

Difable Women: Marginalized Identities

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Abstract

Women in their gender identity is *second sex*, which is the second sex which means occupying the subordinate position of the first sex (male) as the dominant position. This is inseparable from the patriarchal culture that places the position of women below men, as well as women have limited roles, especially in public spaces. It cannot be denied until now the domestic sphere is still considered as a responsibility of women. What about women with disabilities or people with disabilities? Disabled groups are a minority group that has been neglected for their rights. They are a minor, marginalized group, whose disability identity often stigmatizes helplessness and incompetence. Women with disabilities, of course, have problems that can be said to be more complex than 'normal' women in general. Not only confined to patriarchal culture, the negative stigma labeled becomes increasingly severe for women with disabilities. This study was about women with disabilities who experience stigma, not only stigma against women, but stigma against difable women. Their identity as women with disabilities is an experience that represents the marginalization of this minority group. The subjects of this study were women with disabilities who were both married and unmarried. The results showed that the stigma labeled on women with disabilities seemed to be an identity attached to them. It is then even believed by them themselves. Nevertheless, there is a subjective awareness in these disabled women to then try to get out of the negative stigma, but the support that is expected to come from people with disabilities. Their surroundings are less felt. The research method used is a qualitative research method with a symbolic interaction perspective. The theories used are George H. Mead's theory of symbolic interaction and the theory of stigma and identity of Erving Goffman.

Keywords

Women, Difabled, Stigma, Identity, and Marginal.

1. Introduction

The study of identity is a study that has been widely discussed in the last period. This is as a consequence and part of the development of thought and knowledge in the contemporary social field, such as the development of feminism, postmodernism, and the latter postcolonial that prioritizes thinking about the concept of the subject or the existence of the individual self. Identity is a question that focuses on a person's 'self' as part of a community becomes important. Identity is often thought to be something inherent in the individual. It is then read or identified either by himself or by others. Identity can be instantly in a person. This means that identity is attached because of the grace of God, such as gender, skin color, and body shape. However, identity also exists in the form of the result of formation during the individual's life, for example culture, class, his role in daily life (regarding his profession or status). Therefore the identity attached to the individual is never singular and can be capricious.

Richard Jenkins argues that social identity is our understanding of who we are and who others are, and reciprocally, others in understanding themselves and understanding others. Identity is something that can be negotiated and shaped in the process of human interaction. For Jenkins, the question of identity is a question of meaning, and it is socially constructed (in Haralambos and Holborn, 2000: 921). This study sought to look at another identity issue, namely the identity of people with disabilities. Studies of "*disability*" or *difable* or disability as part of identity studies are still rare. Even in the study of the world of work, although people with disabilities experienced a growth in portion count, when compared to other aspects (e.g. based on race, ethnicity, or gender), attention to people with disabilities is still relatively small (McLaughlin et al. 2004).

Society's general negative and longstanding view of people suffering from disabilities can actually curb their mental as well as mobility. Usually those who feel themselves disabled are overshadowed by irrational anxiety, easily discouraged and humiliated, and the future is felt dark (Kartono, 1983). In addition, Prasadiao stated that people who are considered disabled are distinguished from normal people, so that the body or mental state of a person who is not normal gives birth to views or attitudes of society that are often negative towards their existence. Therefore, those with disabilities are often the forgotten group (Prasadiao, 1982). This problem becomes more

complex when those with disabilities are women. During this time women are seen as second *sex*, weak and helpless creatures, unable to compete with men, and can not escape from domestic territory (Beauvoir, 2003). What about women with disabilities or disabilities? Being disabled is certainly a minority, the stigma that is labeled is helplessness, immaturity, and of course many rights are neglected. Especially if the disabled person is a woman. Negative burdens and stigmas double to carry. It does not rule out the possibility that these women are subjected to violence. In addition, the stigma of spinsters due to their disability becomes attached in such a way when they do not get married.

Women, if viewed in a binary perspective with men, will be a subordinated position, meaning women become weak and defeated, unlike men who are in a dominant position, meaning they have power and dominance over women. This position is also experienced by women with disabilities, they are in a subordinated position coupled with their disability condition. Women with disabilities, of course, have problems that can be said to be more complex than 'normal' women in general. Not only confined to patriarchal culture, the negative stigma labeled becomes increasingly severe for women with disabilities. The study was about women with disabilities who experience stigma, not only stigma against women, but stigma against disabled women. Their identity as women with disabilities is an experience that represents marginalization of this minority group.

1.1. Objectives

This study aims to analyze the issue of the identity of women with disabilities who often get negative stigma to experience double marginalization, not only as women but also as women with disabilities. The contribution of this study is to add variance in the study of identity in this case the identity of people with disabilities.

2. Literature Review

McLaughlin (2004) in his research looked at stigma and acceptance of disabled people in the workforce. The research seeks to explore (by quantitative methods) critical aspects of the social context through the investigation of employees' acceptance of disabled workers. The concept used in the study is "stigma", i.e. a negative nonconformity or inequality between a person's true attributes versus social expectations of one's "normality". This study sought to look at how a company treats disabled workers, be it normal employee attitudes towards them, then equal rights in obtaining accommodation, as well as decisions taken regarding wages/ salaries, promotions, and maintenance. The results of this study showed that the attitude of "normal" employees was strongly influenced by the appearance of the disabled worker, meaning that the acceptance of normal employees still depends heavily on the physical appearance of the disabled worker. The perception that disabled people can't do a good job is still firm.

Another study conducted by Barbara Lutz and Barbara Bowers (2005) is one that seeks to explore how people who have disabilities feel their experiences in a disability in everyday life. In fact, disability is thought to have a variety of complex effects on the daily experiences of people who have these disabilities. Based on the results of the study, three factors are found that are interconnected in the life of a person with a disability. *First*, fundamental effects of the defective condition; *Second*, other perceptions of disability; *Third*, the desire to use existing resources. What matters in this context is how the environment, time, and experience.

Another study that discusses the problem of disabled people is a study from Michelle Putnam (2005) which examined conceptual frameworks as a clue to empirical analysis of *disability identity*. The foundation of the theory used is the theory of Hahn formulating three postulates for the minor group model in this case disabled people, namely a) the problem of respect for the disabled as part of social attitudes; b) almost all aspects of the environment have been shaped by public policy; c) At least in a democratic society, policy is a reflection of the picture of attitudes and values embraced.

WHO in "The International Classification of Impairment, Disability and Handicap", defines three aspects of disability, namely impairment, disability, and handicap (Table 1).

Table 1. The Differences Between Impairment, Disability, and Handicap

Impairment	Disability	Handicap
<i>Impairment</i> is the loss or abnormality of psychological, physiological, or anatomical structures and functions.	<i>Disability</i> is a limitation or loss of the ability (as a result of an <i>impairment</i>) to perform an activity in a way or within	A handicap is a loss, for a particular individual, as a result of an <i>impairment</i> or <i>disability</i> , which limits or inhibits the implementation of a normal role,

	the limits that are considered normal for a human being.	depending on age, gender, social or cultural factors.
<i>Impairment</i> is an aspect of disability at the organ level of the body.	is an aspect of disability at the level of individual functioning	<i>Handicap</i> is an aspect that is influenced by factors that are not directly related to disability.

The theories used in this study are those of George H. Mead on *Self* as well as Erving Goffman's theory of Identity and Stigma. Mead states about the importance of self-concept, namely the ability of a person to make himself an object; the self is a distinctive ability to be a subject as well as an object which means that one has a perspective on how one is especially when the process of interaction (Ritzer, 2008). Based on this self-concept, it can be understood that the self is very related to the mind, the self is not only related to the physical. Sociologically, the self is a social process in which there is a social experience. Not only that, Mead also states that in order to see ourselves well, we need to play or be in the position of others, so that we can examine ourselves objectively, impersonally, and rationally. This is what Mead calls reflexivity (Mead, 1934), which is our ability to examine ourselves subconsciously by placing ourselves in the shoes of others. This makes the individual then consciously able to make various adjustments to the process of reflection.

Mead states about two aspects of the Self, namely "I" and "me". "I" is an individual's direct response to another individual and cannot be estimated and simply appears. This is related to the response in an interaction, the response can be precise but can also be mistaken, because it relates to the nature of the response that arises without being calculated. So individuals are often unable to recognize "I", often "I" is also called self-realization. "me" is an organized and conscious form of self. In the process of interaction, "me" is based on conformity, dominance over the individual is in the "me", and social control is in "me".

In addition to Mead, the theory used in the study is Erving Goffman's theory of Identity and Stigma. Goffman in his thinking proposed two concepts of identity, namely *personal identity* and *self-identity*. *Personal identity* is usually more in framing the individual's experience by others and not by the individual himself. According to Goffman, *personal identity* does not look at an individual's subjective experience and not how an individual identifies himself, but at how he or she is identified by others (Goffman, 1963). *Self-identity* is a person's subjective feeling of the situation he is experiencing and his own continuity and character – separate from *personal identity*. *The self-identity* of individuals can be said to be in close relation to various social experiences that they experience.

Goffman also divides identities into two based on the attitudes or activities of actors, among others: First, *virtual social identity*, which is identity based on what should be done by an individual and unacceptable; Second, *actual social identity*, which is what is actually done by the individual or what can be done by the individual and acceptable (Goffman, 1963). That is, the identity of the individual is determined by what he can actually do in his activities, also determined by what is expected or required by others to do in his activities. In short, between what a person can do and what he or she is required to do will form an identity in the individual.

Goffman divides stigma into three types, *First*, hatred of the body – i.e. the form of body abnormalities or physical disabilities; *Second*, people who are 'rejected' because of their personality are considered sick or have disorders where they are not respected, for example people who have mental disorders, inmates, drug dependents, alcoholics, homosexuals, unemployed people, people who attempt suicide, and people who behave politically radically; *Third*, stigma imposed on the basis of tribal, racial, national, and religious (Goffman, 1963). In addition to these three concepts of stigma, Goffman also divides stigma based on stigmatization or knowledge of others over the stigma that one has, among others: *First*, stigma discredit, namely 'deficiencies' or differences owned by someone known by others. For example physical disabilities that can be seen visually; *Second*, discreditable stigma, i.e. 'deficiencies' or differences that one has are not known by others because they are invisible. For example a homosexual (Goffman, 1963).

3. Methods

This research uses qualitative methods, research with qualitative methods see that science is not value-free. Emphasis that understanding of research as an interactive process is shaped by *personal history*, biography, gender, social class, race, ethnicity, and by people who are in the setting of the situation around (Denzin and Lincoln, 2000). The perspective used in this study is Symbolic Interactionism. This perspective describes the pragmatism of the unique American school of philosophy, of sociological interpretation of ecology (the study of organisms and their environment) and of the field methods developed by Anthropology (Craib, 1986). This

perspective strongly emphasizes the importance of meaning and interpretation as an essential-human process in reaction to behavioralism and mechanistic stimulus-response psychology. People create shared meaning through their interactions, and for them that meaning is the reality (Oetomo, 2005).

Symbolic interactionism holds that interaction takes place in how individuals continuously interpret the symbolic meaning of their environment (including the behavior of others) and act on the interconnectedness of meaning (Bryman, 2004). A significant symbol is a shared understood meaning, developed through interaction (Craib, 1986). Even adherents of symbolic interactionism do not understand the mind as a thing, a physical structure, but as a continuous process. This is a process of greater stimulus and response. The mind is almost entirely related to every other aspect of symbolic interactionism, including socialization, meaning, symbols, self, interaction, and even society. For symbolic interactionism, socialization is a dynamic process that allows people to develop thinking skills, to grow humanely. Furthermore, socialization is not just a one-way process in which actors receive only information, but a dynamic process in which actors build and utilize information to meet their own needs. In addition to socialization, symbolic interactionism also talks about interaction, which is the process by which the ability to think is developed and expressed. All types of interactions, not just interactions during socialization, polish our thinking skills. Beyond that, thinking builds a process of interaction. In most interactions, actors must consider whether or not others decide yes or no and how to adapt their activities to those of others (Ritzer and Goodman, 2008). In the process of social interaction, symbolically people communicate meaning to others involved. Others interpret those symbols and direct action responses based on their interpretation. In other words, in social interaction, actors engage in the process of influence (Ritzer and Goodman, 2008).

Table 2. The Informans and their characteristics

Name	Age	Disabilities
Vita	35	Physical Disabilities on her hand
Lina	32	Physical Disabilities on her leg
No Name A	27	Blind
No Name B	24	Blind
No Name C	30	Physical Disabilities on her leg
No Name D	40	Physical Disabilities on her leg

The location of this study is in the city of Banjarmasin by taking the subjects of women with disabilities both married and unmarried (Table 2). Data collection techniques with face-to-face interviews using interview guidelines. Erving Goffman, who emphasized his theory at the micro-theoretical level, posited the importance of analysis of "face to face" interactions in everyday life. Goffman saw that through face-to-face interactions, there is a process of influencing each other between individuals when physically face to face. Through this face-to-face interaction, individuals try to display a certain impression of others (versus their interactions) (Poloma, 2004). The method of determining informants is to use snowball, i.e. researchers assign key informants then from the key informant obtained some names of informants to be interviewed, and so on (Table 3).

Table 3. Schedule of the Research (During 2021)

Activities	Month						
	March	April	May	June	July	August	Sept
Preparing the proposal	V						
Making the instruments of research		V					
Field Research (Collecting Data)			V	V	V		
Reduce Data					V		
Analyze Data						V	
Writing the paper						V	V

4. Data Collection

In some informants, they state that often in interacting they are treated as objects, not as subjects. The object here means that these women are in a subordinated position, especially when these interactions involve men. Regarding their deformed physical condition, it seems to legitimize this woman's position as an object. For example, when they interact with others who are not disabled, they tend to suppress what they actually feel and they can only accept what is stigmatized to them. For example, there is a sentence, "You will not be able to so you should not need to".

In other cases, disabled women who feel that they are merely objectified when they do not gain the trust of those around them to be asked for opinions, especially the family. So when there is a family meeting discussing an issue, they tend to be ignored and viewed as unimportant, arguing they are female and implied that because of their flawed condition it is seen not as a normal person so there is no need to be asked for an opinion. This then affects the identification of these disabled women that their identities seem to bury their rights, then hinder them even those around them then identify them as individuals who are not worthy of accountability. Not all informants experience discrediting, there are informants who state that her identity as a disabled woman does not make her family then marginalized. He even worked in the public sector and was quite successful. He said he was given freedom from childhood by his family to determine what he wanted and he was free to express himself. She later identified herself as a disabled woman of capable ability.

Disabled women often get stigmatized by society that they are womenless individuals and do not have a good future. This happened to one of the informants who stated that because of the condition of his blind eyes, people tend to assume that the condition prevents him from being able to do anything, especially in terms of money-making work. Not only that, the condition of the blind eyes resulted in that this woman was unable to do household business properly so people tended to refuse to accept blind women as daughter-in-law. The issue of women's domestication related to the burden of taking care of the house or other household chores becomes an increasingly complex problem for women with disabilities, for example in informants who are deaf and use wheelchairs, often she is stigmatized unable to cook and all she does is relax at home. The condition of the informant who uses a wheelchair is seen as deficient and causes him to be unable to perform. In a society, an individual or person with a disability who occupies a minor position or sub-ordinate not only in terms of numbers, but also in terms of 'ugliness' and 'deficiency' will certainly be in a difficult situation. They must live within the rules made for and 'side' with 'normal' people as the dominant group.

Marginalization of women with disabilities also occurs in the public domain. It cannot be denied, especially the world of work becomes its own scourge for these people with disabilities. Job options become more limited, especially if a company or office does not have a principled policy accommodating people with disabilities. In addition, another obstacle is the assumption that the existence of disabled people who work will lower the company's image is also still there. This is because people with disabilities are still considered a disgrace or even seen as unlucky carriers. The world of education is also perceived to marginalize women with disabilities, this is as they reveal that they were once advised not to attend high school, other than because they are women, but because of their physical condition it is considered to be useless to attend high school because it will not be absorbed in the world of work. This assumption comes not only from the community, but also from their own families. In addition, facilities in the world of education are still felt less in favor of people with disabilities. For example, campuses in colleges are still many that are not designed according to the needs of people with disabilities. For example, a campus that is only equipped with stairs making it difficult for wheelchair users.

5. Result and Discussion

5.1. Self

Mead stated about the importance of self-concept, namely the ability of a person to make himself an object, not only that, the self has the ability to be a subject as well as an object which means that one has a perspective on how the self is especially when the interaction process occurs. Based on this self-concept, it can be understood that the self is very related to the mind, the self is not only related to the physical. In this case, social experience becomes important as a process to establish oneself not only as an object or as a subject.

Based on the data obtained, this social process and social experience cannot separate between mind and physical, both when oneself becomes an object or becomes a subject. Both of these move simultaneously in the process of identifying individuals about themselves, especially in women with disabilities. They find and understand their deformed physical condition, meaning that physically it is clearly visible not only to them, but to others who can see it. The problem is then when the process of self-identifying is related to the mind. For example, how they identify their disability, starting from the beginning they have a disability, because there are differences in identification for those who have defects from birth or since children with those who experience it after adulthood, for example due to accidents.

There is a process of consciousness when they identify themselves, their position as objects of the self and how people see them becomes a construct for the formation of self-concept. When people see them as objects, i.e. deformed individuals, in their minds there is a process of awareness of that perspective. They later identified that they were disabled people. This has to do with the common sense perception that disability is a sad thing even some consider a disgrace. At the beginning of the process of self-concept, it is inevitable to put the mind of a

disabled woman in general and what common sense perceives. In this case, the self as an object or subject becomes blurred and cannot be separated. What Mead says about "I" and "Me" can be seen in these disabled women, they in projecting the "I" on themselves are constrained by the "Me" that others assume towards them, so that what happens is that "Me" dominates the "I". Disabled women are identified by society as incomplete women, as humans only women are seen as being in positions below men, so when the woman is disabled, the female 'value' becomes lower and more subordinated. This is what underlies "Me" – in society's view of disabled women – becoming more dominant than the "I" in women. Often they can feel, although those around them or society in general give them encouragement of their condition, but basically what is found is pity. For them, there is a difference between giving rewards with pity. This is what ultimately affects their identification of the "I" in them. Until the end, the projection of themselves is in accordance with what society pins on them.

5.2. Identity

Self, according to Goffman, also depends on how and where the individual is, what his activities are like, then how his social organization, all of which is very supportive of the formation of *self* in a person. This is in connection with what Goffman said, namely; *The Self*, is "the code that makes sense out of almost all the individual's activities and provides a basis for organizing them. This self is what can be read about the individual by interpreting the place he takes in an organization of social activity, as confirmed by expressive behaviour (Lemert dan Branaman, 1997: liii).

Goffman in his thinking proposed two concepts of identity, namely *personal identity* and *self-identity*. *Personal identity* is usually more in framing the individual's experience by others and not by the individual himself. According to Goffman, *personal identity* does not look at an individual's subjective experience and not how an individual identifies himself, but at how he or she is identified by others. In disabled women, framing of their personal experiences seems to be projected in such a way by others. Often they feel that others seem to know better and understand more about their identity. This causes their personal identity to be more about identifying others, then appears in their daily routines, attitudes, and behaviors. For example, in terms of education, so far the view that women do not need to go to high school is still widely occurring in society, plus the condition of this woman is disabled, then society increasingly views that there will be no point in a disabled woman attending high school. Indirectly these views then frame the personal identity of a disabled woman.

In contrast to *personal identity*, *self-identity* or *ego-identity* is a person's subjective feeling of the situation he is experiencing and his own continuity and character. Through *self-identity*, an individual finds himself. *The self-identity* of individuals can be said to be in close relation to various social experiences that they experience. It is undeniable that the social experience experienced by an individual will shape the concept of himself. A woman with disabilities, has social experiences related to her disability condition, thus shaping how she perceives herself. This is called *self identity*, but often *personal identity* then wraps the *self identity* so that what appears and what appears is *personal identity*. For example, in some informants, they tend to find it difficult to find *self-identity*, this is due to people's perception of their minimal abilities. For example, when in terms of marriage, there are informants who are considered bad by the family of the future husband, even though the prospective husband is a disabled person as well. Precisely on the part of the family of the husband-to-be wants a son-in-law who is not disabled, because it is seen as a woman must be able to do all domestic work. This then becomes *personal identity*, the feeling that a flawed identity is an inability to dominate the self-concept of a disabled woman.

Goffman also divides identities into two based on the attitudes or activities of actors, among others: First, *virtual social identity*, which is identity based on what should be done by an individual and unacceptable; Second, *actual social identity*, which is what is actually done by the individual or what can be done by the individual and acceptable. That is, the identity of the individual is determined by what he can actually do in his activities, also determined by what is expected or required by others to do in his activities. In short, between what a person can do and what he or she is required to do will form an identity in the individual. In this study it was found that a disabled woman, actually has potential in her, she actually has the desire and ability to do many things, it's just that in a different way to others. For example, always others frame them as individuals who always lament their physical condition, seen as jobless and hopeless. Actually there is a desire to prove that they have the ability like others, but because this virtual identity seems to want them to present themselves and activities like what 'should' then actual social identity becomes not revealed.

5.3. Stigma

Goffman divides stigma into three types, *First*, hatred of the body – i.e. the form of body abnormalities or physical disabilities; *Second*, people who are 'rejected' because of their personality are considered sick or have disorders where they are not respected, for example people who have mental disorders, inmates, drug dependents, alcoholics, homosexuals, unemployed people, people who attempt suicide, and people who behave politically

radically; *Third*, stigma imposed on the basis of tribal, racial, national, and religious. Based on this research, the stigma in question is the first type of stigma, namely hatred of the body, the form of body abnormalities or physical disability. This is seen from the data obtained, especially related to marginalization in terms of employment, there are still companies that avoid hiring people with disabilities. The cause is the stigma that disabled people are unable to work properly and the laboratory, the performance of those with disabilities is considered not to be as good as a 'normal' person. In addition, the notion that disabled people are only fit to work behind the scenes and not fit to be employed in the front office also still dominates the stigma about disabled people in public spaces. The front office requires people who look attractive so it is considered that the presence of a disabled person in the front office will be detrimental to the company or office.

In addition to these three concepts of stigma, Goffman also divides stigma based on stigmatization or knowledge of others over the stigma that one has, among others: *First*, stigma discredit, namely 'deficiencies' or differences owned by someone known by others. For example physical disabilities that can be seen visually; *Second*, discreditable stigma, i.e. 'deficiencies' or differences that one has are not known by others because they are invisible. For example, a homosexual. Based on Goffman's concept, the study led to a discredit stigma, because 'deficiencies' or disabilities can be known directly by others because they are visually visible. The problem is that when others can know directly about this physical disability, then automatically stigmatization appears. The perception that disabled women are the number two human being in need to come to the fore, the opportunity to be able to demonstrate the ability to be subordinated. Even people tend to ignore the needs of individuals to display their abilities to the maximum. It is precisely the compassion that arises as a form of stigma against this disabled woman. Instead of giving them a chance, they shut down the opportunity.

6. Conclusion

People with disabilities are part of society and they are a minority group in terms of numbers and subordinated in terms of position. They are seen as anomalies, outside of normalcy, this causes them to be positioned unfavorably, they are viewed as poor and marginalized. This is in contrast to the growing stigma in society that disability is a disgrace, an evil, one that should be avoided that gives rise to compassion and supposition of incompetence.

The stigma about disability causes society to also view people with disabilities as weak, helpless, unable to do anything, have no job, no hope, as people who should be pitied, as people who are 'lacking', incomplete, and not perfect creatures. The negative stigma is so attached to people with disabilities, sometimes even forcing people with disabilities to 'become' as perceived by society. That is, if people with disabilities are considered weak, then the community (audience) expects people with disabilities to behave or look weak, because that is how they are constructed. This is what Goffman calls *virtual social identity*, which is the demand about how an actor (with a disability) is required to behave or display his identity. While in *the self-disabled* themselves, there is a desire to show what he is actually able to do, contrary to what society considers their abilities. What people with disabilities are actually able to do is what Goffman calls *the real social identity* in the whole *self* as part of the way they construct their identity.

Disabled women are becoming increasingly subordinated, traditional and patriarchal views on women demand that women meet the criteria of 'perfect' women in society, but when women are disabled, the position of subordination turns into highly-subordination. Disabled women are increasingly being compressed, not only by society, even from their own families, and also from another 'normal' women.

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Biography

Varinia Pura Damaiyanti, a Feminist, has been a lecturer at Fisip ULM (formerly UNLAM) since 2006. She studied S1 at The Sociology Program of Fisip Universitas Airlangga and graduated in 2005, then the S2 education was taken is Sociology Unair and graduated in 2009. Currently undergoing Doctoral education in Social Sciences Universitas Airlangga with a dissertation topic about Discourse of Feminism Pardim in Indonesia. Since becoming a lecturer, have been interested in various studies of gender and conflict, and pop culture issues. Various scientific papers, newspaper articles, and research related to these issues she has produced. In addition, she had been a team of gender mainstreaming experts in Banjar Regency of South Kalimantan Province and became a Team of Experts mapping potential conflicts in Tanah Bumbu Regency of South Kalimantan Province.