

THE DISABLED AND THEIR EVERYDAY LIFE EXPERINCES IN IRANIAN CULTURE

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—Abstract —

Like the disabled in other cultures, Iranian disabled confront numerous difficulties in their everyday life. They are constantly rejected in different fields of social life by Iranian culture, and as a result Iranian disabled find themselves in an inappropriate cultural /social circumstance. This research is focused on Iranian disabled and host culture in one of northern Iranian provinces, Gilan (Rasht city) to explain living experiences of Iranian disabled as abandoned individuals in Iranian culture. This research's theoretical approach is Erving Goffman's "Stigma" theory applied on eight disables. Samples included four men and four women, single and aged from 28 to 45. They were exposed to be stigmatized for their physical disabilities. In this study "Autobiography" method has been used to give samples chance of speaking about themselves and their experiences in their everyday life. The participants have been profoundly interviewed. Results demonstrated that Iranian culture has patriarchal characteristics and that is why the patriarchal culture plays a key role in defining disabled by the society and by

themselves. The presence of patriarchal characteristics of host culture shows itself as impassable obstacles concerning work and marriage in host society. These obstacles are constantly constructed through media and social stigmatizing actions (labeling, joshing, gagging, fooling, piteous looking and talking) as well as objective factors (particularly physical obstacles of disabled participation in their social everyday life) which contributes to perceiving "Otherness" by Iranian disabled.

Key Words: *The disabled, Stigma, Social Construction of Disability, Iranian Patriarchal Culture, Experience of Disability,*

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1. INTRODUCTION

Although most of people consider the disabled as secondary citizen and usually neglect them in daily communications, they cannot be ignored in societies. Negative attitudes toward disability and lack of people's awareness of the disabled's capabilities are important factors which hinder their social interactions. Pitying look, supportive behaviors and peripheral vision intervene their active presence in the society.

Disability is related to two concepts of "identity" and "stigma". Social stigma is defined as a socially constructed phenomenon that may serve as a constant reminder to persons with visible disabilities that society views them as "different" and devalues them as a result (Phemister and Crewe, 2004:33).

This research examined 8 physically disables who were frequently in danger of stigmatization due to their visible disabilities. In other words, disability is always the center of attention in every interaction which leads to anger, disillusion, and embarrassment most of the time.

In social interactions, not only the disabled have to pay penalty for their own physical limitations (blindness, deafness, and lameness) but also they have to overcome special "social barriers". As it was mentioned previously, embarrassment is one of the barriers the disables experience in their interaction with healthy people. Feeling of embarrassment in society may cause attitudinal, emotional and behavioral expectations of both healthy person and the disabled. For example, Kelck, Ono and Hastorf (Kelck et al, 1966 as cited in susman, 1994: 17), find that people who are interacting with disabled person show less

variability in behavior and prefer more personal space. In other words, certain conditions negatively may create tainted and discounted identities for affected individuals and their families (Ablon, 2002:S2). For example, they are not often qualified for important positions in their own societies; they are rarely accepted for political positions and responsibilities which need decision making. This research aims at describing the disabled's experiences of disabilities and stigmatizations in their daily communications in Iran.

2. RESEARCH QUESTIONS AND PURPOSES OF THE STUDY

Several questions are going to be investigated in present study, such as;
To what extent does disability cause stigmatization in the disabled's social communications?

What does disability mean for the disabled and how does it stigmatize their identity?

What are healthy people's attitudes and behaviors toward the disabled?

Which labels are used for the disabled?

Through describing participants' experiences, the study tries to enhance our understanding of the disabled's world and investigate the disability's effect on their communications with the healthy people. Having used the descriptive analysis of the participants, we are going to investigate the effects of the stigmatization on opportunities, labels, attitudes and reactions of the society toward the disabled.

3. THEORETICAL APPROACH

The theoretical approach of the present study is based on the "Goffman's stigma theory" (Goffman,1963). Goffman provided one of the earliest and most notable psychological perspectives on physical disability. Goffman built his theoretical discussion around the concept of stigma that he defined as "an attribute that is deeply discrediting". According to stigma theory, when a person with a physical disability meets a stranger, the stranger immediately becomes aware of the person's 'discrediting attribute', i.e. physical impairment. The impairment results in 'stigma', and the stranger makes many other attributions about the person based on perceived attribute. Therefore, the disabled is considered unattractive, impotent, asexual, welfare payment receiver or of low intelligence. The person

may be immediately discounted as possible lover or friend. Hence, the disability becomes an all-permeating, overwhelming classification that obscures all other personal characteristics scales and abilities (Dovey and Graffam, 1994; Lawrence, 1991; Stone, 1995). As Thomson contended "Stigma theory reminds us that the problems we confront are not disability, ethnicity, race, class, homosexuality, or gender; they are instead inequalities, negative attitudes, misrepresentations, and institutional practices that result from the process of stigmatization" (Thomson, 1997:32). In addition, society's scapegoats are perhaps only the unfortunate groups used to rationalize, externalize, and give a face internal fears and insecurities (King, 2004:18).

4. METHOD

This study used deep interview to get the disabled's experiences and attitudes towards their own disabilities, their effects on their lives and elicit meaning of the disabilities directly from the interviewees. So 8 physically disabled persons (4 females and 4 males) who were living in Rasht were invited to the interview and asked to talk about their own experiences of disabilities. The interview was free and normative. In other words, the interviewees were free to speak about themselves. Questions were open-ended and sometimes they were forced or encouraged to answer the questions.

Table 1. Descriptive information of volunteered interviewees

Participants	Gender	Age	Marital status	Disability	Education
Fatemeh	F	31	Single	Infantile paralysis	High school degree
Hassan	M	29	Single	Infantile paralysis (Wheelchair)	Associate degree
Mariam	F	34	Single	Infantile paralysis	B.S.
Ali	M	30	Single	Myopathy	B.S.
Morteza	M	28	Single	Myopathy (Wheelchair)	University student
Rose	F	35	Single	Infantile paralysis	Diploma
Zahra	F	45	Single	Myopathy	B.S.
Mohsen	M	28	Single	Cerebral palsy	Diploma

The criterion which was considered in selecting the interviewees was visible disabilities which were eye-catching at first glance. The interviewees were ranged from 28 to 45. Four of them were infantile paralysis, two were using stick and one was on wheelchair. There were three myopathies, one was using the wheelchair, too. Last but not least was a cerebral palsy person. Only one of them had permanent job, the rest of the interviewees were unemployed. They were receiving low incomes by their own personal skills. Table 1 shows all information about the interviewees. The names are chosen by the researcher to keep the interviewees' identity secret.

5. RESULTS

First, objective effects of disability on job and marriage analyzed. Then, social factors caused stigmatization, identity destruction and disillusionment were analyzed. The factors are labels, pity (piteous look & talks) and stares.

The interviewees reported that people use different types of discriminations and wrong prejudgments. They were not satisfied with the society because they believed that society disregards them in different important positions, never give them opportunities, and society has negative attitudes toward the disabled. So impaired people take them into account as devalued and disable persons. In other words, wrong believes and values move the disabled towards exclusion from the society. The reports were in line with the findings of Erving Goffman (Goffman, 1963:34-35). Job and marriage, two important social contexts which are affected by the social factors, i.e. labels, pity and stares, are described as the following.

5.1. Job

Interviewees indicated that negative attitudes toward disability caused some serious problems in getting job, as one of the vital aspects of everybody's life. So according to the interviewees' remarks, their disability is more noticeable than their abilities. They are considered as devalued and disabled by the healthy persons. As a result, they cannot get jobs. The interviewees were unhappy due to degradation.

Mariam: My field of study is English translation. I went to radio and television station but I couldn't get a job there. I talked on telephone with their managers.

When I talked to them face to face, they said me they don't need translator now. I think that the rejection was because of my disability.

Ali: One of the employers promised me a job. Whenever he saw me he said me I'll call you as soon as possible. To tell the truth, for two months, he repeated the same words. Finally, he told "I'm so sorry". It was a sudden shake to me. I got so disappointed.

5.2. Marriage

Another objective consequence of stigma is marriage opportunities reduction. Like job, there are negative attitudes towards the disabled which take away the chance of independent life. The results of interviews showed that marriage and independent life is very important for the disabled. Most of the interviewees expect a very simple life. It worth to mention here that although the disabled come to an agreement to marry with each other, their families and relatives viewpoints about them prohibit their marriage decision. In this case, ideas of the family members are very important. Overall, all interviewees were single and came to this conclusion that they cannot get marry because of their disability, so they were hopeless about future marital status.

Mariam: When there is a proposer, he says no because of my disability. This Nowruz Holiday, a man introduced his friend as a proposer. We talked with each other. He accepted me as his wife. When he talked to his family, he said "sorry, my mother and sister disagree strongly about my marriage, and to tell the truth, I can't marry you because of my family, I couldn't argue with my family. I'm afraid not".

Rose: Disability hinders our marriage; we can't marry with our beloved. I really want to have a baby. My younger sisters got married and had children, they grew up their children. I feel loneliness. I'm in an emotional vacuum.

5.3. Labeling social factors

The interview analysis showed that the disabled confront various labels in society which refer to different levels of insult. Offensive words such as lame, incapable, **disable**, etc., and occasionally, joshing are common words which are used by some healthy persons without considering psychological and social impacts on

the disabled. That's why the disabled think that they are not accepted by the healthy persons.

Hassan: Once, I was standing in a telephone kiosk and talking. A man came to me and said "hang up; I want to make a phone call". I replied "I've recently called but I'll hang up soon". After a few seconds, he came and said **god knows and creates you disable!** He said and went. I faced the same cases a lot. Such words offend the disabled.

Morteza: This happened to me in my early teens, 14 years old. When I was healthy, I was so active. But as I get older, I was limited in some affairs and I feel disappointed. Some were joshing because I was walking on one of my feet's five toes and people said "**you're lame!**"! I was playing football very well previously. After the disease, I was running weakly in comparison with my friends. People were joshing my running. I couldn't walk so. I feel ashamed. Then, I played football a few times. That is, joshing affected on me a lot.

5.4. Pity (piteous look and talk)

The results showed that although helping the disabled can be motivated as being a service or duty, it is considered by the disabled as humiliation. Such interpretation may reduce dependency and confidence of the disabled, also develop feeling of incapability, dependability, and anger. Therefore, unnecessary and piteous helping may cause the feeling of incapability and humiliation. Most of the time, unnecessary piteous helps from the side of the family and relatives cause the disabled to feel devalued and incapable.

Fateme: Once I was in a post office. A woman said to her friend "**oh, what a pity! Look, she is so pretty!**". I got so sad. I don't like piteous look and talk. I really don't like somebody feels so to me.

Hassan: At first, I was ashamed. When I was in the street, people were saying, **pity**. They were looking at me. A couple was crossing a street and saw me said to each other **what a pity!** I got ashamed when I heard their sigh. I can realize looks precisely whether they are piteous or not.

Morteza: I can strongly say that from 10 women in the street, 9 say what a pity, or they sigh.

Mohsen: I don't like pity. I hate piteous look and talk. For example, **oh, pity! Why he is disable.** I hate. I don't except the people to feel pity for my disability or do something for me which I don't need it.

5.5. Staring

The under investigated interviewees reported that peoples' looks and staring bother them a lot in the society. They said that by the passage of time, they pay no attention to such looks. Nevertheless, most of the looks are bothersome and hinder their active participation in the society.

Hassan: people are looking at me strangely. Stares were not good for me at first. I felt ashamed. But it is common for me now. At first, I was asking myself "**why are they looking in this way, didn't they see human being, what's problem with me?**" What did they want to say me through looking? Maybe to remind me my disability. **In general, the disabled catch the attention of the people.**

Zahra: Well, some are highly cultured. I was wearing high heel from the beginning that's why it is common for me. I will fall down if I wear sneakers now. Generally, when women wear high heel, they seems strange. Maybe they catch the attentions. I am wearing high heel and walking strangely now, I mean I bend my waist a little which catches the attention. Earlier, children were following me in alley.

Ali: I didn't prefer to go out when I got diploma. I feel ashamed. People were looking at me. It was difficult for me. **The most bothering thing for me was the people's looks.** I was getting out slowly from cars. It was very difficult for me and pedestrian were looking. Some were saying piteous talks. It was very difficult and this was the reason of staying home. Even I didn't go to my family's house. I didn't like to go wedding and mourning ceremonies. My family went such places and I stayed home alone. The people's looks were annoying me a lot.

Fatemeh: Some have shocking looks. For example, once a couple was walking in the street. The man didn't pay attention to me. But the woman was pushing her husband to look at me.

6. CONCLUSION

The results showed that the disabled in Iran confront different labels and joshes during their lifelong. They have major problems in getting job and married due to strong negative and biological attitudes towards the disability. The internal feeling of the disabled is humiliation and embarrassment which force them to stay home rather than being in the society. Also, the findings indicated that the patriarchal values and norms effect differently on female and male disables. The female

disables face more obstacles than male in getting job and marrying. The females are joshed differently than males.

Furthermore, the interviews represents that disability is more of social than biological which produce or reproduce in interaction. Through which "the physically different persons" are labeled and labels change into stigmatization and then internalized and the physically different persons think of themselves as disabled. The findings showed that this social process in Iran like other societies is special and occurs based on the society's norms and values which itself proofs that disability is social not biological.

Having considered the findings of the present study, some guidelines can be suggested to improve the disabled lives which are similar to other guidelines in other societies. The guidelines are: improving the healthy people attitudes towards the disabled, trying to diffuse the social definition of disability instead of biological definition, reforming the laws and rules to facilitate the disabled's getting job and married and providing mutual relationship among the disabled against their separation from the healthy people.

BIBLIOGRAPHY

Ablon, Joan (2002), "The Nature of Stigma and Medical Condition", *Epilepsy & Behavior*, No. 3, pp. S2-S9.

Dovey, Kenneth A and Joseph H Graffam (1994), *The experience of disability: Social construction and imposed limitation*, Geelong: Deakin University Press.

Goffman Erving (1963), *Stigma: Notes on the Management of Spoiled Identity*, New York: Simon & Schuster.

King, James Michael (2004), *Dynamics of Concealed Disabilities among Students at a Major Research University in a Rural Area*, Unpublished PhD Dissertation, The faculty of the Virginia Polytechnic Institute and State University, Blacksburg, Virginia.

Kleck, Robert, Hiroshi Ono and Albert Hastorf (1966), "The effects of physical deviance upon face-to-face interaction", *Human Relations*, No.19, pp. 425-436.

Lawrence, Bryan (1991), "Self-concept formation and physical handicap: Some educational implication for integration", *Disability, Handicap and Society*, Vol. 6, No. 2, pp. 139-146.

Phemister, Andrew A and Nancy M Crewe (2004), “Objective Self-Awareness and Stigma: Implications for Persons with Visible Disabilities”, *Journal of Rehabilitation*, Vol. 70, No. 2, pp. 33-37.

Stone, Sharon Dale (1995), “The myth of bodily perfection”, *Disability and Society*, Vol. 10, No. 4, pp. 413–424.

Susman, Joan (1994), “Disability, Stigma and Deviance”, *Social Science and Medicine*, Vol. 38, No.1, pp. 15-22.

Thomson, Rosemarie Garland (1997), *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature*, New York: Columbia University Press.