to the handicapped person only through his companion, a person who stares in morbid fascination.[20]

Generally, such amendments and special considerations are as much as possible underplayed in the early stages of the relationship because, as in the case of much minority group protest, the fundamental demand of the handicapped is that they first be granted an irreducibly equal and normal status, it being only then regarded as fitting and safe to admit to certain incidental incapacities, limitations and needs. At some point however, the latter must be broached if the relationship to the normal is to endure in viable form. But to integrate effectively a major claim to "normalcy" with numerous

minor waivers of the same claim is a tricky feat and one which exposes the relationship to the many situational and psychic hazards of apparent duplicity: the tension of transferring the special arrangements and understandings worked out between the two to situations and settings in which everyone else is "behaving normally"; the sometimes lurking suspicion of the one that it is only guilt or pity that cements the relationship, of the other that the infirmity is being used exploitatively, and of on-lookers that there is something "neurotic" and "unhealthy" about it all.[21]

From my informants' descriptions it appears that this third, "normal, but . . ." stage of the relationship, if it endures, is institutionalized mainly in either one of two ways. In the first, the normal normalizes his perceptions to such an extent as to suppress his effective awareness of many of the areas in which the handicapped person's behavior unavoidably deviates from the normal standard. In this connection several of the informants complained that a recurring problem they have with close friends is that the latter frequently overlook the fact of the handicap and the restrictions it imposes on them. The friends thoughtlessly make arrangements and involve them in activities in which they, the handicapped, cannot participate conveniently or comfortably.

The other major direction in which the relationship is sometimes institu-

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[20] Ibid.

[21] The rhetoric of race relations reflects almost identical rationalizations and "insights" which are meant among other things to serve as cautions for would-be transgressors. "Personally I have nothing against Negroes [the handicapped], but it would be bad for my reputation if I were seen socializing with them." "She acts nice now, but with the first argument she'll call you a dirty Jew [good-for-nothing cripple]." "Regardless of how sympathetic you are toward Negroes [the disabled], the way society feels about them you'd have to be a masochist to marry one."

tionalized is for the normal to surrender some of his normalcy by joining the handicapped person in a marginal, half-alienated, half-tolerant, outsider's orientation to "the Philistine world of normals."[22] Gowman[23] nicely describes the tenor and style of this relationship and its possibilities for sharply disabusing normals of their stereotyped approaches to the handicapped. *Épater le bourgeois* behavior is often prominently associated with it, as is a certain strictly in-group license to lampoon and mock the handicap in a way which would be regarded as highly offensive were it to come from an uninitiated normal. Thus, a blind girl relates how a sighted friend sometimes chides her by calling her "a silly blink." A paraplegic tells of the old friend who tries to revive his flagging spirits by telling him not to act "like a helpless cripple." Unlike that based on over-normalization, the peculiar strength of this relationship is perhaps its very capacity to give expressive scope to the negative reality of the larger world of which it is inescapably a part while simultaneously removing itself from a primary identification with it.

IMPLICATIONS

Two, more general, implications seem worth drawing from this analysis.[24]

First, in studies which trace the process wherein an actor who deviates comes to be increasingly defined as a deviant (e.g., the pre-mental patient, the pre-alcoholic, the pre-juvenile delinquent), unusual prominence is giv-

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[22] Students of race relations will recognize in this a phenomenon closely akin to "inverse passing" as when a white becomes closely identified with Negroes and passes into a Negro subculture.

[23] Gowman, *op. cit.*

[24] I am indebted to Sheldon Messinger for his valuable comments in these connections.

en to the normalizing behavior of those close to him (spouse, parents, friends, etc.). The picture that emerges is one of these persons assuming nearly the whole burden—by rationalizing, denying and overlooking his offensive acts—of attempting to re-establish a socially acceptable relationship with him. He is depicted typically as compulsively wedded to his deviance and incapable or uninterested in making restitutive efforts of his own. Finally, following some critical act of his, normalization fails *in toto* and community agencies are called in to relieve the primary group of its unmanageable burden.

There is much about this picture that is doubtlessly true and consonant with the ascertainable facts as we later come to learn of them from family, friends, police, courts and social agencies. We may question, however, whether it is a wholly balanced picture and whether, given the situational biases of these informational sources, all of the relevant facts have had an equal chance to surface. The perspective developed here suggests that it may be useful to consider whether, and to what extent, the deviator himself is not also engaged, albeit ineffectively, in somehow trying to sustain a normal definition of his person. Were research to indicate that such is the case, we might then ask what it is about his reparative efforts and the situations in which they occur that, as contrasted with the subjects of this study, so often lead to failure and an exacerbation of the troublesome behavior. (We probably will never know, except inferentially by gross extrapolation, of the possibly many cases in which some such interactive process succeeds in favorably resolving the deviating behavior.) In other words, as against the simplistic model of a compulsive deviant and a futile normalizer we would propose one in which it is postulated that both are

likely to become engaged in making corrective interactional efforts toward healing the breach. And, when such efforts fail, as they frequently do, it is as important in accounting for the failure to weigh the interactional dynamics and situational contexts of these efforts as it is the nature of the deviant acts and the actor.

Second, we would note that the interactional problems of the visibly handicapped are not so dissimilar from those which all of us confront, if only now and then and to a lesser degree. We too on occasion find ourselves in situations in which some uncamouflageable attribute of ours jars the activity and the expectations of our company. We too, if we wish to sustain—and, as is typically the case, our company wishes us to sustain—a fitting and valued representation of ourselves, will tacitly begin to explore with them ways of redressing, insulating and separating the discrepant attribute from ourselves.[25] Our predicament though is much less charged with awareness, more easily set to rights, than that of the visibly handicapped person and his company. But it is precisely this exaggeration of a common interactional predicament that affords us an added insight into the prerequisites and unwitting assumptions of sociable behavior in general. Put differently, it can be said that our understanding of a mechanism is often crude and incomplete until it breaks down and we try to repair it. Breakdown and repair of interaction is what many of the visibly handicapped experience constantly in their lives. In studying this with them we are also studying much about ourselves of which we were heretofore unaware.

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[25] Goffman, "Embarrassment and Social Organization," *op. cit.*

THE CYCLE OF ABSTINENCE AND RELAPSE AMONG HEROIN ADDICTS*

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Those who study persons addicted to opium and its derivatives are confronted by the following paradox: A cure from physiological dependence on opiates may be secured within a relatively short period, and carefully controlled studies indicate that use of these drugs does not cause psychosis, organic intellectual deterioration, or any permanent impairment of intellectual function.[1] But, despite these facts, addicts display a high rate of recidivism. On the other hand, while the rate of recidivism is high, addicts continually and repeatedly seek cure. It is difficult to obtain definitive data

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[1] See as examples: C. Knight Aldrich, "The Relationship of the Concept Formation Test to Drug Addiction and Intelligence," *Journal of Nervous and Mental Diseases,* 100 (July, 1944), pp. 30-34; Margaret E. Hall, "Mental and Physical Efficiency of Women Drug Addicts," *Journal of Abnormal and Social Psychology,* 33 (July, 1938), pp. 332-345; A. Z. Pfeffer and Dorothy Cleck, "Chronic Psychoses and Addiction to Morphine," *Archives of Neurology and Psychiatry,* 56 (December, 1946), pp. 665-672.