Beyond Words: Newspapers, Language Usage and Disability Stigma

Laura Kruczinski
lck410@comcast.net

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ABSTRACT

BEYOND WORDS: NEWSPAPERS, LANGUAGE USAGE AND DISABILITY STIGMA

Laura Kruczinski, MA
Department of Sociology
Northern Illinois University, 2019
Dr. Fred E. Markowitz, Director

Sociology has a long history of documenting socio-political views that are used by media to portray stereotypes and perpetuate the potential stigmas associated with race, social class, gender, and other disadvantaged social categories. There is comparatively little existing research that discusses how media coverage is connected to disability-related stigma.

In this thesis, I use grounded theory to construct a content analysis of newspapers coverage of the 2016 United States Presidential Election. From the data, I examine how stereotypes related to disability may be used in political discourse, drawing from the refined theory of stigma, as outlined by Link and Phelan (2001). In my dataset, disability-related language is used negatively in almost three quarters of all cases comprising of my sample. Within these negative cases, I find that all five components of Link and Phelan’s (2001) theory of stigma, which are labeling, separation, stereotyping, status loss and discrimination, are present.
BEYOND WORDS: NEWSPAPERS, LANGUAGE USAGE AND DISABILITY STIGMA

BY

LAURA KRUCZINSKI
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DEDICATION

This thesis is dedicated in the memory Paul Kruczinski, Ruth Kruczinski and Ken Zimdars
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CHAPTER 1
INTRODUCTION

Words have power. In the context of media coverage, including newspapers, what receives attention potentially influences how we view groups of individuals that share similar characteristics. According to Shor et al. (2015), this possibility contributes to the success or failure of any type of social progress whether that progress comes in the form of scientific development and disaster relief or political campaign effectiveness and implementation of social policy. In turn, print media, when accessible to a wide-ranging audience, influences the degree and direction society’s attention maintains towards current events and groups of people. One of the most recent events garnering national and international attention, is the 2016 United States Presidential Election.

With the sheer volume of political coverage during this cycle, my interest is directed towards examining how language associated with disability is used in the context of newspaper political analysis. How disability is discussed, framed, or even ignored reflect not only society’s view of disability, but may also have political relevance into enacted policy. In my dataset, as provided in supplementary materials, and in regards to disability-related language, this study consists of four separate components. First, I examine how often disability-related language is used in newspapers covering the presidential election. Next, I explore contextual usage of disability-related language in order to understand how language related to the body is relevant in political news coverage. Then, based on the context of language usage, I code for the connotation of disability related-
language, that is, whether the associations of the word are positive, neutral, or negative. Finally, I explore whether language associated with disability and its contextualization fit into Link and Phelan’s (2001) conceptualization of stigma, which is a social process of framing a group negatively due to the presence of the five following components: labeling, separation, and stereotyping, which later results in status loss and discrimination.
CHAPTER 2
BACKGROUND

Sociological literature has a lengthy track record of documenting the social differences between and within groups of individuals along with how they may be compared or contrasted (Collins 1990; Smith 1992; Campbell 2009; Omi and Winant 2015). This is particularly relevant in cases when norms and values related to a group in question are not only compared and contrasted but also disseminated and interpreted by members of society. Historically, much of this literature discusses how group differentiation occurs on the basis of sex and race, among other categories (Shah and Bradbury-Jones 2018). It is important to understand mechanisms as outlined in sociology of race and gender, follow similar patterns in how the mainstream media, such as newspapers, can contribute to views on disability. Moreover, as I will discuss below, such views may be negotiated in the relationship between a reader and a news columnist and reproduced in social interactions with a reader’s immediate everyday surroundings.

Gender scholars, for example, point out that the relationship between what is published and disseminated to the public has an association with magazine or news outlet staff, specifically editorial boards (Shor et al. 2015). According to Schor et al. (2015), women are not covered as often in newspaper article coverage. When women are covered by newspapers, they are underrepresented in political, sports, and business sections. The implications with how and the extent in which women are covered in newspapers have implications for disability especially
when we consider gender-based issues potentially relevant to the disability community, such as
domestic violence and educational attainment (Jung 2002; Bradbury-Jones 2018).

The study by Shor et al. (2015), is backed up by previous scholarship, both empirical and
theoretical, such as Patricia Collins (1990) and Dorothy Smith (1992). This is especially relevant
to discuss as accusations of gender-based violence have repeatedly been openly discussed
regarding then presidential candidate Donald Trump, as well as the husband of candidate Hillary
Clinton, former President Bill Clinton. This violence has the potential to shape the voices of
covering trauma survivors who live with mental health conditions such as anxiety, depression,
and Post-Traumatic Stress Disorder (PTSD).

These observations are echoed by scholars in sociology who study race, such as
Alexander (2012), Banks and Hughes (2013), as well as Omi and Winant (2015). For example,
stereotypes of deviance and crime historically have been associated with race (Alexander 2012,
Banks and Hughes 2013, Omi and Winant 2015). The main relevance in discussing race and
gender scholarship within sociology of disability is in their contributions to how socialization is
connected to group formation along with how marginalization and the stigmatizing of groups
happens on both a structural and individual level (Ridgeway 2006). In addition, race also shapes
the way we contextualize stigma and disability associated with drug use, acquiring physical and
emotional disabilities, as well as who is to blame for having a diagnosed disability (Alexander
2012, Banks and Hughes 2013).

In terms of physical disabilities, Banks and Hughes (2013) found that men of color with
physical disabilities and are born with their health conditions face negative commentary from
people assuming their disability is due to their own fault such as the consequences of being in a
gang. In the case of disability narratives being framed in a racial context, responses denote
assumptions that when disability is present in communities of color, the race and disability narratives conveyed in dominant discourse assume that disability is acquired from injury resulting from risky behavior. Thus, the main frame in which disability occurs in some communities is one of blame and fault shifted onto the person with the disability in question (Banks and Hughes 2013).

Although the social implications and life prospects are noted as different for people of varying races and genders, sociology has a sizeable gap in studying the impact of social views on disability (Shah and Bradbury-Jones 2018). Disability scholarship parallels previous gender and race scholarship primarily with studying mechanisms of group differentiation that compare and contrast this subgroup to dominant or mainstream society. Similar to race and gender scholarship in the social sciences, disability scholars point out that group differentiation does impact how disability is covered in media. How society views persons with disabilities is associated with a frame or ways of understanding disability (Stone and Colella 1996; Jung 2002; Vidali 2009; Campbell 2009; Bhattacharya 2016).

These perceptions and patterns of socialization related to disability have real implications for upward social mobility and interactions with able-bodied persons, especially within structural situations (Stone and Colella 1996). These interactions and their different outcomes lead to potential problems for persons with disabilities and this can be noted in how language is used in everyday situations and can influence a person with a disability’s ability to succeed. Vidali’s (2009) findings focus on language of recommendation letters written for graduate students with disabilities. She noted that preconceived notions of graduate school environments, along with preconceived notions of disability, have potential to bleed together. The end result according to
Vidali (2009) is noted through the use of stigmatizing language in recommendation letters of students with known disabilities.

Scholars provide insight into how people, even within the disability community, can differ in their potential experiences in society (Cho et al. 2013). An example of how views regarding race, gender, and even sexuality can overlap creating stereotypes about living with a disability is HIV/AIDS (Gordon 2015). Historically speaking, HIV/AIDS has connotations for being a communicable disease that only impacts the LGBTQ+ community. Even though it has connotations for the entire LGBTQ+ community, gay men and bisexuals partaking in same-sex sexual relations receive the brunt of HIV/AIDS stereotypes. The public’s view of sexuality and sexual identity changed over time, but the remnants of sexual morality and public disgust for the LGBTQ+ community in the 80s left gaps in the desire to find a cure, social protections from discrimination based off of HIV status, and government involvement, until non-LGBTQ+ people contracted the illness and died in significant numbers from blood transfusions (Gordon 2015).

Social Policy and Models of Disability

In order to further understand how media portrays disability, it is important to first outline commonalities and differences in two popular definitions of disability. These two definitions are reflective of two main models of understanding disability impacting both public discourse and social policy. The two definitions of disability most frequently used within disability studies derive from the Americans with Disabilities Act and the United Nations.

According to the United States Department of Justice Civil Rights Division (2009), the Americans with Disabilities Act defines a person as having a disability when they “have a cognitive, emotional, and/or physical condition that limits or prohibits a person from being able
to perform major life tasks.” These conditions can range from being unable to perform bodily functions by different systems of the body, such as but not limited to, fighting off infections with the immune system, controlling breathing with the respiratory system, or controlling emotions with the neurological system. These may create difficulties or inabilitys to perform everyday tasks, such as communicating, breathing, learning, and so forth (United States Department of Justice Civil Rights Division 2009).

Similarly, the United Nations Convention on Persons with Disabilities (2006) defines disability as an impairment, which influences one or more of four potential categories of a person’s body. These categories break down into sensory, physical, mental, and/or intellectual impairments associated with the body. This impairment, when encountering or interacting with various barriers in society, limits their ability to have equal, full, and effective participation to the same extent as a person without an impairment. This is important because how we frame disability in words is reflective of how disability is perceived in everyday life (United Nations Convention on Persons with Disabilities 2006).

Social policy to protect persons with disabilities is established both within the United States and abroad. Although policies are in place, how policies are read, implemented, or understood within everyday interactions rest upon two main models of disability. One model is known as the medical model of disability. This medical model of disability, according to Shah and Bradbury-Jones (2018), views disability as rooted in an individual failing. Disability is an individual level problem that needs to be corrected by the individual rather than necessitating change of policies, structures, and/or attitudes that create barriers for the individual. Viewing the person, rather than the structures as faulty, hindered, broken, or burdensome, creates an environment where persons with disabilities may be rendered unable to fully participate in
everyday life. This inability to participate in everyday life, coupled with viewing disability as an individual problem, feeds a cycle of stereotyping the disability community (Shah and Bradbury-Jones 2018).

In contrast, the social model of disability, according to Jung (2002) and Cole (2007), is a conceptualization that sees disability as not being defined, based on a person or individual’s specific impairment, but rather caused by social and economic structures that create a differentiation of access based on one’s physical health. It is the structures, then, rather than a failure of the individual, that leads to any prevailing inequalities, stereotypes, and discrimination. Thus, such structures are powerful enough to negatively impact life chances (Jung 2002; Cole 2007). The two dominant models of disability along with the definition of a disability are important because, together, they reflect not only social policy but also stereotypes, discourse, and how people interact either directly or indirectly, towards persons with disabilities. One example is found in Bhattacharya’s (2016) study of how we use language to perpetuate stigma.

Bhattacharya (2016) explains that people label disability, and thus create a situation where we separate and segregate the population into groups, both between and within disability categories. This is especially complicated, as in the case of disability, because not all linguistic and literary features used take into account the existence of invisible disabilities. Labeling begets the use of descriptives, which not only solidify group belonging, but also frames context of group belonging for those who hold that label. Furthermore, it can contextualize a group of persons with disabilities and erases the responsibility of social structures to be inclusive, framing the disabled population as having needs, rather than rights. In addition, discrete linguistic devices, such as metaphors, link movement as having both normative and positive traits. Superficially positive linguistic devices are also commonly used in ways that are, in reality,
negative, undermining the real, systematic exclusion persons with disabilities face. Overall, has implications for relationships between people and structures (Bhattacharya 2016).

In short, social actors and contexts reflect dominant views of disability. This contributes to social understanding related to how a society defines disabilities and creates social policy relevant to the disability community. In the case of newspaper coverage, language is one way in which social understanding of disability is further constructed. The media helps construct this relationship through a partnership between those who create media and those who consume media.

One form of media, or newspaper coverage, constructs this definition through the partnership or relationship between a newspaper journalist and their readers. If disability is viewed as a negative quality, it is possible that such relationship can perpetuate language that stereotypes and stigmatizes persons with disabilities when it goes unchallenged. By the same token, stereotyping and processing of stigmatization associated with the disability community can be disrupted by those same readers who have the ability to comment either directly to the journalist in question or through contacting the specific newspaper either online or through the mail. Whether understandings of disability are discussed or ignored, this relationship is one that can potentially reflect the current state of structural and attitudinal ableism and when discussed within a political context, can also impact the state of disability-related social policy.

Symbolic Interaction: Social Interaction, Modified Labeling Theory, and Stigma

Two theorists with influence on the understanding of the intersection of language, social interaction, and stigma include George Herbert Mead and Herbert Blumer. The late George
Herbert Mead ([1911] 2000) discusses the necessity for the social sciences to utilize scientific methods in order to expand upon the knowledge of social life, including the components that make up how society has and continues to progress, while noting for uniformities that may arise. One of these uniformities is the presence of tools to build upon our current and advancing society. More importantly, Mead notes that our use, understanding, and expansion of tools has become more abstract through the process of manipulation (Mead [1911] 2000).

We have seen the influence of manipulation, according to Mead ([1911] 2000), in many facets of social life. For example, he points to the role of manipulation of tools to better understand abstract theoretical notions relevant to science, such as atoms and molecules. This extends to manipulating social abstract concepts, such as different types of mass societal values and democracy. Although many are quick to point out that social sciences have some problems, which Mead acknowledges, using the psychological fixation on the soul, there are ways in which we can see the relevance of traditional scientific method to our everyday understanding of life. He points to political life, along with the area of the legal system, explaining the necessity of evaluating behavior through empirical means, even if those means are the result of improving upon the tools of traditional science (Mead 2000).

Blumer (1956) expands upon Mead ([1911] 2000) especially when we consider the parallel between Mead’s conceptualization of manipulation and Blumer’s emphasis on interpretation. Blumer (1956) emphasizes and asserts that a common ground found in most sociologists is the notion that interpretation is central to not only how individuals and groups interpret a situation but also how they interact with objects. This interpretation and how we act in accordance to experience an object occurs no matter how mundane an object may seem, such as a toothbrush, but this also applies to more abstract concepts, such as a political election. When
this is done on both an individual and collective level, how we define events, objects, and situations become relatively stable, and thus, crystalized within structures and institutions. To be clear, although such definitions can be crystalized and reproduced, there is always potential for definitions to change based on situations and experiences which may call for redefining an object or a situation (Blumer 1956). One way in which we see interactionism play out in everyday life is through the study of social stigma, along with how that social stigma pertains to social groups.

Stigma on the foundational level, as outlined by Erving Goffman (1963), refers to the schematic categorization of an individual as undesirable and at risk of social rejection by others due to the possession of one or more socially deemed negative characteristics. These characteristics include those of a physical or behavioral nature as well as those resulting through affiliation. Stigma can be divided into two main kinds: discredited or visible stigma and discreditable or stigma that is concealable. Discredited stigma is one type of stigma often associated with stigmatizing traits that are noticeable upon first glance. At the same time, if a stigma is invisible and easily hidden, it is what Goffman (1963) refers to as discreditable. One person can interact within a social space carrying multiple types of stigmatized statuses that vary by degree of visibility. In addition to visibility, the degree to which a stigma status can interfere with daily interactions is based upon what Goffman (1963) refers to as mixed contacts. These mixed contacts occur when those perceived as normal by larger society interact within the context of a social space with someone possessing a stigma. (Goffman 1963).

Goffman (1963) adds that when members of society at large or those of an individual’s immediate social context view a said characteristic as being stigma laden, the individual then has to navigate being judged via stereotypes rather than being accepted as “normal” by others. The concepts of disability and stigma intertwine because if by definition, a disability is considered
limiting, the notion of limitation in and of itself is a negative trait. Since stigma is the result of an application and projection of a negative trait onto an individual, thus separating him, her, or them from the normal population, both terms are relevant to examine in tandem.

Much of the research on stigma and the body, particularly in respect to disability, examines mental illness. Markowitz and Engelman (2016), for example, study how college students view individuals with mental illness in regard to social distance by diagnosis, perceived dangerousness, as well the level of distance the respondent has to affiliation with those with a mental illness. Persons in the study were categorized as the “own,” “wise” and “normal,” based on categories of distance from the particular stigma outlined by Goffman (Markowitz and Engelmann 2016). The “own” according to Goffman (1963) are individuals who belong to the same stigmatized category, whereas the “wise” are individuals with a personal connection to someone with a stigma status in question. The term “normal” refers to individuals not attached to the stigma in question. Using an experimental survey design, randomized scenarios of an individual (“John” or “Mary”) (Markowitz and Engelman 2016).

Findings from Markowitz and Engelman (2016) demonstrated that overall, the level of stigma status matters to how an individual is perceived in regard to social distance. Overall, the closer a respondent is to the stigma status of mental illness, the less likely they are to distance themselves from an individual with a mental illness. This effect, however, is washed away most when the effect of perceived dangerousness is in play. Markowitz and Engelman (2016) point out that this could be due to wanting to avoid what Goffman (1963) coined a courtesy stigma.

Noting that there is a culture on a university campus among student peers that indicate the existence of a mental illness in a potentially negative manner, students who identify with having a mental illness may be less likely to utilize services as well as disclose information
regarding their health status. This could result in fear of the possession of a stigmatized health condition, such as mental illness, being discovered by peers, as well as faculty and staff. Weighing the costs and rewards regarding social rejection and changes in their working relationships may provide privacy to the degree of concealability; however, it may come at a cost of being able to self-advocate and have means that could intervene when health-related challenges impact their school work.

When it comes helping sociology students learn about the social construction of stigma, Rodgers (2003) explains that one can look to visible traits of the body as an example in how the two are connected. Although this connection is understood within the context of an in-class exercise, she notes that real social institutions and structures, such as those of legal, political, and medical institutions, can aid in the construction of stigmatization (Rodgers 2003). The university structure, which includes classrooms, are just one of many social institutions in our society. Media, like a university, has its own norms and regulations as well as formalized structures that work in relation to differing countries as well as society at large. As these structures all play off of and influence each other, this interaction and communication includes the values and views a society has at large, including those related to specific social groups.

This fits in with Link and Phelan (2001) because they discuss the influence of power structures on how we label, separate, and stereotype groups, leading to status loss and discrimination. This conceptualization of stigma by Link and Phelan (2001), as utilized in this study, builds on the foundational knowledge of stigma outlined by Erving Goffman and referred to by numerous sociological works. This study goes beyond the foundational understanding that is usually referenced in social theory classes and rather pulls from the refined conceptualization from Link and Phelan (2001), which expands on Goffman’s (1963) contribution.
Modified Labeling Theory, according to Link et al. (1989), is relevant to note when discussing the implications stigma has on the social experience of people with disabilities. Modified Labeling Theory explains that labels can produce negative outcomes, even if the production of a label does not directly create a mental disorder. Labels and the internalization of them are the result of socialization, especially in regards to how others view someone with a mental health condition. This also influences how they interact when receiving medical treatment, among other interactions (Link et al. 1989).

The anticipation of facing discrimination and devaluing, Link et al. (1989) explains, may create a situation where the person with the diagnosis feels threatened with interactions with others. A person can take a few routes in coping with these anticipated social interactions with others, either by keeping their condition or treatment a secret, withdrawing from social contacts, or educating others about their health condition. The degree and type of coping mechanism, along with the degree of fear a person with a label of a mental health condition can impact not only the person with the label, but their social networks and supports (Link et al. 1989).

Although the context of Modified Labeling Theory as outlined in the article by Link et al. (1989) centers on mental health conditions, this theoretical paradigm can also expand to persons in the disability community who have other forms of body diversity, whether physical or cognitive, on top of emotional disabilities. Thus, it reflects potential implications for social contacts with others, especially when it is uncertain how these social contacts with end. This is particularly because disability is not just a social feature, but also has the capacity to be a component of ones’ perceived self and social identity. Furthermore, it also may influence not only the self, but also other peoples’ views regarding the disability community in general, as well as its varying counterparts. This can extend to other conditions that can be classified as
disabilities beyond mental health conditions, such as HIV/AIDS, autoimmune conditions, and cerebral palsy.

This study will explore stigma from the Link and Phelan (2001) refined conceptualization of stigma. In this model, stigma occurs when an individual or group of individuals face five social processes. These five processes consist of labeling, separation, and stereotyping, which later lead to status loss and discrimination. Within this refined conceptualization of stigma, all of the five processes must happen for stigma to occur (Link and Phelan 2001). Furthermore, it is important to emphasize that these five components are imposed by those in positions of power.

When any component of this set of criteria is missing, Link and Phelan (2001) acknowledge that there are some elements in which stigma has the potential to form, but stigma in itself is not concretely present. This conceptualization of stigma acknowledges the previous contributions outlined from Goffman (1963) and demonstrated above. Departing from Goffman, who does not specify nor state the necessity of all five components, this conceptualization helps delineate the difference of what actually constitutes as stigma, while what is in danger of facing stigmatization. This makes sense both in theory and in practice because not all deviations from the social norm within any society are necessarily equal in their consequences nor hold equal experiences of sociopolitical and sociocultural marginalization or shame.

Present Study

Building upon the designs of studies by Haller and Ralph (2001), Corrigan et al. (2005), and Gough (2007) study, a content analysis procedure is employed to examine the four major exploratory components I previously discussed. However, this particular content analysis will combine both qualitative content analysis with rudimentary quantitative frequency counts. This
is done in order to examine not word trends and thematic relevance to stigma frames that combine to fit the definition of stigma, according to Link and Phelan (2001).
CHAPTER 3

METHODS

Haller and Ralph (2001) discuss the benefits of performing a content analysis for studying disability and news media, while providing two case samples highlighting strong studies that examine newspapers. They explain that content analysis is beneficial in explaining both overt or manifest content, as well as latent content. For example, content analyses that strictly examine terminology follow a more overt or manifest examination, whereas discussing the implications of using outdated disability-related terminology present in a wide circulating newspaper fills a more covert or latent content analysis (Haller and Ralph 2001).

Corrigan et al. (2005) also used a content analysis to explore how and whether newspapers reflect structural stigma affiliated with mental illness. They used a method of selecting U.S. newspapers with daily circulation greater than 250,000 readers and also selected the largest newspaper in less populous states that could not account for this large of a readership in order to create a more geographically dispersed sample, coming up with a sample of seventy newspapers. Within this sample, they searched using a database for all stories that contained any of the following three terms: “mental,” “psych,” or “schizo.” Stories were excluded if this language was associated with an article about drug or alcohol abuse unless it also clearly included mental illness. Their coding scheme that was consistent with common themes associated with stigma and mental illness was that of treatment, advocacy, recovery,
dangerousness, and blame. They tracked whether stories associated with these themes increased, decreased, as well as the percentage of thematic focus (Corrigan et al. 2005).

Gough (2007) also used content analysis to explore how men’s relationship with food, especially within the context of diet and health, is contextualized and how meaning is attached to the food men eat. He used newspaper articles to breakdown the frequency of articles discussing this relationship, breaking down the frequency of words and themes that are attached to masculinity and food, and connecting it to larger factors that relate to implications for the lifestyle and diet of men. Although his study is not disability-related, it is another example of how health (and illness) can be studied through the indirect effects of framing something as rudimentary as food and highlighting the acceptance of how socialized gender norms play into even the most mundane relationships people have. The value of this study is in the methodological use of analyzing discourse through grounded means or through looking at data to see what frames arise in order to understand how particular gendered frames are employed in printed media (Gough 2007).

These previous studies were influential in terms of directing the methods for my own study. In this study, I examined one hundred and fifteen different newspaper articles from three major news sources: The Washington Post, The New York Times, and USA Today. These newspapers were chosen because they were the top three United States newspapers on a list of top twenty-five global newspapers by digital footprint and readership within the United States and they were the few sources from the list in which I had institutional access. This list comes from the PEW Research Center, a non-profit and non-partisan empirical research group that focuses on social and demographic trends, both within the United States and abroad (https://www.pewresearch.org/about/).
My coding process was two-fold. First, I used a keyword search in Nexis Uni, formerly known as Lexis Nexis, to examine articles published during the 2016 presidential election, simply starting out with “2016 presidential election.” I picked the 2016 United States Presidential Election as my case for analysis because it is the most recent national election in the United States at the time of beginning this study. From there, I narrowed the selection to occur between July 18th, 2016 and November 9th, 2016. This time frame is significant because it covers between the first of the two major party conventions, where the presidential candidate to represent their party was announced until the day after the election, where the respective candidate winning the election, Donald J. Trump, became the president-elect.

Then, I randomly sampled eighteen terms from a list of over two-hundred terms that are commonly associated with disability, according to the National Center on Disability and Journalism (2018), otherwise known by the acronym NCDJ. These eighteen terms span four major categories of disability, which are general disability (referencing disability in broad terms as one main group), cognitive (mental), emotional, and physical disability. These terms were picked by assigning each term a number by order appearing in the list (see Table 1). Then, I used a number randomizer on Google to pick the respective eighteen terms. A full list of terms used in the initial keyword search are located in tables 2 and 3, along with my full dataset (see Tables 2 and 3).

After the initial search of “2016 presidential election” via Nexis Uni, I then completed eighteen respective individual searches of each individual term. From here, I compiled every article within the search results containing these key terms, with exception of duplicate articles present in the database. After searching for all eighteen terms across three newspapers, my sample comprised of one hundred and fifteen different news articles to examine. Within each
individual article, I examined each piece line by line, documenting each specific instance of the words present in my keyword search, as well as any variant of each of the individual keywords that appeared.

Table 1
Initial Key Word Search by Disability Type

<table>
<thead>
<tr>
<th>Key Word</th>
<th>Disability Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bipolar</td>
<td>1. Emotional Disability</td>
</tr>
<tr>
<td>Blind</td>
<td>2. Physical Disability</td>
</tr>
<tr>
<td>Crazy</td>
<td>3. Emotional Disability</td>
</tr>
<tr>
<td>Cripple</td>
<td>4. Physical Disability</td>
</tr>
<tr>
<td>Deaf</td>
<td>5. Physical Disability</td>
</tr>
<tr>
<td>Derange</td>
<td>6. Emotional Disability</td>
</tr>
<tr>
<td>Disable</td>
<td>7. General Disability</td>
</tr>
<tr>
<td>Dumb</td>
<td>8. Mental (Cognitive) Disability</td>
</tr>
<tr>
<td>Dwarf</td>
<td>9. Physical Disability</td>
</tr>
<tr>
<td>Fit</td>
<td>10. Physical/emotional Disability</td>
</tr>
<tr>
<td>Idiot</td>
<td>11. Mental (Cognitive) Disability</td>
</tr>
<tr>
<td>Insane</td>
<td>12. Emotional Disability</td>
</tr>
<tr>
<td>Lame</td>
<td>13. Physical Disability</td>
</tr>
<tr>
<td>Loony</td>
<td>14. Emotional Disability</td>
</tr>
<tr>
<td>Psycho</td>
<td>15. Emotional Disability</td>
</tr>
<tr>
<td>Senile</td>
<td>16. Mental (Cognitive) Disability</td>
</tr>
<tr>
<td>Stupid</td>
<td>17. Mental (Cognitive Disability)</td>
</tr>
<tr>
<td>Triggered</td>
<td>18. Emotional Disability</td>
</tr>
</tbody>
</table>
### Table 2

**Breakdown of Disability Word Connotation by Newspaper**

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
<th>Total Cases By Newspaper</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Washington Post</strong></td>
<td>24 (11.16%)</td>
<td>161 (74.89%)</td>
<td>30 (13.95%)</td>
<td>215 (36.88%)</td>
</tr>
<tr>
<td><strong>New York Times</strong></td>
<td>24 (7.57%)</td>
<td>220 (69.40%)</td>
<td>73 (23.03%)</td>
<td>317 (54.37%)</td>
</tr>
<tr>
<td><strong>USA Today</strong></td>
<td>1 (1.96%)</td>
<td>47 (92.16%)</td>
<td>3 (5.88%)</td>
<td>51 (8.75%)</td>
</tr>
<tr>
<td><strong>Total Cases By Connotation</strong></td>
<td>49 (8.41%)</td>
<td>428 (73.41%)</td>
<td>106 (18.18%)</td>
<td>583 (100%)</td>
</tr>
</tbody>
</table>

### Table 3

**Breakdown of Negative Disability/Health Category Representation by Newspaper**

<table>
<thead>
<tr>
<th></th>
<th>Physical Health and Disability</th>
<th>Mental Health and Disability</th>
<th>Emotional Health and Disability</th>
<th>General Health and Disability</th>
<th>Total Negative Cases By Newspaper</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>USA Today</strong></td>
<td>14 (29.79%)</td>
<td>1 (2.13%)</td>
<td>17 (36.17%)</td>
<td>15 (31.91%)</td>
<td>47 (10.98%)</td>
</tr>
<tr>
<td><strong>New York Times</strong></td>
<td>43 (19.55%)</td>
<td>13 (5.91%)</td>
<td>111 (50.45%)</td>
<td>53 (24.09%)</td>
<td>220 (51.40%)</td>
</tr>
<tr>
<td><strong>Washington Post</strong></td>
<td>49 (30.43%)</td>
<td>14 (8.70%)</td>
<td>44 (27.33%)</td>
<td>54 (33.54%)</td>
<td>161 (37.62%)</td>
</tr>
<tr>
<td><strong>Total Cases Negative Coverage By Combined Disability and Health Category</strong></td>
<td>106 (24.77%)</td>
<td>28 (6.54%)</td>
<td>172 (40.19%)</td>
<td>122 (28.50%)</td>
<td><strong>428 (100%)</strong></td>
</tr>
</tbody>
</table>
In addition to this, I also documented each specific instance of other health-related words or phrases that appeared in each article, as well as disability. I included health-related words, in addition to disability-related words, as it was not something I expected to necessarily be used outside of a health-related context. After examining how many health and disability associated words were used within the 115 articles sampled, my sample size of word usage comprised of about 583 instances in where such language is used.

Words that arose then went through a primary and secondary coding phase where they were subsequently assigned a stigma frame, as well as a connotation of either positive, negative, or neutral. Words are coded as negative when either the term was originally considered stigmatizing by both pre-existing literature represented in my literature review or the respective words were also discussed as either being misused or breaking journalistic style guidelines for respectful reporting according to the NCDJ. As with all other words in the neutral category in my sample, this second contextual category was assigned to instances where a disability was only referred to by definition, when the context of such words were used in a way where both negative and positive descriptors were left out. Words were coded as positive when the context associated with the term were attached to positive descriptors and did not partake common linguistic devices associated with stigmatizing language use, as referenced by Bhattacharya (2016).
CHAPTER 4

FINDINGS PERTAINING TO DISABILITY, WORD USAGE, AND FREQUENCIES

As previously stated from the outset of this study, my aims for exploring disability-related language in political analysis were as follows: to examine the frequency, context and connotation of disability related language, as well as to see whether or not disability-related language is used in a manner that aligns with Link and Phelan’s (2001) outline of social stigma. The first question I had regarding disability related language and political discourse revolved around how often this language appeared in print. In order to answer this, I began by performing a keyword search, using preliminary terms selected from the National Center on Disability and Journalism Style Guide (see table 1). As is the case for grounded theory, I started will general questions that, through entering only a few guiding terms for my keyword search, and to group the contextual usage of keywords by crude themes. Although these terms did show up in my data, a theme that arose from these keyword searches was that when one of these terms appeared in print, other terms associated with health and disability were also present. I was not expecting to have physical characteristics associated with health along with illness to be used in a contrasting manner with explicit use of terms associated with good health to be used in linguistic manners that pitted disability with able-bodiedness. I also performed a secondary coding including both health and illness terms in my data along with other arising words. From there, I used Link and Phelan’s (2001) categories to see if both health and disability related words and their linguistic themes fit into these categories.
As stated above, some of these terms were on the NCDJ style guide but were not part of my initial keyword search. When any of those terms did show up in the article, they were subsequently included in my data of the articles already pulled for my study. As the NCDJ style guide is not exhaustive, any disability and health-related terms appearing in the data outside of my initial search was also subsequently included in master dataset. However, it is important to mention that I did not do a separate keyword search of these terms through Nexis Uni when they did appear in the sampled newspaper articles in my full dataset.

Overall, from the data, words related to disability and health appear 583 times. Within a sample of 583, disability is positively portrayed only 48 times and is portrayed in a neutral manner 105 times. This being said, disability is portrayed negatively 428 times, comprising of a little bit below 74% of all cases in which disability is mentioned. It should be noted that disability-related concerns and activism related to the election were only mentioned in two of the one hundred and fifteen articles presented in my paper. The rest of the articles used disability as a literary device to describe or emphasize the speaker, whether that speaker was the author, an interviewee, or a person quoted after speaking in a public forum.

In the combined sample, each quotation is broken into one or more groupings to determine the frequency of specific types of disabilities or health-related categories. These categories, as mentioned previously, include mental (cognitive) health and disability, physical health and disability, emotional health and disability, as well as general health and disability. Of the combined sample, not taking connotation into account, there are 182 instances of language affiliated with general health and disability, making up a total of 32% of the disability and health related language that appeared in the sample. Emotional health and disability language appeared
223 times, comprising of 38% of all instances of disability and health-related words in my sample.

With respect to mental disability or health, also referred to as cognitive disability or health, appeared in my sample twenty-nine times, comprising of 4.9% of the entire sample collected in this study. The last category, or physical disability and health, appeared in the sample approximately 149 times, which falls to 25.5%. Breaking this down by newspaper, disability and health-related language appeared altogether in USA Today 51 times, 317 times in the New York Times, and 215 times in The Washington Post.

The general frequencies for the health and disability categories is relevant to my study because I was curious to see if health and disability was discussed in a political election, as well as to see if disability is represented in a way that is stigmatizing. Although disability turned out to fill the criteria of stigmatization as a group, I was interested in seeing if the differing types or groups of disabilities may or may not be represented in the sample. Even though it is not the central focus of my study, it helps provide a clearer picture of how we perceive and understand the world, using the body as a descriptor.

More importantly, it helps us in observing what about the body is appropriated for political use. A final interesting takeaway from my study is that from all of the one hundred and fifteen articles represented in my data, only one actually discussed the concerns of persons with disabilities as a voting bloc, as well as the systemic issues this demographic of the country faces. I also brook down the data by each newspaper sampled because I was interested in how the body as descriptor is used within each specific newspaper.
Link and Phelan’s (2001) steps leading to the creation of a stigmatized group were used as a preliminary guide in thematic coding to help sort whether each specific word’s use had a positive, negative, or neutral connotation, as well as whether the context in which each word was used provided an example of one or more of the steps that demonstrate the presence of stigma. To refresh, Link and Phelan’s (2001) components or steps that indicate either the potential or presence of stigma include labeling, separation, stereotyping, status loss and discrimination. I combed through the data to see if any specific patterns emerged, using Link and Phelan’s (2001) framework as a preliminary guide of examples of potentially stigmatizing behavior. After combing through all of the data, each of the five components of stigma were represented in political news coverage of the 2016 United States Presidential Election.

**Labeling**

As stated previously, first component of the process of stigmatization, or labeling, according to Link and Phelan (2001) serves a purpose of simply the noting that there is a difference. This difference is usually quite salient, but may occasionally differ by time or place. The one major takeaway from this process is labels are often assumed as stemming from nature, rather than through social construction among many actors (Link and Phelan 2001).

In the sample for this study, the process of labeling occurs in almost every instance. Before continuing it is important to note, as Link and Phelan (2001) explain, that as we move to the latter stages of the potential or occurring stigmatization process, the earlier stages are also always present. This is because the latter stages are dependent upon the previous ones to exist (Link and Phelan 2001). After combing through the data, this stance by Link and Phelan (2001)
did not quite hold up. I will discuss where this data set deviates from their theoretical posit, as well as what can be done to modify it.

One example of labeling can be seen in the following quote by Caitlin Gibson (2016:C01): “The teenage boy in the campaign ad has a noticeable limp - and something to say.” In this instance, Gibson (2016), is labeling a specific boy, noting that in order to tell him apart from other potential teenage boys, we would be able to pick him out by the way that he walks. In essence, it is not what he has to say that sets him apart from potentially other teenage boys in other political ads, but that this specific boy can be remembered because there is a noticeable difference in the way that he walks. In painting a picture that emphasizes this physical difference, it is an act of labeling and distinguishing that there is a difference. Labeling in and of itself does not necessarily call for the definition of this instance this as being anything other than neutral.

This quote neither attaches any positive qualities, nor does it attach any negative qualities to the boy in question. In this case, it simply labels the boy as having a limp that may be noticeable to people who can see him. Although in describing his limp as noticeable, the author takes for granted that anyone who meets the boy or hears the boy speak, either in person or via consuming the specific advertisement in question, would be able to label him as having a limp. In fact, not everyone who interacts with the political ad in which the boy is present may be able to see him. There may be people who are exposed to the advertisement who are legally blind or have a vision impairment, making it difficult to see these differences. They may be exposed to the advertisement through being in the same room as a television with the advertisement playing, thus being exposed to his message through hearing it.
There are other instances, particularly within the article by Caitlin Gibson (2016) that are prime examples of labeling and distinguishing a difference. These were particularly salient in reference to her coverage of the Democratic National Convention. For example, she notes “There was blind singer Timmy Kelly, who performed the national anthem at the Democratic National Convention” (Gibson 2016:C01). Another example is “Anastasia Somoza, an activist with cerebral palsy, addressed the same crowd from her wheelchair onstage” (Gibson 2016:C01).

Although Gibson (2016) provides multiple instances of prime examples of labeling, other authors and articles have examples of labeling. This was quite a common occurrence, particularly in relation to physical and emotional differences. Michael Gerson (2016) partakes in labeling, or distinguishing a difference, during more than one instance during the following passage:

It is one thing to go after ‘low-energy’ Jeb Bush or ‘Lyin’ Ted Cruz; it is another to mock a disabled reporter, stereotype Mexicans as rapists, condemn a judge because of his ethnicity, attack the faith of a grieving Gold Star mother, or call for systematic discrimination against Muslims. These are not violations of political correctness. They are violations of human decency, revealing serious moral impairment (Gerson 2016: A13).

In an interview with a Trump supporter, Stephanie McCrummen (2016) quotes an interviewee’s previous online interactions with a liberal. As with the example of Gibson’s (2016) passage, labeling and distinguishing a difference often coincides with other frames of stigmatization at the same time. Going back to the interview McCrummen (2016:A01) has with a Trump supporter, the interviewee states at one point during the interaction she has acknowledged writing insults online, such as: “‘Have a cup of shut up juice DemTARD!’ during online interactions with those from the major opposing party.

Though this quote can fit under more than one frame of stigma in this study (and as this will be discussed further on in my analysis), these quotes raised potential questions as to when a
label is or should be applied, as well as who can apply stigmatization frames without serious consequence. Considering the title of McCrummen’s (2016:A01) article is, “Finally, Someone Who Thinks Like Me”, it begs the reader or readers to wonder at what point does or should someone’s beliefs be attached to a medical diagnosis, as was the case of the woman in this article. Furthermore, at what point should political ideology be attached to not only social pathology but also psychological pathology.

From the data, the use of medicalized labeling to either explain away a candidate or supporter as either normative or non-normative, changes by context. Most of the time, as is stated above, the use of emotional and cognitive disabilities to highlight a difference as existing is used frequently and from both sides. Peter Thill is quoted in an article by Steven Overly (2016:A13) stating: “What Trump represents isn’t crazy, and it’s not going away.” Donald Trump is quoted in Harwell and Jordan (2016:A01) as referring to both democratic candidates, Hillary Clinton and Bernie Sanders, by “the nicknames ‘Crooked Hillary’ and ‘Crazy Bernie.’” John Taylor (2016:T10) quotes an interviewee’s opinion of the two major candidates in the 2016 election as presenting a choice between “a bipolar car-pooler or Orange Julius Caesar.”

Even so, we also see the use of labels associated with physical disability throughout the newspaper election cycle coverage. Michael Gerson (2016: A13) discusses that Donald Trump uses the term “crippled America” as part of his platform, referring to the current state of the country, to resonate with his followers who believe the country is going downhill. Donald Trump is not the only person to use the term “crippled” in relation to the state of one or more components of our country’s current standing. From The New York Times, The Editorial Board (2016), refers to the state of Supreme Court within the context of the current election cycle, with the following description:
Sixteen years later, the Supreme Court sits crippled, unable to resolve the most pressing legal questions facing the country. Two events -- the sudden death of Justice Antonin Scalia in February and the unprecedented refusal of Senate Republicans to even consider President Obama’s pick to fill the vacant seat -- have converged to throw the court’s future as a functioning institution into doubt (The Editorial Board 2016:A22).

This is important to note because not only is a label of “crippled” attached to descriptions of the Supreme Court and the country as a whole it is used in a negative context. The implication here is that the body is used, primarily a socially deemed different body, is used in a way that connects these institutions with an inability to function. As the origin of the term is used to refer to persons with physical disabilities, it connects inability to function to not only an institution, but the original referent that the word is used to describe, who are persons with a physical disability.

In addition to usage of words associated with physical disability, words and meanings attached to physical illness were also used as a way to discuss potential problems with Hillary Clinton’s candidacy. Timothy Egan (2016) explains that Hillary Clinton’s opponents often spread disinformation about the connection between Hillary Clinton having an illness, as well as the degree of seriousness an illness could be. Egan (2016) can be quoted:

A big political lie often starts on the Drudge Report, home of Obama-as-Muslim stories. He jump-started a recent smear with pictures of Hillary Clinton losing her balance -- proof that something was very wrong with her. Fox News then went big with it, using the Trump adviser and free-media enabler Sean Hannity as the village gossip. Then Rudy Giuliani, the internet diagnostician, urged people to Google ‘Hillary Clinton illness’ for evidence of her malady. This forced Clinton to prove her stamina, in an appearance on Jimmy Kimmel, by opening a jar of pickles. But what you don't know really can hurt you (Egan 2016:A19).

Stereotyping

The previously mentioned quote in the article by McCrummen (2016), although constituting a label, is an example where labeling and distinguishing a difference moves into
playing on stereotypes. In this case, the Trump supporter in the article combines the term Democrat with the term “retarded”, or a word associated with cognitive disabilities that also is considered to be an ableist slur. The implication is that not only does the specific referent have a cognitive impairment, but by also combining the term “democrat” with “retarded,” this Trump supporter implies that most, if not all, democrat-leaning individuals are associated with cognitive impairments in general. In attaching a label to a group of people, and in pairing this label with negative words and ideas, this social actor is partaking in stereotyping. In using a term associated with disability, disability is as much implicated as having a negative connotation as having a democratic political affiliation.

This is not the only example, nor is the example of implying that a differing political orientation having connotations with some impairment isolated to just conservative commentators. In Juliet Eilperin’s (2016:A06) article, Barack Obama is quoted in relation to the state of the Republican party as the result of Trump’s nomination for the presidency stating: “If your only agenda is either negative - negative is a euphemism, crazy - based on lies, based on hoaxes, this is the nominee you get.” Although this quote demonstrates labeling, in use of the term crazy, it also partakes in stereotyping. Stereotyping occurs in this quote because President Obama connects the term crazy, a negative term to refer to neurodiverse individuals, with fringe leaning falsehoods. This quote also demonstrates a separation and comparison of each party’s state of functioning.

Another prominent example of such stereotyping includes an article by Frank Bruni (2016). Bruni hypothetically jokes about how fitness tests associated with psychological health would play out if Trump were to be required to go through them. A couple of tests he mentions include the Rorschah test and the Minnesota Multiphasic Personality Inventory. A quote by
Bruni (2016:A23) reads as following: “MINNESOTA MULTIPHASIC PERSONALITY INVENTORY This psychological profile makes assessments about such traits as paranoia (check!), hypomania (check!) and more.” Bruni (2016) continues on further in the article, stating:

Is his case a classic one of narcissistic personality disorder? Does he fit the criteria for borderline personality disorder, which can include outbursts, obsessions and a primitive ego structure? Or is it something more esoteric? I'm no Freud and I'm no longer Jung, but I detect a mix of auditory hallucinations (he experiences wild applause even when there isn't any), erotomania (the delusional certainty that other people lust for you) and rosiephobia (a pathological fear of mouthy female talk-show hosts) (Bruni 2016:A23).

Although filled with more quotes that are repetitive in nature, the common thread presented by Bruni (2016) in his article connects Trump’s behavior with a pathological diagnosis. The main question is not if Trump has a mental health condition, but rather what mental health conditions he fits based off of crude notions of what specific diagnoses such as Borderline Personality Disorder entail. Although cognitive and emotional disabilities are more prominent in my data set and although they are usually used in reference to political parties and their candidates, there is also the use of stereotyping as a metaphor. This is particularly the case when words associated physical disability are used.

One prominent example comes from an article by Ben Terris (2016). He states: “If Murphy was looking for an on-the-nose moment, he found one: Severi was deaf, but even she thought the 2016 election had gotten too loud” (Terris 2016:C01). In this instance, Terris tries to make an emphasis on just how all-consuming and all-encompassing the negativity that revolves around the 2016 presidential election. He uses a person who is hard of hearing as a benchmark of just how prevalent the political atmosphere and tension impacts people.

This is an example of stereotyping because there is a connection between awareness and introspection of an environment and event with the degree of physiotypicality or how ‘normal’ one’s body is perceived by dominant society that a person is perceived to have. In this case,
being deaf or hard of hearing is connected to the stereotype of ignorance or lack of awareness. In essence, the author, Ben Terris (2016) is stating that the political climate got so bad that even a deaf person could understand and observe the degree of tension that was present, when they would otherwise be oblivious.

Hearing impairments are just one physical disability that is mentioned in my data set that has stereotypes attached to it. Michael Gerson (2016:A13) mentions the following “Donald Trump’s vision is unremittingly dark-in his words, ‘a crippled America.’” Here, Gerson attaches the concept of crippled, which traditionally refers to general physical disability or socially deemed non-normative bodies, with a sense of dread or bleakness at the current state of the United States. Although the original context does have the same connotation, as used by Donald Trump, no reporters make not of the contextual root of the term ‘crippled.’ This term, according to the NCDJ (2018), originated as a descriptor for physical disability. In the article by Gerson (2016), the term crippled is attached to schemas of dread or misery by both the author and Mr. Trump. Instead of publicly noting casual ableism, the author doubles down on the word usage to criticize not the origin or choice of words, but reaffirms the stereotypes attached to the word “crippled” as a way to emphasize Trump’s negativity about the state of the country.

Separation

Connected to and building off of processes of labeling and stereotyping is the notion of separating individuals based on the differences created by labels. As with the quote by the Trump supporter in the article by McCrummen (2016), not only is there a label of cognitive incompetency attached to the idea of democrats, but it also labels and separates Democrats from Republicans. This use of terms associated with cognitive disability has been used multiple times
as a separation between Democrats and Republicans. Dan Balz (2016), for example, quotes bumper stickers made by a political science professor at the University of Buffalo, to be distributed during the election.

The author interviews the professor, who describes one of them in the following words: "The first line says, 'My candidate is an idiot,'” he said. The second line is, 'Your candidate is worse" (Dan Balz 2016:A02). This example separates supporters of one political candidate from another by the qualifications of the candidate.

In describing one candidate using the term “idiot”, such description follows stereotypes of incompetence by political leaders, while using a term associated as a slur attached to those associated with cognitive disability. At the same time, there is a distinction made between someone with a cognitive impairment, that although it is a bad quality, there are worse things in a candidate than incompetence. In this case, the lack of descriptors other than worse does not denote what those negative traits or qualities are, but that there are more problematic traits to be found in a political candidate running for office.

Separation of “us versus them” is not always used as a direct comparison between Democrat versus Republican people or candidates, but also as a state of comparison between a country with itself during different time periods. Michael Gerson (2016:A13) points this out aptly through the following observation: “America the ‘crippled.’ America the evolving. These are two parallel, non-intersecting convictions about our country.” This statement is not only a reflection of two Americas as noted by two different party platforms, but also as an America by two different experiences, depending on one’s social status.

Furthermore, disability, at least in terms of cognitive capacity, is also used as a measure of morality separation between the two political parties. For example, Vozzella and Guskin
(2016) quote an interviewee about how divided the state of Virginia is in terms of candidate support during the presidential election, which states:

You can say if a person believes in welfare ... they're good-hearted. They're misguided. They mean well, but they're dumb. There comes a point when you have to draw a line and say: 'No, they're not dumb. They're evil (Vozzella and Guskin 2016:B04).

This quote used by Vozzella and Guskin (2016) gives us a measure of how a Republican woman views modern Democrats. The mark that separates the two parties, in this instance, is over the issues of welfare, and as later discussed, abortion. Having a platform that believes in expanding welfare, according to this woman, distinguishes Democrats versus Republicans by degree of intelligence. However, the main distinguisher that deepens the divide for this interviewee is the matter of pro versus anti-abortion stances of Republican versus Democrat leaning people and their respective candidates. A separation occurs between groups using disability as a measure, implying that while cognitive disability is not to be lauded, it is to be taken with compassion.

Going back to Obama’s quote in Eilperin’s (2016) article, although labeling and stereotyping are present, it is also important to note that the labeling and stereotyping also feed a separation of us versus them, or in this case the Republican Party and their candidate, Donald Trump, and the Democrat Party with Hillary Clinton as their respective candidate. Obama implies blame on Republicans for having enough issues to warrant a candidate such as Donald Trump. Donald Trump is connected by Democrats, such as Obama, as having beliefs that are not only fringe, but preposterous. Democratic party, in contrast, is implied to provide a candidate that is the antithesis to those problems that the Republicans face. In essence, a choice in candidate is a reflection not only of a political party’s values and platform, but it also highlights the differences that exist.
The next stage of Link and Phelan’s (2001) stigma that is present in my data is status loss. The quote from Vozzella and Guskin (2016) referenced in the section about separation also provides a great example of status loss. This is because when referencing something as ‘dumb’, in comparison to the implied smartness of economic conservatism as a platform, it implies the existence of a hierarchy. In this case, ‘dumbness’, is not equal to having an absence of cognitive impairment. It is less than, implying that not only in this case are the implication of smartness and dumbness two separate categories, but are also related to each other on a scale of desirability. In this example, however, it is not the worst possible scenario, in terms of people who exist. Notions of morality, or that of being evil, as opposed to good, are more important in separating individuals than cognitive impairment.

Even so, such types of comparisons are examples of separation because the concepts of intelligence and evilness are contrasted with general cognitive impairment in a hierarchical manner. In this case, the referent to the word ‘dumb’ not only applies to democratic party platform, but also people who hold those beliefs. The notion that such a platform is subpar not in implementation, but through some inherent inferiority, and that inferiority is noted with a word that has ableist connotations.

In this case, policy is not being attacked, but rather, through ad hominem style, an entire group of people are being seen as not only different via intelligence levels, but also less than. This distinction has a dichotomy of superiority and inferiority, that through rooting it in cognitive differences and intelligences, has ableist connotations. Interestingly enough, being seen as ‘dumb’, or possessing a cognitive impairment, is not seen as being as problematic, and is
being seen as separate from being evil (Vozzella and Guskin 2016:B04). That separation has the potential for not only distinguishing groups, but also has the potential to create a hierarchy.

An article by Gail Collins (2016) provides an example of how words associated with mental illness can be attached to status loss. In her article, those surrounding Donald Trump are depicted in the following manner: “Nobody wants to get sucked into the Trump vortex. For months now, he's been on a downward spiral that keeps getting wider and weirder. Everything he touches turns to crazy” (Collins 2016: A23). The outcomes of Donald Trump’s interactions are not depicted as problematic, a train wreck, or disastrous, but rather, as crazy. “Crazy” stands in as a euphemism for not only weird, but as the result of failure or problems. We see that this is the case when we consider how the outcome is connected to the perceived falling or “downward spiral” of Trump’s candidacy and public persona. In which case, the outcome is attached to social actor’s fall in status.

Status loss is not always referred to in a metaphorical, or even implied in a stigmatized sense. It is also discussed in matter-of-fact terms, as seen in the article by Gibson (2016).

People still pity disabled people, or they're 'inspired' by us. But we're not yet recognized as a legitimate voting bloc… intended to raise disability issues in the 2016 race and shares Ladau's concern that the current debate ‘plays on the notion that disabled people are vulnerable and need to be protected’ (Gibson 2016:C01).

This quote is important and demonstrates status loss because of the implications of having a disability from the perspective of two people who actually live with disabilities. In my sample of 115 articles, only 2 articles ever discussed the disability community as a political bloc and a community facing civil rights concerns twice. Furthermore, this quote comes from the only article that discusses disability as a sociopolitical issue and is the only time that it was discussed from the perspective of people who live with and openly discuss disability as a social issue.
From the perspective of people with disabilities, although no language was used in a stigmatizing manner, it discusses the problem that people with disabilities as a group face during political elections. When they are separated and labeled in a negative manner (e.g., as people to feel bad for, or as people to use to make people without disabilities feel better, essentially objectifying them as a means to an end), they are not only separated as a group but also seen as unimportant compared to other groups when it comes to political strategy. If their importance for political campaigning and platform strategies are seen as less than, in comparison to other groups, their status is less important and is at a loss to more important groups.

**Discrimination**

The last of the main components of stigma, or discrimination, is also present in my dataset; however, it is present in a more abstract manner. The main quote that demonstrates discrimination is highlighted by David Brown (2016):

None of this information, however, comes close to what we already have attesting to a candidate's physical fitness. It's hard to hide serious illness. If either Clinton or Trump had cancer, a brain tumor, congestive heart failure, epilepsy, an untreated mood disorder or a half- dozen other things that could get in the way of a president's performance, we'd know it by now. They've been crisscrossing time zones, sleeping irregularly, eating things handed to them, not exercising enough and forswearing privacy for two years. They're still standing (except for Clinton this week) and making sense (more or less). A presidential campaign is a marathon only the fit can finish (Brown 2016:A19).

This quote is important because of the implication of who should or should not be able to fulfill the requirements of serving as president of the United States. In this quote, the author lists multiple health conditions that are potential deal-breakers for the author and potentially other people. Although foreseeing disability as possibly hindering a presidential candidate’s job performance, the author is not only partaking in labeling, separation from ‘healthy’ candidates,
and implying potential status loss of a candidate’s ability to take office effectively, he implies that multiple people would be able to tell.

Furthermore, by connecting multiple people trying to figure out someone’s health status in order to decide who to vote for in the election, there is an implication that not only can this person potentially not perform duties associated with holding office, but that it would impact multiple people potentially voting for a healthier candidate. He implies this by later stating that only the ‘fit’ candidate of the two, from a health perspective will be able to get through this campaign season. When implying that health influences votes, the potential for discrimination is there. Even so, discrimination is not necessarily noted per se, at least primarily via stereotypes of candidates, but through stereotyping potential qualities that voters will scrutinize, leading to an implication that health-based discrimination in voting practices may influence the election. Essentially, the author implies calling for people to consider that these health statuses can influence the job and will be considered in choosing a candidate.

Although stigmatizing language does not actually show up, this also ties in to the issue of not being seen as a legitimate voting bloc and issues associated with unemployment. For example, in Gibson’s (2016) article, disability activists are noted for discussing how there are issues of access to education, healthcare, disproportionate mass incarceration and violent victimization, along with presence in public spaces, due to non-compliance and lack of enforcement by the government in respect to the Americans With Disabilities Act. It is asserted and equally as stigmatizing to assert that product candidate could or should be disqualified, based off of stereotypes associated with disability, as suggested by David Brown (2016). Such social, structural, and attitudes reinforce the lack of structural ability for persons with disabilities to be able to participate in everyday life (Gibson 2016).
This is discussed further in an article about unemployment rates, as reported by Patricia Cohen (2016):

Social Security disability, in particular, he argued, had "effectively been buying people off the unemployment rolls and reclassifying them as 'not in the labor force.' Mr. Goolsbee called this 'a kind of invisible unemployment' and noted that 'underreporting unemployment has served the interests of both political parties.' Some people have willingly made the choice to stop working. But many, particularly those in their prime working years, are missing from the labor force. Recent research by Alan B. Krueger, a Princeton economist and former Obama administration adviser, found that nearly half of the seven million men between 25 and 54 not in the labor force were on daily painkillers or disabled. 'Just because people left the work force out of discouragement, doesn't mean they're not available for work,' said Patrick J. O'Keefe, director of economic policy at Cohn Reznick and a former deputy assistant secretary in the Labor Department. 'It just means the economy is not generating sufficient jobs at sufficient pay levels to get them back in' (Cohen 2016: B1).

When a group of people are given reduced access, have reduced life choices and are not accounted for in social structures, in comparison to the general public, it denotes the presence of discrimination. In this case, discussing issues relevant to the disability community, rather than stigmatizing language in and of itself, documents the presence of discrimination in my dataset.

The Importance of Power

Although the five components of stigma demonstrate whether or not the potential for stigma to exist is present, there is one more major component that we must keep in mind. In this case and in the context of in-group belonging, versus out-group stigmatization, there must be an imbalance of power. In other words, that the group attaching negative labels must have more power than the group receiving the negative attributes.

The act of stigmatization can potentially backfire, especially when not in a position of privilege. Continuing on in the article the same Trump supporter, who was noted as having a disability and living in poverty, received a medical label through excessive attempts to stigmatize
liberal politicians, falling into fringe or extremist ideology. The consequences of such circumstances are explained as following by McCrummen (2016):

She had gotten them in February, during a difficult time in her life, when she had been involuntarily hospitalized for several weeks after what she called a ‘rant,’ a series of online postings that included one saying that Obama should be hanged and the White House fumigated and burned to the ground. On her discharge papers, in a box labeled ‘medical problem,’ a doctor had typed ‘homicidal ideation.’ Melanie thought the whole thing was outrageous. She wasn't a person with homicidal ideation. She was anxious, sure. Enraged, definitely. But certainly not homicidal, and certainly not in need of a hospital stay. ‘It never crossed my mind that I'm losing it,’ she said several months after her release, and a big reason for this conviction was the rise of Donald Trump, who had talked about so many of the things she had come to believe (McCrummen 2016:A01).

This is, of course, in comparison to merely attaching fringe beliefs to only being a source of a political platform, as is the case with Donald Trump. Donald Trump, as well as other right-wing politicians are quoted in my data as having a record of stating fringe beliefs that are not far off of the Trump supporter in question. In the case of power, it plays into the nuance of labeling and distinguishing a difference, especially since labels are open to interaction and interpretations, or readings of these interactions, based off of time and place.

This connects to Link and Phelan (2001), who go into a little bit about the nuance of social location and the implication time and place has on labeling a behavior or an idea under a medical diagnosis or diagnoses, as is the case, with the label of hyperactivity as a medical symptom verses a variation in social behavior. If one group of people labels and distinguishes a difference between those in power as belonging to an outgroup, stigma, according to Link and Phelan (2001), does not exist. To the contrary, as the example provided by McCrummen (2016), it can lead to further status loss, or reinforce status loss that is already present.

In contrast, Dan Balz (2016:A02) discusses Donald Trump through the following: “He insulted a prominent veteran and former POW, and a disabled reporter.” In addition, going back to Michael Gearson’s (2016) article, he not only insulted a reporter with a disability and a
military veteran, but also people of color, particularly Mexicans, as well as those who practice Islam. The difference between Donald Trump and his supporter in McCrummen’s (2016) article is that although both have called varying degrees of political violence during the campaign, as well as having their sanity questioned, only one of them was able to become president-elect while the other faced involuntary hospitalization.

This several questions related to power. The first concerns how power should be defined. The second question that should be posed is whether or not the media has some power and contribution to feeding ableism to the general population. The third question, then, would be who assigns power. If it is the average person and such behavior goes unchecked by the average person, the media, and political systems, then does this mean that disability is a stigmatized group? From the data of this study, the answer would be that disability is a group that faces not only the potential for stigmatization, but faces enacted stigmatization that is present in both institutional, as well as through social circles.
CHAPTER 5
DISCUSSION

Overall, my study explored disability-related language in political analysis. More specifically, I wanted to examine the frequency, context and connotation of disability related language, as well as to see whether or not disability-related language overall was used in a manner in which the disability community could be seen as a stigmatized group according to the standards set out by Link and Phelan (2001). After examining 115 different newspaper articles from three major news sources, disability-related language emerged over five-hundred and eighty-three times. Out of that sample of 583 instances of disability-related language, an overwhelming majority of the examples portrayed disability in a negative light. Altogether, every frame of stigma was represented in my sample demonstrating that at least during the 2016 presidential election in the United States, when disability is mentioned, it is done in a stigmatizing manner and reflects the disability community as a stigmatized group.

Although my study makes some contribution to sociology of disability and sociolinguistics, there is much room for improvement. These limitations are important to acknowledge, and in acknowledging these limitations and the potential for expansion, it can direct and positively influence future academic work in this area. One limitation of my study is time. Due to time limitations of completing my study, the data set I compiled was smaller than what I would like. If my study were to be expanded in the future, my data set would include more newspapers that covered the 2016 presidential election,
using the entire list from the PEW research study included in my study. In addition to the newspapers from this list, I would like to extend the coverage to the top twenty-five newspapers both in print, as well as via digital distribution.

Furthermore, the time period for the study would extend to prior to the primaries, back to the start of any politician’s intention to drop their hat in the race for both the Republicans and Democrats. In addition to impacting which newspapers were used in my study, time also impacted how many words associated with disability were used in my study. If time were not as big of an issue, I would expand the words I included on my keyword search to include all of the words on the list compiled by the National Center on Disability and Journalism (NCDJ).

A second major limitation of my study is institutional access. My original intent was to collect data from five newspapers listed in the PEW Research Center’s list based off of digital distribution, however, I only had institutional access to three of the top five United States newspapers by digital distribution. This limited my potential sample size. Any limitations on my sample size had potential to change the outcome of my study. Given that all frames of stigma were present from only three newspapers, adding another newspaper or two would not have changed the outcome where stigma was not present. It does change the character as to the frequencies in which each of the frames were present.

Third, a potential limitation any study pertaining to disability stigma would be the social location of the researcher in relation to the disability community. Whether or not I, as a researcher, have a disability, my social location has the potential to impact how I understand or ‘read’ disability. On one hand, if I do not have a disability, I can only read into how disability is covered through the lens of someone who does not live with a disability, nor can I have the understanding of what words and stigmatization means for members of the disability community.
It can, in turn, influence what I read as stigmatizing and what I read as simply non-consequential or having connotations associated with persons with disabilities.

On the other hand, if I do have one or more disabilities, it can not only influence how I could perceive words associated with one or more hypothetical disabilities I possess, as well as how I perceive and understand disability-related words, their meaning, and the connotation of stigma. As some types and categories of disability are more common in my dataset than others, it may mean that some disabilities have a greater degree of stigmatization than others. Furthermore, it may mean that, although disability as a broad social group is represented as a stigmatized group, it may be that some types or specific disabilities do not actually face stigmatization, but rather, only face the potential for facing stigmatization.

If disability as a whole is considered a stigmatized group, a researcher admitting or disclosing their social location relative to the disability status has potential costs, especially if the researcher in question has a disability. Although doing so is a form of bracketing, which is considered good practice in qualitative research, it is a controversial move, which has no implications other than distancing if not part of the disability community. However, as disability, according to this paper is considered to be a stigmatized group, bracketing is probably not advisable for either party. If one is able-bodied, it can be seen as a type of social distancing from the disability community. Worse yet, is if researcher with a disability were to bracket their perspective, it could come at a cost of status loss or discrimination by revealing their health status in a potentially public forum.

Finally, as this study covers only a snapshot of one United States national election cycle, there are limitations in the kinds of knowledge claims that I can make. This is because I cannot track any potential attitudinal or structural changes that may show a different picture of stigma.
To clarify, different societies may view disability through different paradigms and even within our own society, there has been and continues to be a shift in how disability is seen over time. This, of course, may change how disability is defined, as well as how people understand the concept of disability. Furthermore, changes in time and place can also change the preferred method of media communication, especially related to political coverage of elections. This could change the relevancy of using newspapers as a unit of analysis for study, particularly as technological shifts in how we receive information can influence the survival of print journalism, as well as redefining what ‘print’ and ‘newspaper’ journalism is in and of itself.

Future research should be directed in comparing and contrasting different election cycles, in order to address the limitations of this study. Furthermore, a more comprehensive picture may be found if a replication of this study’s sample not only included national newspapers, but also local and international newspapers. This way, we may be able to see if there are differences between local and regional terminology, as well as how that may change whether or not disability is more likely to be covered as a social issue, rather than merely a linguistic device and vice versa.

It would also be worthwhile to do a content analysis and comparison between different media sources, such as television, blogs and social media, such as Twitter and Facebook. As print, social, and television media have different community guidelines, it would be interesting to see if that changes what, if any conversation, that exists connecting disability to a political election climate. Further studies can also compare national and regional elections, both within the United States and abroad. When dealing with different languages, their respective slang and idioms, along with community standards, ranging from media censorship to enacted disability-related social policy, as well as degrees of mainstreaming different disabilities within public life,
it would also potentially impact changes in what is labeled a disability versus just a social characteristic, as well as whether or not a disability is stigmatized.

Finally, future social scholars who are proponents of Link and Phelan’s (2001) reconceptualization of stigma may want to partake in theoretical work to adjust potential problems associated with their ontological and epistemological claims. Although this can be done without partaking in the type of study that was used for this thesis, it is worth it for the scholarly community to scrutinize and make theoretical contributions to how we, particularly as social scientists, understand stigma.

After using Link and Phelan’s (2001) frames of stigma, I have a theoretical adjustment to suggest, which is to collapse categories for simplicity. Instead of having five categories, consisting of labeling, separation, stereotyping, status loss and discrimination, there should only be four categories. I suggest eliminating separation of us versus them because labeling an attribute of a group is already a linguistic device to note any trait that exists in society. In order to have a label, a trait is not likely to be taken for granted, but rather assigned a word because its existence is noted. Instead, a label is attached to an existing trait, it also means that there are other existing traits or items to not have that label.

Essentially, if we assign a label, ‘A’, for example, it is reasonable to assert that ‘not A’ also exists. For, if ‘not A’ wasn’t to exist, a label would not be needed. Even if it does not have spatial existence, ‘not A’ as a trait can be perceived by the naked eye of person or people, it has abstract, or theoretical existence. So, essentially, the labeling practice always partakes in separation of us versus them. Whether or not that separation is minor or major is not the problem. Not everything that has a label and separates us is considered a major trait that implies
a negative connotation, but a negative (or positive) connotation cannot occur without labeling a
trait as existing differently from a different trait.

Due to this, Link and Phelan (2001) do not provide reasonable, nor adequate argument to
define the differences or distinctions between labeling and separation. With that in mind, this
lack of adequate distinction, in my experience, made it not only theoretically problematic but
also problematic in practice when coding, although it was my guide for initial coding schemes by
stigma frame. As such, it may be seen as a potential limitation of this study. However, for
future research, it may be necessary to revisit Link and Phelan’s (2001) refined stigma frames
and build upon their work to re-conceptualize how proponents of this model may need to re-
conceptualize and rework the ontological, as well as epistemological posits made by these
scholars.

Although there are improvements to be made, using the work of Link and Phelan (2001)
is useful in understanding the existence of stigma in society. From my study, it was clear that
stigma is, as they point out, multifaceted. Those with disabilities face labeling, separation,
stereotyping, status loss and discrimination. When it is reflected in how we cover the news,
particularly when it is reinforced in the political sphere, it has far reaching consequences. If we
do not keep this in mind, the worst outcome is not a candidate mocking a person with a
disability. The potential outcomes potentially impact voting trends regarding policy that further
influence and stigmatize the disability community. As anyone can acquire a disability at any
point in their lifetime, it is important as voters to understand how conversation not only frames
issues, but frames the potential investment a country may have in bringing disability-related
concerns to the forefront of social policy.
REFERENCES


