

# Doors, Disability, and People

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October 30, 2013

## 1 Initial Experience of Disability

When newly disabled, I realized pretty quickly that most so-called “able-bodied” can’t handle other people’s disabilities, and need to be put at ease.<sup>1</sup> This has to be done with body language, because there isn’t time for words, and I didn’t have explanations anyway. Nevertheless, it seemed to me that there was not a problem of prejudice against people with disabilities (PWDs), in part because I had such grand help from friends and others around me. In later hindsight, both after reading Goffman’s *Stigma*<sup>2</sup> and after many encounters, I would have to say that perceptive as I was, I was still in denial about other people’s prejudices toward the disabled. Prejudice against those who use wheelchairs usually takes the form of “help,” i.e., “do-gooding,” especially when the “help” is forcible. It is the purpose of this essay to explore just how “help” is not help at all, but a form of discrimination instead.<sup>3</sup>

Doorways are where the problem appears most conspicuously. When I move to open a door for myself, all too often, a so-called “able-bodied” person (an AB) will try to open it for me, climb over me to get to it first, or just anticipate and hold it open for me. When I ask him not to, he may even say, “I insist.”

Chapter 3 of *Stigma* unpacks what is going on in these encounters.

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<sup>1</sup>I was disabled at age 27 with a T-12 spinal cord injury, low as cord injuries go, leaving me with full strength above the waist, but it put me in a wheelchair, a manual chair with some potential for athletic activity.

<sup>2</sup>Erving Goffman, *Stigma: notes on the management of spoiled identity*. New York: Simon and Schuster, 1963.

<sup>3</sup>The situation is somewhat complicated because there *is* sometimes genuine help, both needed and offered, and there are theoretical issues in philosophy and theology which we shall not deal with in this paper. But that does not lessen the discriminatory character of forcible “help.”

Some think members of a minority have an obligation to identify with that minority, a duty to be a disability-rights activist. Goffman calls this “in-group alignment.”<sup>4</sup> I was never much impressed. Goffman thinks there is pressure to identify with the in-group from within that in-group, but in my experience, that was not so: The in-group was other disabled trying to get on with their lives just as I was. Pressure came from the out-group, “normals,” who want me to identify with the disabled, and so not to pass as normal among the able-bodied.

It seemed better for me and for others to just get on with my life, and thereby demonstrate to disabled and “normals” alike that people in wheelchairs are capable of the same serious work as anybody else. Not many are capable of two earned doctorates, or publish books, even with marginal publishers. I would like to acknowledge the work of people far more disabled than I am in advancing accessibility for the disabled in America. My debt to them for accessibility is enormous.

Erving Goffman speaks of “normals” with some caution. It is his word for the non-stigmatized, and the meaning is both statistical (i.e., “typicals”) and normative (the reason for the stigma, after all). *Stigma*, pp. 114-123, outlines what stigmatized people have to put up with from “normals,” i. e., the “able-bodied”, and it shows with sociological precision how stigma is imposed and how it is nearly impossible to ignore it. My own experience is exemplary of this section of the book, probably because I am physically able enough to do most things for myself, but the social role prescribed for people in wheelchairs is that they should be dependent, and they do not have opinions that count. I run into this all the time, as examples will show. The problem is to get past the discomfort of normals around me, and to get access to social roles that I can easily fill.

Normals’ discomfort is the most obvious problem, and I figured it out early. The onus is placed on the PWD to consider ABs’ feelings first, and to order all his actions so as to protect the ABs from discomfort. After coming home from rehab, it became apparent quickly that the able-bodied are uncomfortable and don’t know what to do around people with disabilities. Doors are pivotal both practically, because they are the most frequent locus of problems, and theoretically, because they typify physically the social issue: access to roles and activities.

A door that I cannot open for myself is rare, but, to put it politely, many people assume that I need and want other people to open doors for me. There is a lot more than this happening in a door exchange, as we shall see. First, Goffman’s exposition, then my own experience and lastly some reflections on both.

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<sup>4</sup>Goffman, *Stigma*, pp. 112–114.

## 2 Goffman on how stigma works

From Goffman's argument I would extract three points:<sup>5</sup>

- (1) The PWD's first duty is to protect ABs from discomfort;
- (2) the PWD should know his place in society;
- (3) the PWD should *pretend* to be just like normals, but not ask to be allowed to do all that normals do.

(1) and (2) are the least surprising. (2) and (3) go together. (3) supports the first two, (1) above all: minimizing the discomfort of normals. (2) means that the PWD should submit to the limits imposed on the disabled by society.

The first thesis may seem surprising, that the PWD's first obligation is to ABs, and to safeguarding their comfort. It is borne out in the sequel, and it makes a certain kind of sense, if one notices that visible disability makes normals uncomfortable: I have a certain yuck factor in my appearance. I am medically unattractive to other people, whether I want to be or not. Goffman spells out the practical consequence explicitly:

The skills that the stigmatized individual acquires in dealing with a mixed social situation should be used to help the others in it (116).

This deserves some emphasis: the PWD's efforts *should be used to help the others*: i. e., the first concern of the PWD should be to make normals comfortable.

Normals really mean no harm; when they do, it is because they don't know better. They should therefore be tactfully helped to act nicely. Sights, snubs, and untactful remarks should not be answered in kind. Either no notice should be taken or the stigmatized individual should make an effort at sympathetic re-education of the normal, showing him, point for point, quietly, and with delicacy, that in spite of appearances the stigmatized individual is, underneath it all, a fully-human being.

... When the stigmatized person finds that normals have difficulty in ignoring his failing, he should try to help them and the social situation by conscious efforts to reduce tension (116).

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<sup>5</sup>Goffman, *Stigma*, pp. 114-123.

There are several examples of jokes as “ice-breakers” to get normals past their discomfort. Other techniques are possible, as Goffman notes: principally, by intimating that the PWD (in my case, me) is comfortable in his own disability, capable of dealing with it just as normals deal with engagements in their own lives.

The theme appears later also:

The stigmatized individual is also advised to act as if the efforts of normals to ease matters for him were effective and appreciated. Unsolicited offers of interest, sympathy, and help, although often perceived by the stigmatized as an encroachment on privacy and a presumption, are to be tactfully accepted (118)

Goffman quotes Finn Carling:

Yet, help is not only a problem to those who render it. If the cripple wants the ice to be broken, he must admit the value of help and allow people to give it to him. Innumerable times I have seen the fear and bewilderment in people’s eyes vanish as I have stretched out my hand for help, and I have felt life and warmth stream from the helping hands I have taken. We are not always aware of the help we may give by accepting aid, that in this way we may establish a foothold for contact.<sup>6</sup>

Goffman continues:

Although the tactful acceptance of clumsy efforts by others to help may be a burden to the stigmatized individual, more is asked of him.

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In brief, the stigmatized individual is advised to accept himself as a normal person because of what others can gain in this way, and hence likely he himself, during face-to-face interaction. The line inspired by normals, then, obliges the stigmatized individual to protect normals in various ways (119).

Again, the primary obligation of the stigmatized is to make normals feel comfortable and protect them from having to feel human “just like the disabled.”

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<sup>6</sup>Goffman, p. 118. He cites Finn Carling, *And Yet We Are Human* (London, Chatto and Windus, 1962), pp. 67–68. Carling, a Norwegian writer, had cerebral palsy, and wrote about many of the marginalized and stigmatized.

The second and third points that I would extract from Goffman's exposition are that the PWD (2) should know his place in society, not try to go beyond it, and yet (3) pretend that he is normal and so not limited in his social access. These support the first. The PWD is excluded from "places" where he would confront ABs too inescapably with his humanity and his disadvantage. The second works with the third point, that the PWD is to pretend to be normal, even though everybody knows he is not. Knowing one's place and pretending to be normal work together to support (1), the primacy of protecting the comfort of normals.

The pretence of normality, of non-disabledness, has an important function. It helps normals evade the challenge to see themselves in the PWD in front of them, a challenge most of us don't recognize and don't like.<sup>7</sup> It is both understood and covered up that this honorary "normal" status is conferred by true normals, not something PWDs have by right. It is at the pleasure of normals, putting the PWD at their disposal. It is also easily misunderstood:

Given the fact that normals in many situations extend a stigmatized person the courtesy of treating his defect as if it were of no concern, and that the stigmatized is likely to feel that underneath it all he is a normal human being like anyone else, the stigmatized can be expected to allow himself sometimes to be taken in and to believe that he is more accepted than he is. He will then attempt to participate socially in areas of contact which others feel are not his proper place.

Goffman quotes Carling, who spotted the phenomenon before the sociologists did:

But people do not only expect you to play your part; they also expect you to know your place. . . .<sup>8</sup>

Goffman continues:

That the stigmatized individual can be caught taking the tactful acceptance of himself too seriously indicates that this acceptance is conditional. It depends on normals not being pressed past the point at which they can easily extend acceptance — or, at worst, uneasily extend it. The stigmatized are tactfully expected to be gentlemanly and not to press their luck; They should not test the limits of the acceptance shown them, nor make it the basis for still further demands. Tolerance, of course, is usually part of a bargain (120–121).

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<sup>7</sup>Andrew Porter, *Unwelcome Good News* (Eugene: Wipf and Stock, 2004), section 7.2, "Sauce for the Goose," pp. 122–125, esp. 124.

<sup>8</sup>Goffman, p. 120. He cites Carling, p. 56.

Next comes the kicker:

The nature of a “good adjustment” is now apparent. It requires that the stigmatized individual cheerfully and unselfconsciously accept himself as essentially the same as normals, while at the same time he voluntarily withholds himself from those situations in which normals would find it difficult to give lip<sup>9</sup> service to their similar acceptance of him (121).

Since the good-adjustment line is presented by those who take the standpoint of the wider society, one should ask what the following of it by the stigmatized means to normals. It means that the unfairness and pain of having to carry a stigma<sup>10</sup> will never be presented to them; it means that normals will not have to admit to themselves how limited their tactfulness and tolerance is; and it means that normals can remain relatively uncontaminated by intimate contact with the stigmatized, relatively unthreatened in their identity beliefs. It is just from these meanings, in fact, that the specifications of a good adjustment derive (121).

Fair? Nothing in life is fair. But normals are implicitly asked to see themselves in the disabled, the less fortunate, and that means seeing themselves as dependent on grace, or perhaps, just as *dependent*. Normals who thought themselves entitled to their good health are shown by the presence of the disabled to be fortunate, beneficiaries of something they did not earn. This is the source of normals’ discomfort.

When a stigmatized person employs this stance of good adjustment he is often said to have a strong character or a deep philosophy of life, perhaps because in the back of our minds we normals want to find an explanation of his willingness to act this way (121).

Goffman pulls together the argument thus far:

The general formula is apparent. The stigmatized individual is asked to act so as to imply neither that his burden is heavy nor that bearing it has made him different from us; at the same time he must keep

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<sup>9</sup>I think the word “lip” is a mistake. Normals *do* give lip service to PWDs’ access to roles in society; They often find it uncomfortable to give *real* access to the disabled.

<sup>10</sup>Note added here: stigma, disability, or both?

himself at that remove from us which insures our painlessly being able to confirm this belief about him (122).

This brings us to a last point that I would hear in Goffman's exposition. The conditions of life for PWDs are set by ABs, and it's best to submit and get on with life. It's the best bargain possible under the circumstances.

Put differently, he is advised to reciprocate naturally with an acceptance of himself and us, an acceptance of him that we have not quite extended him in the first place. A *phantom acceptance* is thus allowed to provide the base for a *phantom normalcy* (122).

He continues shortly:

The irony of these recommendations is not that the stigmatized individual is asked to be patiently for others what they decline to let him be for them, but that this expropriation of his response may well be the best return he can get on his money (122).

Goffman's wording is remarkable: he says the normals *expropriate* the PWD's comportment, *forcibly interpreting it* as a good adjustment. We shall see that the PWD's actions are defined for him (i. e., against him), in ways he cannot escape.

If in fact he desires to live as much as possible "like any other person," and be accepted "for what he really is," then in many cases the shrewdest position for him to take is this one which has a false bottom; for in many cases the degree to which normals accept the stigmatized individual can be maximized by his acting with full spontaneity and naturalness as if the conditional acceptance of him, which he as careful not to overreach, is full acceptance (122–123).

He recaps:

Any mutual adjustment and mutual approval between two individuals can be fundamentally embarrassed if one of the partners accepts in full the offer that the other appears to make; every "positive" relationship is conducted under implied promises of consideration and aid such that the relationship would be injured were these credits actually drawn on (123).

Goffman's analysis is a good description of the phenomena, and it will turn out that there are reasons for the phenomena that go well beyond what he saw. In the meantime, my own experience confirms his description.

### 3 The lot of PWDs, in my own experience

There is a dual corroboration here: Incidents in this section will confirm that Goffman is right, and Goffman will objectivate (and so legitimate) PWDs' experience of their own place in society.<sup>11</sup> There are three sorts of encounters that exemplify the dynamics described above. An AB insists on holding a door for a PWD, an AB gives a gentle pat on the shoulder to the PWD, or an AB speaks to the PWD in patronizing and condescending terms. They are forcible help, unwanted "encouragement," and language imposed on PWDs that defines and limits their place in society.

A generic confrontation runs something like this. I am doing something for myself, quite well, and some AB do-gooder intrudes, and so I have to stop what I am doing and deal with his need to feel good about himself at my expense. When his need to relieve his discomfort and feel helpful has been taken care of, I can return to what I was doing before. The confrontation may be trying to get through a door, shopping for something in a store, getting into or out of my car, or almost any ordinary activity. Examples are most striking when they show that the real motive is the AB's discomfort precisely because help for the PWD is obviously not needed.

Once when I was about to exit from the earth sciences building at UC Berkeley, McCone Hall, as one approaches the entrance foyer, there is a 6-inch wide push plate for the electric door opener. I never use it, but simply open the door for myself. Two people of elderly student age (grad students?) came in the door, talking in conversation, and seeing me, one went out of his way to push the push-plate *for me* (and then they both went up the stairs in the foyer, without eye contact and without breaking stride), thereby betraying an assumption that a man in a wheelchair, a MANUAL wheelchair, and so presumably physically capable and athletic, still couldn't push the push-plate for himself. If challenged, the AB would doubtless have said something like the usual, "I was only trying to help."

But this is not credible in the circumstances: the push-plate was designed so even a quad in an electric could operate it. For a strong PWD in a manual chair, it was trivial. What was going on was discomfort in the presence of a man in a wheelchair — even the peripheral presence of such a person. The remedy or palliation for that discomfort was to "help." Such people cannot stand to be around themselves in the presence of a man in a wheelchair who is not being

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<sup>11</sup>My own experience is typical of paras, but not of quads, nor the blind or deaf or other PWDs. Despite those qualifications, paras' experience is remarkably close to what Goffman describes.



supervised by someone “able-bodied,” so they move in and take control, thereby alleviating their yuck-feelings in the presence of someone disabled. The presence of the PWD, especially a PWD doing something the AB thinks is difficult, puts the AB’s self-image in an intolerable light. The AB’s forcible “help” defines the PWD as one who “needs” help.

The experience is common. At a door with a push-panel for an automatic door-opener for PWDs, another person says, “Allow me,” and pushes the door-opener before I have a chance to say anything, despite the obvious fact that I can take care of myself quite well. Such people are uncomfortable in the presence of a man in a wheelchair, and relieve their discomfort by “helping” — in a kind of help that is completely unnecessary. The only conceivable reason why the AB would “help” a man in a wheelchair is Erving Goffman’s reason, that, thinking of himself as a “normal,” he was uncomfortable in the presence of a PWD.

In general, many ABs think that PWDs need to have doors held open for them. One wonders, do they think doors that open automatically for ABs won’t open just as automatically for PWDs? That explanation won’t wash, so it would appear that these ABs need to define the PWDs and their place in society, and force their (able-bodied) definition on the PWDs.

On some occasions, the AB feels the need to “help” but does not know what the PWD is in process of doing: A passer-by tries to close my car door when in fact I am getting out, not getting in.

Once in a grocery store, a lady asks as I am scanning shelves in vain for canned pumpkin, “can I reach something?” to which I said “Nope.” As she passes me several minutes later, with her back turned to me, she mutters in a bitter, spiteful tone of voice, “just tryin’ to be nice.” When I insist on doing for myself things that other people do for themselves, some people think I am an ungrateful lout. This woman did. Indeed, there is a small but numerous minority of the able-bodied who take offense when PWDs do things for themselves, unsupervised by ABs.

Again, looking for frozen okra, more than once I had to tell another shopper I didn’t want help and in the end said, “That’s three times I’ve said no.” The AB responded to the effect that I should be nicer about it. As Goffman observes, the primary duty of the PWD is to safeguard the feelings of ABs.

Once, approaching a UPS store to send some packages, another customer held the door and when I said I didn’t want help with the door, replied, “I insist.” When I protested again, I was informed that he had an older relative in a wheelchair and that he knew all about disability and wheelchairs. From his bitter resentful tone, I would wonder whether the older relative was guilty of emotional blackmail and manipulation that this young man couldn’t escape from, but that is just a question;

I do not have answers. When I refused to go through the door, his insistence hardened. In the end, I withdrew and went to FedEx instead.

Sometimes one encounters an adult training his child in discrimination against the disabled. Leaving a restaurant, as I came down a long ramp between the inner and outer doors, a man outside on a cell phone had evidently stationed his 7- or 8-year-old daughter to hold the door open for me. I mumbled something inaudible in protest but accepted it and went through, not wishing to make an issue of forcible “help” in that context. My lunch companion scolded me, “sometimes you’re too independent,” a word we return to in a moment. In this situation, the PWD can resist forcible “help” only at the cost of seeming impolite, even rude. But few instances of blackmail through the obligation of politeness can rival this one. Hiding behind one’s 8-year-old daughter is a stunning and breathtaking combination of cowardice and brazen bullying.

There are two other interaction rituals between ABs and PWDs that bear out Goffman’s sociology of stigma in the case of the disabled. One is physical, one appears in language.

People sometimes give another person a pat on the shoulder, but done to PWDs, this gesture has been poisoned by countless do-gooders, and it is no longer a gesture of fellowship but one of condescension. It is patronizing. The PWD is usually defenseless, unless unusually vigilant and adept at high-speed chair maneuvering to keep his shoulders out of reach of the AB.

In another situation, an AB will come up behind me and start to push, without even asking for permission. I can instantly pivot 180 degrees and face the person, with the words “Back off,” which usually produces a look of shocked horror. Once at a very classy sushi restaurant in San Francisco, the manager came up from behind me and began to do a lot more than just pats on the shoulder, though caressing might be too strong a word. I tried to fend him off, and he told me about his mother in a wheelchair, again apparently assuming that knowing a disabled relative entitles one to claim to know “all about” disability.

These rituals tell us something about how PWDs are seen by many ABs. In the view of do-gooders, the PWD has no personal boundaries, and needs no physical respect. The AB thinks he is entitled to act *in loco parentis* toward the PWD. In effect, the PWD can be treated as a minor child of about age 15, and it may safely be assumed that the PWD does not have skills, professional competence, knowledge or opinions worthy of consideration or respect.

This is borne out in language. Often a request for permission to help is made in language like, “Here, let me help you with that, Champ.” That is language one

would use toward a minor child, not to an adult, much less toward an *older* adult.

In a common word used of PWDs who refuse to fit this image, they are said to be very “independent,” sometimes “stubborn.” But why, please tell me why, in a door confrontation, when the AB *insists* on forcing unwanted “help” on the PWD, why is the PWD the one who gets called “stubborn” and “independent”? The word *independent* tells us something: these ABs expect PWDs to be the opposite of independent: dependent, docile, compliant, suggestible, not to think for themselves — to be people who can be pushed around just because they are on wheels.

All this has consequences. Goffman speaks of PWDs knowing their place in society and not trying to exceed it. In my teaching, I have dealt with many deans in many schools. In one, where I had occasionally taught pro bono for a few years, I went hat in hand to the dean, hoping to get even just the miserable pittance that adjuncts get. There was apparently no money; what I got (instead of even a compliment for my hermeneutics and scholarship) as I was backing out of the dean’s office, was just, “You’re good at that.” Not hermeneutics but the ability to back up without hitting the furniture; that exceeded even the low expectations of me, and I was not to exceed them further. Finn Carling knows the same phenomenon:

I also learned that the cripple must be careful not to act differently from what people expect him to do. Above all they expect the cripple to be crippled; to be disabled and helpless; to be inferior to themselves, and they will become suspicious and insecure if the cripple falls short of these expectations. It is rather strange, but the cripple has to play the part of the cripple.<sup>12</sup>

Hiring decisions turn on perceptions such as this.

Some inferences may be drawn. “I was just trying to help”? Not after being told No more than once. Unless it is an emergency, do nothing, say nothing, until asked to help. If you cannot contain your discomfort at the sight of a PWD, you should not, but may, ask — *once and only once* — whether the PWD wants help. If the answer is No, do not try to confirm the initial No. No means No: If you have to be told No more than once, what you are doing is no longer help, it is (at best) do-gooding, ego-gratification at the expense of a paraplegic, making yourself feel good at the expense of a paraplegic. Forcible “help” is neither help nor is it even

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<sup>12</sup>*And Yet We Are Human* p. 55; quoted also in Goffman, p. 110.

an *attempt* to help.<sup>13</sup> Forcible “help” is a dominance-submission ritual, in which the PWD is expected to submit, or else be considered “maladjusted,” of a “bad attitude,” or (politely) just stubborn and independent. The purpose of the ritual is to define social roles and a power relationship. The AB is the gatekeeper, the PWD is a guest rather than a full member of society. The AB is the host, supervising the PWD. The meaning of these rituals is simple. Doors are an access-control ritual, an AB-dominance ritual, defining the PWD as a guest and the AB as full member in society; the PWD comes and goes only with the “help” of the AB. The shoulder-pat is similarly a gesture of definition of the PWD’s place in society.

The word “independent” illustrates what Goffman calls the *expropriation* of the PWD’s comportment. Some things about human action should be borne in mind at this point.<sup>14</sup> In general, an act can mean (or just *be*) many things, many acts. Many acts are ambiguous. Which interpretation is meant comes out only in the responses to the act. In effect, responses disambiguate the act. When one party has more power than the other, disambiguation can be imposed by force: The PWD who lacks physical strength or verbal agility can have his own protests (“And yet we are human,” Carling), turned into confirmation of his differentness, his stigma, his dependent status. The PWD wants to be treated like everybody else, but the AB’s response turns that precisely into an asking for permission by the PWD and giving of permission *by the able-bodied*, who remain the gatekeepers of society. The PWD protests against condescension, and the AB responds in yet more condescension, as in humoring a petulant child — thereby yet again defining the PWD as like a child.

## 4 Plessy v. Ferguson, Again

America’s greatest history of prejudice has been about race and color. Disability is not entirely like race prejudice, but there are some parallels. My claim is that the lot of the disabled in society, especially in travel accommodations, bears some parallels with “separate but equal” — but not really equal. That was the norm for race relations from Plessy v. Ferguson (1896) to Brown v. The Board of Education (1954). The Americans With Disabilities Act was great progress, but it often gets

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<sup>13</sup>If it is neither help nor an attempt to help, it cannot really be good will, though it is often experienced as good will by those imposing it.

<sup>14</sup>These features of human action are explored in more detail in Andrew P. Porter, *Living in Spin: Narrative as a Distributed Ontology of Human Action* (Bloomington: Authorhouse, 2011), chapter 5. Full text is on the Net, at <http://www.jedp.com/spin>.

us only to the analog of *Plessy v. Ferguson*. It mandates that the disabled be accommodated, but it doesn't mandate universally accessible accommodations for all. Disability is not entirely like race; for there are practical considerations to be worked out. Nevertheless the net effect is still something like separate but equal — but not really equal.

Two examples may help. In airport security, most people just empty their pockets and walk through an electronic scanning door. I get groped.

When the Bay Area Rapid Transit (BART) system was built, platforms were usually a level above or below street level. Elevators are provided — but there are no controls *inside* the elevators, as there are for every elevator intended for use by the able-bodied. The elevator has to be operated remotely by a station attendant who may not even be able to see it.<sup>15</sup> The disabled are second-class citizens, guests of the able-bodied, just as door rituals define them to be.

## 5 Some Observations on Goffman

My goals in this paper are limited: to confirm that disability does carry a real stigma, to exhibit the form it takes, and to offer some general instructions about how to avoid it. The stigma experienced by the disabled attests features of human existence that often go unnoticed and have implications about human life for theology.

Goffman saw that the primary purpose of the stigma imposed on PWDs is to protect ABs from the emotional and existential demands that PWDs make on ABs *just by being there*, by our mere existence. In this, the experience of PWDs attests something about the core of human existence. We have a stake in each other's existence, and if someone else hurts, I hurt. Conversely, just by bearing some disappointment myself, I impose a disappointment on others. It is part of what humans are made of.<sup>16</sup> How that mutual inter-involvement is to be construed admits a considerable liberty of interpretation, since we are linguistic beings and language itself brings great ambiguity. We return to that in a moment.

It is *because* others have a stake in my existence, because others hurt if I hurt, that they ask me to protect their feelings from the consequences of my own disability. The pretence of normality expected of PWDs serves precisely to deny

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<sup>15</sup>I rode BART once in its first years, and in view of the elevator problem have not ridden it since. The problem may or may not have been corrected.

<sup>16</sup>*Living in Spin*, section 3.4, especially 3.4.1.

any demands on ABs. “Knowing one’s place” — i. e., *staying* in one’s place — affords further protection for ABs.

## 6 Why care?

More than once we have bumped into features of basic human nature that lie “beneath” the phenomenon of stigma. A simple question states the problem: Why do other people care about the disabled *at all*? Why is the principal issue for those able-bodied (ABs) who have problems with people with disabilities (PWDs) one of preventing discomfort for themselves? And why does that discomfort present itself as a need to *help* PWDs? Why should anyone be uncomfortable in the presence of a PWD at all?

The answer isn’t very clear unless one knows some obscure philosophy. Martin Heidegger, in one of his definitions of human being early in *Being and Time*, said that human being is the sort of being that has a stake in its own being.<sup>17</sup> In this he was surely right. The contrast with other kinds of being (rocks, which just take up space, and tools, which be what they are by fitting into the lives of humans) was groundbreaking. It opened up a perspective in philosophy largely ignored in the Western tradition.

But he missed something, and it should have been obvious: One human being has stakes in the lives of other people, as others do in his own life. People have deep involvements in each other, and it won’t do to consider people as isolated individuals who interact later; they are involved with each other from the start — or before the start; I had involvements with other people before I was born. Outside the Western tradition, this may be better known. To restate Heidegger’s definition in a proposed corrected form, human being is the sort of being that has a stake in its own existence, and stakes in the existence of other human beings, as they have stakes in its existence.

There is even a proverb in some African cultures, about “becoming a self through other selves.” *How* people are involved with each other can be both complex and subtle. It would be very difficult to enumerate or exhaust the ways, because people can need and want so many things, and most of them require other people in the background someplace.

There is more here than just practical help. People have involvements in other people even where the involvements are not practical at all. If a planet full of

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<sup>17</sup>The definition is on p. 12 of the German edition, and the German pagination is in the margins of both the Stambaugh and the Macquarrie and Robinson translations of *Being and Time*.

intelligent life around some distant star were blown away by a supernova, we would be concerned. The word that comes to mind says it: we would be *touched*. If someone else hurts, I hurt. That is why ABs are touched by PWDs, and why some ABs don't want to be touched too much by PWDs.<sup>18</sup>

This, of course, is not peculiar to encounters between ABs and PWDs; it is true of any meeting between any people, as one person's joys and sorrows touch other people around him. The experience of PWDs is merely a window into general human experience. It shows how people handle pains in life. More to the point, we can see how one person respects *another's* pains (or not).

How is it that people have interests in other people? That people have stakes in other people? I don't have anywhere near complete answers to these questions, but our involvements with other people are what makes us human at our best. The phenomenon we began with, stigma, shows how some people limit or just reject their involvement with other people.

This is an important feature of human inter-involvement, of human stakes in one another: Much of my interest in another person, much of my stake in the other person's being, is open to voluntary definition in language. I can choose to care about another person — or not; and I can do it in many ways. It is to some extent voluntary, though not entirely. I can construe the other person as an ally or an enemy, as a competitor or a fellow; as one needing support or one giving support, or both.<sup>19</sup> I can't share in the hurts of all the people in the world, but I can choose to share in some of them, and I can choose *how*. Human creativity knows few limits. Problems arise when I hurt anyway, whether I want to or not, because the suffering one is my "neighbor," the suffering one is in my existential vicinity.

The reason ABs are uncomfortable is this inter-involvement of people with other people. It is what people are made of, what makes humans be what we are. All human being is being-toward-others and being-with-others, even when others are not physically or temporally present. Philosophers haven't paid much attention to this side of human being. Psychologists and sociologists have had to proceed

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<sup>18</sup>The irony is that ABs defend themselves against unwanted existential touching *by* PWDs with unwanted physical touching *of* PWDs: patting the PWD on the shoulder, or pushing him around without permission.

<sup>19</sup>Some of this we share with non-linguistic animals, and we inherit this ontological constitution from evolution. Theoretical biology has not been as helpful as one might wish. It would have to borrow a definition of life from Heidegger (life is the sort of being that has a stake in its own being). Biologists are probably much happier not reading Heidegger. He is difficult, often muddled, and he leaves important features of human existence out. The mistake on page 12 of *Being and Time* is the prime example: he didn't notice that human beings have stakes in *other* human beings' existence, not just in their own.

on their own, without help from philosophy. A few questions may suggest the range of the phenomena that we don't understand very well: What does it mean,

to *accept* an other?

to *be* accepted?

to *reject* an other?

to *be* rejected?

to feel *abjected*?

to see oneself in an other?

to identify with an other?

to empathize with an other?

to depend on another?

to support others?

How can one person, in language, create interests in another person, by a simple *declaration*? Does language really work? Can language create such a relationship? To say I care is to promise that I will also hurt (as in feel hurt) if you hurt or are hurt.

A blessing is one example, especially in its Old Testament forms, where a patriarch blesses his son or sons. The blessing not only commits the one giving it (but to what?), it makes an ontological change in the one blessed, and a change that lasts longer than the life of the father, as the story of Jacob and Esau amply makes clear.

## 7 Ambiguity in “Help”

There is another prerequisite to understanding interactions between normals and the disabled, besides human inter-involvements. Human actions and motives are ambiguous. We have bumped into this already, in Goffman's caricature of how PWDs are advised to behave so as to bring ABs around, as we have seen from Goffman, p. 116, quoted above on p. 3, “Normals really mean no harm. . .” There is a reason why such a strategy works some of the time. All human actions get their being and their definition from their context, including their context in time, both before and after. If the context that comes later can influence what an act is, then acts can be transformed after the fact.<sup>20</sup> Certainly how an act fits into its

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<sup>20</sup>This is argued at some length in Andrew Porter, *Living in Spin: Narrative as a Distributed Ontology of Human Action* (Bloomington: Authorhouse. 2011).



larger context can be changed, even if the reader won't grant that the act itself can be changed. And that implies that the relationship between the PWD and neighboring ABs can be transformed. It may get off to a bad start, but that doesn't doom it to a bad end.

The key to seeing the ambiguity in human actions is to distinguish between meaning and motions of the act. (Both are identified only by acts of interpretation, which we won't go into here.) In this case, consider the motions: We see before us a normal who wants to help a PWD. The PWD accepts help, even though he doesn't need it or want it. There are smiles, the AB may give the PWD a pat on the shoulder. This we have seen already.

The meaning of these motions is open to several interpretations. The AB gets to feel good about himself, to see himself as generous and benevolent instead of dependent on grace and luck. The PWD is accepted in society — on limited terms — if he will accept his own limited place in society. The AB sees that the PWD can accept his own disability, that the PWD is “well-adjusted.” To be well adjusted means *not* making excessive demands on the AB's empathy. In particular, the PWD keeps his own inevitable grieving to himself (his grieving usually has been worked through long ago anyway).

There is another interpretation possible, and it is only a seedling growing out of this interaction as we have depicted it so far. Eventually, the PWD and the normal, if they see each other at all frequently, may come to accept each other as “just folks,” as equals in interaction with each other. This is what the PWD hopes for: as Finn Carling says, “And yet we are human too.” In an ideal outcome, the PWD's disability ceases to matter, as can happen between friends.

In less than ideal circumstances, as when the interaction is infrequent and the two don't get to know each other very well, then, as Goffman says, the graceful acceptance of unwanted “help” may be the best bargain the PWD can get. There will be tacit limits to what the PWD is allowed to do in society. Interactions between the disabled and normals are usually less than ideal.

There is another level of ambiguity beneath that of the “help” of normals. Disability itself is ambiguous: Is it barren, a tragedy, or is it simply something the PWD has to deal with? This is to divide into only two choices what is even more than a continuum, for there are many ways of imagining or denying possibilities for living within the limitations one faces. What the limitations are is to some extent a matter of interpretation, and therefore of choice and creativity.

Disability is just one example of a more general phenomenon: meeting limitation in life. When some particular kind of limitation gets singled out from the

background, then that stereotypical kind of limitation becomes a *clearing*, a place where you can see what people are doing with their lives, because you can see there how they handle limitation. If the culture considers such a limitation to be barren, it almost inevitably will look down on those so limited. This begins as pity.<sup>21</sup> Those not limited, having rejected this particular limitation as barren, no longer see themselves in those who are limited. This effectively separates them and their activities from those who bear limitation. If that separation is to be effective, it has to be enforced, and the ones who bear some practical limitation have to be kept in limited roles in society.

It may be enough to *mark* their limitation. PWDs get marked as in need of “help,” and so as guests in society but not full members. The disability rituals we have seen enact this marking function. Forcible “help,” as in forcible door-opening, marks the disabled in action. Calling the disabled “independent,” or by terms of endearment appropriate to minor children, such as “champ” or “young man,” marks the disabled in language. Finally, the pat on the shoulder physically marks the disabled as not having personal boundaries, as someone that any AB can treat as an incompetent.

There is ambiguity in disability itself. How is the disability to be fitted into the larger context of a life and the world? How is that life to be interpreted? Is the disappointment of the disability barren, or can it be fitted into a good life? Does the disability marr its bearer’s life as fundamentally flawed? Disability puts both the disabled and bystanders to the question.

Our society is (or was) supposedly Christian, and one element of biblical religion consists of embracing life in this world as *created*. Whatever may be said about the origins of the world (which are largely irrelevant), the theological import of creation is that the world is good. The goodness of the world was to be affirmed in full view of its manifold pains, some quite devastating. This means that the pains of living, in Christian faith at least, are to be integrated into lives that are good. That often is not easy. Society’s vision of the world functions as background against which stand out the milestones, rites of passage, and socially structured achievements expected of each life. What also stands out are the limitations, challenges, and characteristic disappointments that people face. Some are surmountable, some are devastating. We call them “tragic,” which tells more than it means to, for the tragic is a flaw in the fabric of reality, not just a pain to be borne. Those disappointments, like the people who bear them, are admitted to society’s vision of the good life — but conditionally: “thus far and no further.” In

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<sup>21</sup>It is a small step from pity to contempt, usually veiled.

the clearing of disability one can see the limits a society sets on how much it will accept disappointments as part of good lives.

We have come to the roots of stigma. The PWD is exposure, for the PWD shows us ABs in their own inability to handle limitation, in their unearned good fortune, and in their rejection of the disabled in need of mere shared humanity. The PWD is a clearing in which we can see how ABs handle the pains of life.<sup>22</sup>

## 8 Common Humanity

Finn Carling entitled his own meditation on disability “And yet we are human,” in direct defiance of the stigma that labels the disabled as less than human, less than full members of society.

What does it mean, to accept another in common humanity? This is a question about *respect*. Some things it does not mean can be spotted easily: Respect does not make decisions for another; respect does not make assumptions about another. A monk reflecting on his vows once put it this way:

Chastity is reverence for the integrity of persons. Not only does it refrain from exploiting them or using them as things; it always seeks a person-to-person relationship as far as possible, one that respects to the full the personality of the other.

Accordingly, it never tries to do good to or for the other, to dominate, control, or manipulate him, even for his own advantage. Rather it so humbly serves the other as to help him find for himself and develop through himself his own potential.<sup>23</sup>

It apparently comes as a shock to many seminarians in pastoral training that the disabled pastoral client knows more about handling disability than the pastor does. (It was to learn that, after all, that they were sent to Clinical Pastoral Education.) The prayer of the disabled is often “Lord, save me from people who want to help me; my friends usually know better, and I’ll take care of my enemies myself.” This is *not* just the prayer, “Lord, save me from my friends; I’ll take care of my enemies myself.” *My* friends have been helpful without intruding “help” where it does damage. They are usually quite sensible.

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<sup>22</sup>Andrew P. Porter and Edward C. Hobbs, “The Trinity and the Indo-European Tripartite World-view,” *Budhi* (Manila) Vol. 3, nos. 2&3 (1999) 1–28; <http://www.jedp.com/trinity.html>.

<sup>23</sup>Bonnell Spencer, OHC, “The Vows,” *Holy Cross Magazine* (Westpark, New York) 9 no. 3 (1970/Autumn) 7–8.

Do-gooding is a perversion of Christian faith, of responding to need. In a culture that did not have such deep biblical roots, I think the stigmatized would just be ignored and abandoned, or just treated with candid contempt. Do-gooding begins as a virtue mis-exercised, a virtue gone wrong, exercised in the wrong way. (It may or may not be innocent.) Nevertheless, even when do-gooding is intended as help, that doesn't make it help. It still does real damage, in the form of defining and limiting the roles of PWDs in society. Its faulty presupposition is that the able-bodied, the "normals," are the hosts making room for the disabled.

What would a good attitude look like? Do you have the courage (or if not that, just the courtesy) to do nothing? Can you let someone else "suffer"? When the other is not in his own experience suffering at all, but just trying to get through life without interference from do-gooders?

When someone disabled appears on TV in fundraisers appealing to the emotions, he is so courageous, so heroic, so tragic, so inspirational, so precious, so special. This is bad faith. Yes, in the small matter of handling a disability, I am better than you. I have what it takes, and you do not. Now could we please get on with life, and all be just people?

Disability poses a challenge to normals. Can you see yourself in the disabled one? Could you see your *own* life as still fulfilling, worth living, even if it were to become disabled? This is a question of larger context of meaning into which we fit our lives. If you can't see yourself in the disabled, you do not have what it takes to handle disappointment in life. And in Christian terms (if they matter to you), that is a failure of a very basic sort. Do-gooding, the perversion of helping another in need, has become a cover-up for betrayal of the central commitment of the Christian life: accepting all of it as in some sense good, and redeemable when it hurts.

## 9 General Instructions

In closing, some general instructions about doors and other encounters with PWDs. Beyond the obvious (keep your hands to yourself, use age-appropriate respectful language), and outside of emergencies, do nothing.

If it's an emergency, do what seems appropriate; if you are not egregiously dumb, clumsy, stupid, or insensitive, you will probably be thanked for your help.

If it's not an emergency, DO NOTHING, SAY NOTHING.

If you are asked to help, you may help if you want to. You don't have to.

If you can't keep your mouth shut, ask only once. No means No. The disabled shouldn't have to say No more than once. Do not follow up with "are you sure?" If you do that, you convert the encounter into an able-bodied dominance ritual — possibly a cordial one, but still a dominance ritual.