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ABSTRACT

All research related to under-utilization of income maintenance
programs as well as to their impact on recipients has discovered the
presence of stigma. A survey of the pertinent literature points out
that much is known about stigmatization but that social welfare has
been slow to incorporate this knowledge in any attempt to reduce the
destructive effect of stigma on program users. Both liberal and
radical reform measures are proposed as remedies.

Being dependent on charity has long carried with it a stigma.[1]
It is commonly "known" that the receipt of public aid induces feelings
of shame and loss of face in many recipients. However, Titmuss[2] has
only recently identified the issue of how to incorporate poor people,
especially non-whites, into our societies, and to transfer more
resources to them without also generating shame or stigma as one of the
major challenges to the formulation and administration of social policy.

The identification of stigmatization as problematic has kindled a
renewed interest in its implications, both in the United States and
Britain. From this heightened concern has recently come empirical
research. The stigmatization of public welfare recipients[3] and the
role of stigma as a deterrent to public welfare participation[4] have
both been examined. All known research related to the stigmatization
of utilizers has found that significant numbers of them do feel stigma-
tized. In the research which examined the role of stigma as a deterrent,
evidence was discovered that stigma deters potentially-eligible indivi-
duals from participation in needed programs. Thus, the issue raised by
Titmuss has been legitimated by research. The work done, however, has
been modest.

The Titmuss call has also been responded to by theory builders.
The following section of this paper will review recent theoretical
contributions to the general area. The purpose of this review will be

to demonstrate the importance of understanding stigma and its effect on utilizers (actual or potential) of social welfare services.

The stigma effect is of profound significance to social workers, social work educators, and other social welfare providers. Since our programs are stigmatizing, either advertently or inadvertently, policy changes in program implementation are called for. The liberal points of view call for modifications within the present delivery system, the radical for new systems. Both will be examined in the final section.

Theoretical Considerations

General Theory: The stigma effect can be defined as the loss of face, dignity, self-respect, and/or social acceptance which occurs as a result of exposing a personal blemish or handicap. For our purposes, the blemish is poverty or economic dependency.

A more general definition of stigma encompasses a wider scope. The word was introduced by the ancient Greeks. It was used by them ". . . to refer to bodily signs designed to expose something unusual and bad about the moral status of the signifier."[5] The stigma, cut or burned into the body, labelled the bearer a blemished person. He was to be avoided. Although other layers of meaning, especially psychological ones, have been attached, the reference of the concept has not changed significantly. Until recently, there has been little systematic study of those social conditions which may create the stigma effect, just as there has been only limited interest in clearly defining the concept itself.

The publication in 1963 of Erving Goffman's *Stigma: Notes on the Management of Spoiled Identity* was a major step toward remedying such deficiencies. According to him:
  While the stranger is before us, evidence can arise of his possessing an attribute that makes him different from others in the category of person available for him to be, and of a less desirable kind--in the extreme, a person who is quite thoroughly bad, or dangerous, or weak. He is thus reduced in our minds from a whole and usual person to a tainted, discounted one. Such an attribute is a stigma, especially when its discrediting effect is very extensive; sometimes it is also called a failing, a short-coming, a handicap. It constitutes a special discrepancy between virtual and actual social identity.[6]

The possession of a stigma is, according to this definition, paradoxical. That is, does the stigmatized individual assume his

differentness is already known, or does he assume that his stigmatization is _not_ known by others, is not visible to them? The first situation describes the situation of the "discredited," the latter the situation of the "discreditable."[7]

Goffman lists three types of stigma: (1) abominations of the body; (2) blemishes of individual character, perceived as weak will, domineering or unnatural passions, treacherous and rigid belief, and dishonesty; and (3) tribal stigma of race, nation, and religion.[8] Those who possess blemishes of individual character are apt to be regarded as social deviants. Their rank could include, among others: prostitutes, drug addicts, delinquents, criminals, bohemians, gypsies, carnival workers, hobos, winos, show people, full-time gamblers, beach dwellers, homosexuals, and the urban unrepentant poor.[9] Following Goffman's logic, additional categories would be radicalized students, hippies, unwed mothers, the unemployed, or public aid recipients.

To compensate for their stigmatized condition, those with a stigma have five possible courses of action:
1. They may agree that they fall short of what they ought to be and surrender in shame.
2. They may attempt to correct what they see as the reason or cause of their failing.
3. They may attempt to "pass" as normal. This is a method chosen by many. Goffman points out that because there are great rewards in being considered normal, almost all persons who are in a position to pass will deliberately do so on some occasion.
4. They may attempt to "cover," to make a strenuous effort to keep their stigma from appearing serious, even though it is revealed.
5. They may attempt to align themselves with others, to affiliate. This alliance may be with normals, with those whom they resemble, or with those who are seen as more stigmatized than they.

Goffman's work covers other dimensions of stigma as well. It is important in that it develops insight about the sociological implications of stigmatization and its effects on individuals.

This insight echoes one of another decade and with a different focus. In 1958, Hughes examined the sociology of work and came to a similar conclusion about its stigmatizing potential. He said:
    Every occupation is not one but several activities; some of them are the 'dirty work' of that trade. It may be dirty in one of several ways. It may be simply physically disgusting. It may be a symbol of degradation, something that wounds one's dignity. [10]

But what makes such work dirty or stigmatizing? It is not the
work or task itself that stigmatizes the janitor. Rather, it is the
tenant who is the source of the janitor's discomfort. That which is
disgusting about his work is related to the estimation of him and his
work by the other actors in his work drama.[11]

Thus, the blemish is social in significance. Poverty or blindness
or homosexuality is not a curse or stigma in and of itself. Rather, it
is the evaluation of others that produces the stigmatizing effect, the
"spoiled identity." That evaluation and its receipt is the result of
an interactional process. The intra-personal effect depends on a social
judgment, transmitted by others to the person being stigmatized.

Stigma confrontation is a new concept, recently introduced by
Humphreys.[12] It is relevant to this discussion. Adding to the ideas of
Goffman, Humphreys explains the militancy of certain oppressed (stigma-
tized) groups during the 1960's. He labels such militancy, or politici-
zation, as stigma confrontation, movements to confront society with a
refusal to internalize the negative connotations of the stigma. He
suggests two modes:
    1. Stigma conversion: the emerging from a stigmatized condition
as a transformed creature, one characterized by the development of
political or ideological strength.[13]
    2. Stigma redemption: the claiming of moral dividends as a side-
product of enduring deprivation by demanding reparation for suffering
endured.[14] According to Humphreys, this is a method long used by the
economically disadvantaged, especially in Appalachia and the rural
South. The National Welfare Rights Organization in the 1960's, seen in
this perspective, was an exercise in stigma confrontation.

The final contribution impinging on this coverage of the literature
of general stigma theory is that of Burton Weisbrod. His ideas, though
largely untested, are significant in that he introduces the notion of
variable stigma costs, or the possibility of gradations of stigma being
experienced by persons accepting benefits from incremental aid programs
for which they are eligible.[15]
    At a most general level, the approach suggests that a change in
    the stigma cost will change the quantity of welfare aid demanded,
    as will a change in the magnitude of benefits. It also suggests
    that tradeoffs are possible; there may be a decrease in the stigma
    cost that will have the same impact on program utilization--the
    number of eligible persons who actually participate in the
    program--as will a particular increase in the amount of benefits. [16]

It is Weisbrod who shifts attention from the untested general
stigma theories to the researchable relationship between variable stigma

costs and utilization of public aid programs. In seeking a new and
better understanding of the incremental role played by stigma in the
field of social welfare, his efforts link general theory with utiliza-
tion behavior.

Social Welfare: In even the most primitive societies, exchange
systems exist. They are the means by which members of a society inter-
act or barter over the transfer of goods, money, status, knowledge,
prestige, and the like. All exchanges are not identical. According to
Titmuss, a distinction must be made between the grant, the gift, the
unilateral transfer, and the mutual exchange or bilateral transfer. The
former he views as occurring in the social market, the latter in the
economic market.[17]

Robert Pinker, a contemporary British sociologist, says:
 All social services are systems of exchange. Their central
problem regarding conflict and discord is the problem of equiva-
lency, because the relationship between a giver and a receiver
is always inherently an unstable and unequal one. While a
minority of people go so far as to make vocations out of either
service or dependency, most of us prefer a measure of equivalency
in our relationships. [18]

Pinker's description of social services (non-market health, housing,
educational, income maintenance, and personal social service provisions)
as exchange systems is a landmark contribution to social theory. It
opens the intellectual door to clarifying why social services are,
indeed, stigmatizing. In the unequal relationships he refers to, givers
may seek to enhance, to self-aggrandize themselves, at the expense of
the receivers, who are apt to feel resentment and degradation--that is,
stigmatization--as a result of the inherent imbalance in the system of
exchange.[19]

Pinker takes into account the fact that demands for social welfare
appear to increase in industrialized societies despite the fact that
people learn to feel revulsed because of their dependency.[20] He
maintains that this can be explained by the fact that, although stigma
may interfere with social welfare utilization, basic needs (hunger and
shelter) often regulate the behavior of the individual more than do
cultural control systems. Even though few people starve in today's
industrialized societies, the fear of hunger may cause the poor to
apply for assistance in spite of the stigma which may be applied.

Not only does Pinker describe social services as exchange systems,
thereby explaining their stigmatizing function, but he also offers the
unilateral model to further clarify the relationships between exchanges,

social services, and stigma. To this model, he adds three qualifica-
tions, intended to add to the understanding of the differential roles
of stigma in social welfare: depth, time and distance.[21]
    1. Depth: the intensity with which the recipients regard their
stigmatization or are made to feel it. Different social statuses
attract different degrees of stigma. Those who are seen as receiving
restitution for earlier services or those who are viewed as apt to
offer a future service tend to be assigned higher statuses and would
feel less stigma.
    2. Time: the longer the persons will be in a dependent position,
the more likely they are to redefine themselves in terms of the stigma.
    3. Distance: the more socially distant the possible recipients
are from the givers, the less are they likely to receive. Caste systems
and the confining of people to institutions both increase social and
spatial distance, thereby reducing the likelihood of effective social
service administering.
    Pinker's model has great utility for social welfare. It views
social services as unilateral exchange systems, thus explaining the
function of stigma: to create feelings of obligation, inequality, and
guilt in users and, in the long run, to inhibit service utilization.
The model also hypothesizes about differential stigma impacts, intro-
ducing the opportunity for empirical investigation. Most important,
stigma is removed from the abstract and placed in sociological juxta-
position to social welfare utilization. Pinker's exchange system
theories supplement Goffman's notions about the interactional nature
of the process of stigmatization.

    The work of Matza makes further connections between stigmatization
and social welfare. His concern is with the eradication of disreputable
poverty, which he sees as a profound challenge. He states,
    When demoralization has set in, when the poor become disreputable,
    our deficiencies are of capacity and knowledge as well as of will.
    The disreputable poor may be considered--indeed, they may be
    defined--as that limited section of the poor whose moral and social
    condition is relatively impervious to economic growth and
    progress. [22]

    The disreputable poor are difficult to define, according to him.
They are not the "worthy poor," those deemed deserving and morally
acceptable. They are not the routine "welfare poor." They are the
"hard core," further yet along on a continuum of disrepute. They
possess the "moral defects of demoralization and immorality."[23] These
are the unique blemishes of the disreputable poor.

    Obviously, the disreputable poor are the seriously stigmatized
poor. Matza points out that inherent in all conditions of poverty is

an element of disrepute, especially for those who are receiving aid.
Yet not all of those who are poor are indeed disreputable to the extent
that they are seen as outsiders, unworthy, and immoral. Those who are
truly disreputable are immersed in cultural as well as economic poverty.

Matza suggests several categories of disreputable poor, including:
1. The dregs: persons born into poverty but left behind by
upwardly-mobile populations.
2. Newcomers: recent arrivals, including both migrants and
emigrants.
3. Skidders: those who have fallen or slipped from higher social
classes.
4. The infirm: those made disreputable by age, injury or
illness.[24]

Excessive stigmatization, or the persistent demeaning of the poor,
contributes to the process of pauperization, which terminates in
disreputable poverty. The final result of that process is when the
disreputable poor develop the same views of themselves as society has
of them: outcasts, unworthy, denigrated, and failures. At that point,
they make final adaptation to their condition.[25]

It is at this juncture that the works of Goffman, Pinker, and Matza
converge. Goffman has described the process, Pinker the sociological
rationale, and Matza the possible outcome or end result. Stigma is the
common thread. The loss of face brought on by economic dependency,
socially reinforced and functionally employed to maintain class and
social discrepancies, results in disreputable poverty or pauperization.

It has been stated already that stigma has long been a concern of
social welfare providers, many of whom are wittingly or unwittingly
involved in the process of stigmatization themselves. Stevenson's
recent analysis of England's unsuccessful struggle to reduce stigma
in its social welfare efforts serves as an example. That analysis
stresses the intractability of stigma in the face of reform efforts.
Her point is clear:
    The improbability of this (reduction in stigmatization of
    claimants) taking place reflects society's unwillingness to
    accept fully and unequivocally the responsibility of the
    stranger to support the weaker or, indeed, to agree a
    definition [sic] of 'weaker,' with the possible exception of
    the elderly. [26]

The radical analysis of social welfare in a capitalist society is
germane to this discussion. That analysis views social welfare services
as contributing to the maintenance of the societal *status quo*, as

social control devices, serving the interests of a corporate ruling class. Stigma in this analysis is one means by which social discrepancies are perpetuated. Blemished individuals somehow "deserve second-class status." They do not generate feelings of compassion and concern in the non-stigmatized segments of society. They are sapped of energies which might enable them to collectively and individually work to alter their stigmatized status. Indifference and social isolation are tolerated. The process of stigmatization blunts the need for change and renders inactivity acceptable.

Positive approaches are required to alter this process. Negative sanctions reinforce that which they are ostensibly intended to combat. It requires little awareness of social welfare history to conclude that positive approaches have been rare. What has been commonplace have been those activities which have frequently made intolerable the receipt of public aid. Whether the intent of such policy is deliberate or not, those taking assistance have been rendered non-citizens. Stigma has served the function of maintaining socioeconomic inequality.

Implications

The receipt of social welfare benefits carries with it a stigma. The status of recipients, therefore, is inherently degrading. Being dependent upon society places one in an unequal relationship, one in which the donor is superior to the recipient. The obvious solution is to change the balance of such a relationship. However, the stigmatizing of recipients has persisted tenaciously. Despite periodic cries for reform, along with the identification of stigma as a culprit, social policies related to public dependency have changed only with the greatest effort.

Pinker maintains that the approach suggested by many social welfare liberals (universal social service programs, which make services available to all) is not necessarily the vanguard of reform. According to him, universal programs will not necessarily be any more effective than residual (selective) programs in combatting stigma because neither attacks the basic problem, which is society's reluctance to enter into bilateral relationships with dependent individuals. Universalism and selectivity are "academic perceptions of social reality"[27] which do not correlate highly with the attitudes of the greater society, including recipients.

Meanwhile, the effect of stigma on recipients (described in its extreme by Matza) as well as its effect as a deterrent to potential recipients is unchecked. Sizable numbers of eligibles refuse to apply for benefits, preferring a marginal existence to public loss of face.

Others, unable to resist, receive benefits at the risk of disreputability.

The liberal solution to this situation is to modify existing programs, to reduce the stigma potential. Thus, "benefits by right," the humanization of bureaucracies, the separation of income aid from counseling services, the reorganizaing of social services are offered as remedies. These modifications are not, of course, to be denigrated. Their intent is to soften the stigma impact. Yet they do little to alter the attitudes of society at large. They do not change the basic inequality inherent in the unilateral relationships of one-sided giving and receiving. Thus, their ability to ameliorate the stigmatizing impact of our major programs may be minimal.

Radical solutions call for structural alterations. Two are suggested for consideration.

1. Out of Humphreys come the stigma confrontation tactics. In these approaches, the disenfranchised or the stigmatized are assisted in their quest for reputation through collective action. Stigma can be overcome through politicized group activity. Thus, welfare recipients would be encouraged to form or participate in a National Welfare Rights Organization, homosexuals in a liberation movement, former convicts in a convicts' rights organization. Out of mutual concern and organization comes the power to force society to re-examine its attitudes or to capitulate, regardless of attitudinal shifts. These and other consciousness-raising movements are proliferating in this society at present; unfortunately, social welfare practitioners are not generally favorable to or intimately involved with them.

2. Out of the stigmatizing propensity of the means test (the chief target of the universalists) comes the need to abolish the means-tested public aid delivery system and to replace it with another, Pinker notwithstanding. The latent functions of public welfare have already been pointed out by Piven and Cloward[28] and others; their goal is the destruction of the present system. The new system, perhaps a negative income tax or a family demogrant, would make a given amount of income available to all, regardless of need. Benefits would be provided mechanically. A depersonalized approach would be stressed, with little to no personal interaction between donor and donee. Local discretion would be minimized; financing would be based on a progressive income tax. Administration (including benefit levels and other standards) would be federalized. The need for a small residual program would persist.[29] However, the bulk of public dependency could be handled according to new rules.

Stigmatization can be reduced, but only if the necessary structural changes are made. Because of the omnipresence of inequality in uni-lateral systems of exchange, interactions which generate indebtedness and obligation, new structures are called for. An active role in stigma elimination tactics for social welfare seems indicated if the re-structuring of the delivery system or the invention of another is to occur.[30]

[1]Bruno Stein, *On Relief* (New York: Basic Books, Inc., 1971), p. 48.

[2]Richard Titmuss, "Universal and Selective Social Services," in *Commitment to Welfare* (New York: Pantheon Books, 1968), p. 114.

[3]See, in particular, U.S. Congress, House, Committee on Ways and Means, *Report of Findings of Special Review of Aid to Families with Dependent Children in New York City,* 91 Cong., 1 sess. Transmitted by the United States Department of Health, Education, and Welfare and the New York State Department of Social Services (Washington, DC: United States Government Printing Office, September 24, 1969), pp. 47-8; Lawrence Podell, "Welfare History and Expectancy," *Families on Welfare in New York City* (New York: Center for the Study of Urban Problems, City University of New York, January 17, 1968), p. 10; Joel W. Handler and Ellen Jane Hollingsworth, *The "Deserving Poor": A Study of Welfare Administration* (Chicago: Markham Publishing Company, 1971), pp. 168-78.

[4]Maurice MacDonald, "Why Don't More Eligibles Use Food Stamps?" Institute for Research on Poverty discussion paper (Madison: University of Wisconsin, July, 1975), pp. 12-13; Archibald Stuart, "Recipient Views of Cash Versus In-Kind Benefit Programs," *Social Service Review,* XXXXIX, No. 1 (March, 1975), pp. 83-5; Norman L. Wyers, "Selected Deterrents and Under-Utilization to Income Maintenance Programs," *Public Welfare,* XXXIV, No. 1 (January, 1976), pp. 41-6. More detailed data are available in Norman L. Wyers, *On the Effect of Stigma and Other Deterrents on Three Rural Means-Tested Programs,* Unpublished D.S.W. dissertation, Columbia University, 1975.

[5]Erving Goffman, *Stigma: Notes on the Management of Spoiled Identity* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1963), p. 1.

[6]*Ibid.*, pp. 2-3.

[7]*Ibid.*, p. 4.

[8]*Ibid.*, pp. 4-5.

[9]*Ibid.*, pp. 143-44.

[10]Everett C. Hughes, *Men and Their Work* (Glencoe, Ill.: The Free Press, 1958), pp. 49-50. The same phenomenon is discussed by Elliot Liebow in *Tally's Corner* (Boston: Little, Brown, and Co., 1967), Chapter II; and Leonard Goodwin, *Do the Poor Want to Work?* (Washington, DC: The Brookings Institution, 1972), pp. 112-13.

[11]*Ibid.*, pp. 50-51.

[12]Laud Humphreys, *Out of the Closets: The Sociology of Homosexual Liberation* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1972), p. 142.

[13]*Ibid.*, p. 142.

[14]*Ibid.*, pp. 148-9.

[15]Burton A. Weisbrod, "On the Stigma Effect and the Demand for Welfare Programs: A Theoretical Note," Institute on Research for Poverty discussion paper (Madison: University of Wisconsin, November, 1970), p. 8.

[16]*Ibid.*, pp. 1-2.

[17]Titmuss, "The Subject of Social Administration," *Commitment to Welfare, op. cit.*, p. 22.

[18]Robert Pinker, *Social Theory and Social Policy* (London: Heinemann Educational Books, Limited, 1971), p. 153.

[19]Pinker's exact words are important: "Our major premise is akin to a psychological proposition, namely, that in systems of exchange it is always less prestigious to receive than to give. The main hypotheses put forward in the model are that a significant proportion of citizens draw a sharp distinction between the welfare roles of 'giver' and 'receiver'; that exchange relationships in the public welfare sector are more stigmatizing than those pertaining in the private sector; but that all such exchange relationships are inherently stigmatizing in so far as they involve common cultural and biological factors defining and relating to dependency in industrial societies." *Ibid.*, p. 170.

[20]*Ibid.*, p. 168.

[21]For Pinker's review, see *Ibid*, pp. 170-75.

[22]David Matza, "Poverty and Disrepute," *Contemporary Social Problems*, ed. by Robert King Merton and Robert Nisbet (New York: Harcourt, Brace, and World, Inc., 1966), p. 619.

[23]*Ibid.*, p. 620.

[24]*Ibid.*, pp. 644-54.

[25]This conclusion is reached by Goffman, *op. cit.*, pp. 7-9, and by Olive Stevenson in *Claimant or Client?* (London: George Allen & Unwin, 1973), p. 17.

[26]Stevenson, *op. cit.*, p. 19.

[27]Pinker, *op. cit.*, p. 166.

[28]Frances Fox Piven and Richard A. Cloward, *Regulating the Poor: The Functions of Public Welfare* (New York: Pantheon Books, 1971).

[29]See Vera Shlakman, "The Safety-Net Function in Public Assistance: A Cross-National Exploration," *Social Science Review*, XXXXVI, No. 2 (June, 1972), pp. 193-212.

[30]Radical solutions have been proposed in a variety of recent texts. See especially Roy Bailey and Mike Brake, eds., *Radical Social Work* (London: Edward Arnold, 1975); Vic George and Paul Wilding, *Ideology and Social Welfare* (London: Rutledge and Kegan Paul, 1976); and Jeffry H. Galper, *The Politics of Social Services* (Englewood Cliffs, N.J.: Prentice-Hall, Inc., 1975).