Let us assume that we know that the obese, the homosexual, the paraplegic, the epileptic, the medical doctor, and the beauty queen are perceived as people who are, in a sense, different from the majority of those who make up our North American Anglo-Saxon society.

Upon a very simplistic and superficial examination, we can conclude that they are different because the majority of people are not obese (although we are headed in that direction), homosexual, epileptic, an M.D., or a beauty queen. This observation dead ends right here.

A more interesting question to pose is the following: Is there anything all these people have in common in addition to the fact that they are different from the majority? And if we further pursue our inquiry, is there anything that distinguishes these people among themselves other than the obvious feature that makes them different from the majority? If the answer is "yes" to both questions, it would be relevant to ask what they have in common and how they differ from each other.

In fact, the focal point of this presentation is aimed at finding plausible answers to these and some other related questions. First, let us establish that their differentness would be totally irrelevant if they were not perceived, labelled, and processed as different. In addition to the primary label of "different," other considerations come to play an important role in further situating them in their social context. For reasons that go beyond the scope of this paper, we can a posteriori establish that the above mentioned people can be divided into two main groups: into the first
group we shall intuitively categorize the obese, the homosexual, the paraplegic, and the epileptic, and into the second group, the M.D. and the beauty queen.

What is the common denominator of this division? The attributes of the individuals in the first group are perceived as undesirable by most people, whereas those of the 2nd group would generally be perceived as desirable; hence, the first group of attributes will be referred to as negative and the second as positive. I wish to insist upon the fact that this categorization is based on my intuition very much the same way as my intuition would allow me to distinguish a grammatically correct sentence from a grammatically incorrect sentence in my native tongue.

My social intuition allows me to further subdivide both groups: the first into obese and homosexual on the one hand, and paraplegic and epileptic on the other. In the second group, "I feel" that we can put the M.D. in one slot and the beauty queen into another. And finally, my intuition also tells me to separate the obese from the homosexual and the paraplegic from the epileptic.

Since intuition may be used only as a point of departure, as an indicator of the existence of a deep structure of moral meanings, we must now define what perceivable surface reality corresponds to this hypothetical construct to which I have just referred as the "deep structure of moral meanings."

As mentioned above some attributes are judged by the audience of the obese and the homosexual, the paraplegic, the epileptic as "undesirable" and of the M.D. and the beauty queen as "desirable." The attributes I am referring to are the obese-ness (and not the obesity), the homosexual-ness (and not the homosexuality), the paraplegic-ness (and not the paraplegia), the epileptic-ness (and not the epilepsy), the medical doctor-ness and the beauty queen-ness of the individuals. There are the attributes by which their possessors are perceived as different. In fact, the strength of these attributes is so overshadowing that, through a metonymic process, they come to socially mean the person. Thus, for example, the obese person who is also blond is not labelled "obese" and "blond" or "obese blond," but simply "obese." The same is, of course, true of the others. All these attributes break some sort of norm which full-fledged members of society are expected to respect and adhere to. What distinguishes then the two groups from one another is the manner
in which these norms have been broken by the actors. The first four actors broke them in a manner considered undesirable by those whose relevant attributes establish the norms. The latter two surpass the norms in a way the norm-makers themselves would probably like to deviate from their own relevant norms. The reaction to the first group may be expected to be adverse, to the second, favorable.

Deviating from conventional sociological jargon, I shall refer to both types of reaction as stigma. Stigma, in my definition, therefore, means the societal reaction to people who are perceived as relevantly different from those who make up the social context. The adverse reaction will be qualified as "negative stigma," the favorable as "positive stigma." My main concern in this paper is the study of those reacted to with a negative stigma.

Let us now examine the two subdivisions of the negative group. The obese and the homosexual on one hand break a different kind of norm than the paraplegic and the epileptic. The latter two manifest attributes over which they have no control and for which they, therefore, cannot be held responsible. In other words, they break the norms in an undesirable fashion, but they are victims more than actors. They are not, therefore, held responsible for their differentness. It is noticed and reacted to but with some degree of attenuation. These individuals are just negative norm-breakers. (I wish to mention in passing that the positive counterpart of this phenomenon may be typified by the beauty queen whose identifying attribute is acquired without active responsibility or involvement.)

The other two negatively stigmatized individuals, the obese and the homosexual, are more than just negative norm-breakers. They are held responsible for their non-adhesion to specific social expectations. Imputation of responsibility is in direct correlation with taking a personal moral stand. Anyone taking a personal moral stand exposes himself to a public assessment of that stand in relation to common, public morality. Since the notion of public morality is judged to be inherently good by the prevailing moral-norm-makers, any act in opposition to it is automatically judged evil. How do moral-norm-makers establish the goodness of their norm? In opposition to evil-ness. According to J. D. Douglas, (1970) "When we observe and analyze the moral communications in our everyday lives, we find that social meaning of either deviance (immorality) or respectability (morality) can be adequately defined only in reference, whether implicit or explicit, is made to the other, its opposite."
Thus, heterosexual-ness could not be defined as socially good without the existence of homosexual-ness (Why of the two, the latter is judged immoral is irrelevant; what is relevant is that it is homosexual-ness that is so assessed.) The same is true of the obese. Harold Garfinkel (1967) has suggested that for members to be perceived-to-be-normal appears to be conventionally situated or placed in the "natural-order-of-persons-taken-for-granted." To be accorded such placement is to be deemed normal, and this location is a moral one. In this case, normal equals moral, and, consequently, abnormal equals immoral. It is for this reason that the obese, as well as the homosexual, are both labelled immoral, hence undesirable.

Good behavior cannot exist without its opposite, evil behavior. This is why immorality, in its many forms, is a necessary and inevitable social reality. It is to be expected then that our society will always strive to establish rigid categories of evil behavior and evil features. It is only by doing so that it can assure a majority of its members' standards for good behavior. The more strict and the more elaborate are the definitions for evil, the more clear, widespread and secure the attributes for good-ness. This social reality may be considered as the primary causation of a vigorous process of negative stigmatization.

This opposition of good vs. evil is deeply rooted in our culture. The precise content may be, and is indeed, altered from time to time, but our basic categories remain. We eradicate, or attempt to eradicate, our worst evils and then we readapt our comparisons. The result is what used to be lesser evil now is worse. For example, sexual behavior was not considered a social problem because it was kept from becoming public. Now we allow it to pop up on the social surface and all of a sudden it becomes one of the greatest social problems that threaten the American or the Canadian way of life. Hence, anyone deviating from the established socially good sexual behavior is labelled immoral, that is abnormal, that is negative deviant. What does this good-evil opposition imply as for social behavior? If good necessarily implies evil, then everyone must be constantly busy making sure that his/her is a good behavior. Since the social identity of a person is obtained by comparing his/her identity with that of all others in his/her social context, it is to be expected that one gains moral worth in proportion to the moral loss of others. This leads to an incessant two-way endeavor: upgrading of self and degrading of others. The
stronger the sanction against a person who has been successfully degraded in a lasting fashion, the greater the moral value of the degrader. What value would there be in being slim or heterosexual if it were not possible to degrade the obese and the homosexual (or possibly both)? This upgrading of the selves at the expense of others' selves is the secondary causation of negative stigmatization.

Simultaneously with the upgrading-downgrading activity, each individual is preoccupied with building an image of her/himself as a moral (or normal) member of society. This image must be plausible to her/himself (and to those identified with her/himself) mostly because this image will be the foundation for participating in everyday social interaction. If there is any discrediting component in that image, the interaction will become strained or impossible. Thus, depending on the nature of the negative stigma, interaction between the upgraded, moral, normal and the degraded, immoral, abnormal deviant will vary from frictional, dishonest (or two-level) communication to total breakdown of communication. The former is the case of the obese, the latter is that of the homosexual.

This upgrading-downgrading work is not limited to individuals. It is a readily observable phenomenon on the collective level as well, ranging from more exclusive private organizations to large scale social classes. Just as individuals degrade other individuals in order to upgrade their own social identity, individuals also form institutions to degrade a whole class of people. A good example of this sort of organization is the Ku Klux Klan whose sole reason for being is the social degradation of anyone not White, and, in so doing, a superior class of human beings is made of Whites. On the social class level, we find the same degrading activity: the well-to-do degrade the poor. The label "lower class" is by definition a term that degrades by presupposing the existence of a better, i.e., upper-class. And the real upper-class, of course, in turn degrades the middle-class which considers wealth as a symbol of virtue. Since moral value is attached to economic status, this comparison may be transposed into other realms which may have bearing not only on the degraded person's social identity but also on his total biography. Thus, law enforcement agencies and the courts are more lenient towards the upper- or middle-class offender, i.e., (s)he is presumed to be more virtuous due to her/his social environment and (s)he is said to have "good prospects" to reform. In contrast, the poor offender is presumed im-
moral and is said to have "bad prospects" to become "normal." As is usually the case, a pertinent verbal cliché clearly describes the "normal" attitude toward those poor who have not violated any law: they are said to be "poor but virtuous."

The degrading-upgrading activity is the most dynamic among those hardest pressed to find other people who can be plausibly degraded by them. (The emphasis is on the adverb plausibly due to the fact that there are people who are, themselves, so deeply degraded that their degradation work is a priori ineffective. A criminal, an addict, a known homosexual are so discredited that any moral communication aimed at upgrading their identity by spoiling someone else's could be disregarded by "normals." It is generally true that the lowest ranks of the dominant social groups are the most prejudiced (degrading) and the most self-righteous (self-upgrading) against the highest number of deviant attributes. This life position is a desperate attempt to upgrade their social identity; an excellent fictional personification is TV's Archie Bunker: he is an unbending degrader of nonWhites, non-Christians, non-squares, non-heterosexuals, non-Americans, etc. If we take into consideration the vast number of Archie Bunkers in the world, it is not surprising that a dictator finds his greatest support in the lowest class of the dominant order because they are easily swayed by all the self-upgrading possibilities he offers them. One only has to examine the socio-economic background of the SS soldiers or that of the members of the secret or political police in Eastern European Communist countries to be convinced of the veracity of this observation.

Moral-norm-makers need a rationale by which they can justify and pursue their degradation work. Two of Maurice Mandelbaum's "crucial dimensions of meaning involved in social communications" adequately identify this rationale: 1. "Moral experience has been seen by members of society as EXTERNAL to themselves, as given to them rather than created by them. Morality then is independent from man and has indeed been seen as given by God or nature." If this is so, then one is justified in labelling others "morally inferior" or "deviant," that is to say, with a negative stigma. The labeller may safely disclaim responsibility for his/her act since (s)he is only following what is naturally, or better yet, divinely or supernaturally prescribed. (S)he is just doing what is "natural" for her/him. 2. "Morality has been seen as necessary so there is no escaping it by denying it or hiding from
it. Even if one were sincerely astounded to discover that he had done something immoral, he would still be immoral for having done it and would suffer divine punishment for it.\textsuperscript{4} In fact, the punishment is altogether human but in the name of God. People invested with institutional power inflict official degradation on individuals in behalf of a higher moral right than that of the individual's, as for instance in the legal degradation ritual "People vs. John Doe." Individual actors involved in the same sort of degradation work hide behind powers beyond and above questioning ("let God be my only judge").

Thus a person who committed an act judged immoral (=abnormal=deviant), even if (s)he did it without knowing it was immoral, will be so labelled. The label will be made to stick and so will the societal reaction to her/him. In fact, making the label stick IS the societal reaction.

Making Label Stick

Up to this point, I have been speaking about what is generally considered moral. Members of a society can fairly easily agree on what is abstractly moral. They do that by relying on their native intuition. It is much more difficult to find agreement as to what is right or wrong, moral or immoral in a concrete situation. Although there may be considerable disagreement as to what is moral or immoral in a given situation, this disagreement is seldom overt. This is especially true of authority situations, i.e., any encounter between a subordinate and his superordinate. The silent disagreement of the subordinate is his/her major device for protecting his/her self-esteem and self-confidence. This is the reason why a morally degraded person accepts the negative stigma and the corresponding demeaning behavior toward him/her. Since (s)he is perceived and labelled as a negative deviant, (s)he is subordinate to anyone who chooses to treat her/him as an individual with a stained or spoiled identity. If (s)he is to retain her/his self-confidence and her/his self-esteem, (s)he will openly agree with the immorality of her/his negativity and (s)he may even contribute to her/his own degradation. Inwardly, however, (s)he may be in total disagreement concerning the immorality of her/his differentness. Such duality has been frequently observed in some obese, addicts and homosexuals. This dichotomy between public and private evaluation by the negative deviant may be observed in all those who are involved in upgrading their spoiled identity by the process of "passing."
Since there is frequent disagreement among members of society as to the morality of a situation, they enter into working agreements with each other, provided that they are not labelled negative deviants. If they are so labelled, they are not accorded equal status in partaking in the decision-making. The negative deviant has to accept decisions made with regard to him/her but taken without his consultation. The moral meaning of the situation is then defined by extramoral factors. For example, if a person is known to be alcoholic and is seen drinking, it is automatically decided by those who witness his/ her drinking that (s)he is presently engaged in an immoral act. If an overt male homosexual is seen in the company of an unknown young man, all the non-gay participants in the situation are likely to decide that the homosexual is involved in an immoral encounter. The stigmatized deviant is, therefore, not a whole person who "should" have the right to make decisions about what is moral or immoral. In most cases, the degradation work will include the prejudiced decision by the moral-norm-makers that (s)he is incapable of making adequate decisions about the moral meaning of any situation. They then feel justified in refusing him the right to enter into moral-decision-making concerning a concrete situation, even if that situation is completely disassociated from the nature of his/her differentness. Thus it is claimed that "if (s)he is capable of drinking excessively, (s)he is also capable of child molesting, drug addition, crime and who knows what else."

I have just proposed that public morality is abstract and that most members of society are in agreement concerning its meaning. I have also suggested that when we situate morality, there is no longer agreement and that in order to be able to enter into social interaction, we must establish working agreements relevant to each concrete situation. These working agreements add up within the individual to a private morality. As the gap between these two moralities becomes greater "... we get the highly purposeful form of self-presentation known as public relations, and in a very real sense, everyone, or everyone who sees how to become successful is his own public relations man."

This statement of J. D. Douglas can be extended to anyone who has information to manage about himself. The salesperson who wants to make a sale will present his/her product under its most advantageous aspect, emphasizing the positive attributes of the product. Any negative attribute the product might have will be purposefully left out of the promotion, or, if it cannot be omitted, it will not be presented as a discrediting factor.
The same manipulation of audience is operative in the person who puts himself in the display window but has an attribute that is liable to discredit or discount his/her social self. (s)he will either not broadcast the information about himself or (s)he will communicate it in the least discrediting manner.

Returning to my original group of negative deviants I can now account for the subdivision between obese and homosexual in group one, and paraplegic and epileptic in group two. The homosexual and the epileptic have nonvisible negative attributes and, therefore, can hide their stigma-yielding features in most face-to-face interaction. In many instances, it is essential to the homosexual and, much less often, to the epileptic, to withhold socially relevant information about themselves in order to avail themselves of a bogus social identity which will allow them to pursue certain goals in their biography. For example, the homosexual must keep silent about his/her homosexual-ness to apply for most jobs. The same is true of the ex-convict or the ex-mental patient. This is the class of people that D. W. Ball calls disreputable and that Goffman refers to as discreditable. In the case of the disreputable or discreditable, their lack of respectability is not known-about. Since the damaging information is not disseminated, the homosexual or the epileptic are not stigmatized until they are unmasked either by their audience or by themselves. We can fit into this group all those who are able to pass as normal, i.e., moral, as long as their negative attribute is held secret. Among these, the most common are illegitimate children, unwed mothers, Jews, etc. As mentioned above, although these people are not directly stigmatized, they bear the burden of the negative stigma indirectly. Knowing that people with attributes such as theirs are stigmatized if those attributes become public knowledge, they must forego many of the freedoms of spontaneous living. They become fragmented individuals, with impaired existences: they must avoid frequenting certain public places, they have to fear devastating, unexpected encounters, they have to constantly monitor their speech to prevent slips, etc.

On the other hand, the obese and the paraplegic cannot hide their differentness. Their relevant attributes are highly visible, thus, they cannot avoid negative stigma. While the homosexual and the epileptic, in their PR-man endeavor, are primarily preoccupied by keeping their discrediting information secret, the PR-man in the obese has the difficult task of convincing the audience that they are not responsible for
their obesity. Hence the various manipulations such as claiming glandular disorder, abnormal metabolism, hereditary corpulence, large frame, etc. The PR-man activity in the obese as well as in the paraplegic also extends to shifting the attention of the audience from their outstanding negative feature, thereby establishing that while they are obese or paraplegic, they are really normal in every other way. The obese belong to the category of individuals Ball designates as disrespectful\(^8\) and both the obese and the paraplegic fit into Goffman's category of discredited.\(^9\) The PR-man can be summed up as follows: in the disreputable it aims to keep the person from becoming disrespectful; in the disrespectful it aims to minimize the disrespectability.

The PR-man aspect of people's social motivation is quite apparent, since we all aim to win friends, allies or partners and we all aim to influence people so that they see things the way we see them. This is true not only of the negative deviant but of all who live in a competitive society. But it is more consistent and more emphasized in people who have important social information to keep from becoming public. These observations are supported by C. Wright Mill's argument: the anticipation of acceptance or rejection by others is, if not THE, basic determinant of morally meaningful motives an individual would give to his actions. The possibilities of constructing plausible imputations of this sort then became basic determinants of what one would do.\(^{10}\)

In the last few years, the elaboration of a new sort of PR-man activity may be observed in more and more individuals traditionally labelled negatively. In the above cases, the homosexual, the obese, the paraplegic, and the epileptic were all seen preoccupied with how they could most efficiently either hide their differentness or minimize its negative consequences by various manipulations. A new phenomenon emerged in the realm of managing spoiled identities. It first became evident with the Black Liberation Movement. In the wake of stepped up social and political protest against the degradation of American Blacks, first a small group of Blacks became openly angry with the negative stigma and its end-product, a degraded spoiled social identity. They reacted by choking the whole stigmatization process before its onset. Instead of presenting an attenuative manipulation of the negativeness of their salient attribute, they revalorized it, thereby vigorously rejecting any imputation of negativeness in being Black. But they went further. Upon disclaiming the negativeness, they openly espoused their differentness and
upgraded it to the degree that it became a symbol of superiority and pride. At the same time, as could be expected, they degraded all those with a non-colored skin. In other words, they did not allow the negative stigma to become efficient. They did not allow the label to stick nor did they allow the degradation work to influence their social identity. To the contrary, they made a prestige symbol out of their differentness. Thus, 'niger,' 'Negro,' and 'colored' became 'Black,' at the same time as the 'Boss,' 'Mr. Charley,' and 'the Man' became 'Whitey,' 'hunky,' etc. This new identity, based on being Black, was a positive one represented for example, in the slogan "Black is Beautiful." Thus, the negative stigma met with an impenetrable wall, bounced off and was thrown right back at the moral-norm-makers, with the severe intent of labelling them immoral for being White. Simultaneously with "Black is Beautiful," the new battle-cry was coined: "Get Whitey!" The PR-man activity of the new Black consisted, therefore, of flinging the label back onto the Black community to shed their Uncle Tom-ness. This process of dealing with negative stigma is designated (temporarily) by the term counterstigma. While the Black Panthers were unable to make the counter-stigma stick universally, they certainly succeeded in establishing an alternative identity for Blacks who wanted to rid themselves of their nigger-ness.

Not only did they accept their differentness without negative-ness, but they manifested a solid moral commitment to it, deriving from it a sense of pride, myths, and heroes, a new semiotic of culture, and thus made all those willing to share this differentness into reintegrated, whole persons. As a result, there have been more and more Whites, especially among the young and the "liberal," who have been feeling some shame due to their White-ness.

Encouraged by the success and the overgrowing popularity of the Black Liberation Movement, other stigmatized ethnic groups espoused the process of counterstigmatization. Among the most vociferous minorities were the Mexican-Americans, with their new positive identity marker, 'Chicano,' and their counterstigma slogan, "Chicano, sí, Gringo, no!" They were closely followed by the Puerto Ricans and the American Indians. Then, the phenomenon of counterstigma further spread to other stigmatized groups, including the Women's Liberation Movement with its new positive identity marker, "Ms.," and counterstigma slogan "Sisterhood is Powerful!" and it is labelling traditional moral-norm-makers "male chauvinist pigs," a negative stigma that is rapidly
becoming more and more efficient. More or less simultaneously with the Women's Liberation Movement came the birth of the homosexual rebellion. The new positive identity marker is 'gay' for individuals, 'gay' or 'homophile' for organizations, and the movement is identified as 'Gay Liberation.' Their counterstigma position is well expressed in such publication as Rita La Porte's "The Causes and Cures of Heterosexuality"\textsuperscript{11} and Judith Rascoe's "Creeping Heterosexuality: America's No. 1 Social Problem."\textsuperscript{12} There is also an Insane Liberation Front claiming in its manifesto the right to experience reality the members' own way, without incarceration in mental hospitals or punitive treatment such as shock therapy and frontal lobotomy, and the right of the individual to take his/her own life, etc. And I recently learned of the Fat Liberation Movement and of the Skinny Liberation Movement. Mrs. Joyce Fabrey, treasurer of the former, describes their members as "militant fats." While they differ from the other counterstigma movements in that they do not claim that fat is beautiful and slim is ugly, they do claim that fat may be beautiful and slim may be ugly (opening the discussion on the modality of identity markers). Above all, rather than accepting the negative stigma meted out to the obese, they fight to be able to live as full a life as possible. The Skinny Liberation Movement, the counterpart of the Fat Liberation Movement, ran a symbolic presidential candidate in the 1972 elections by the name of Spriggy (a 20-year old male student from Columbia University) and their slogan was "Skinny is Beautiful." The Movement already published a bulletin and a nationwide education programme has been mounted to acquaint the general public with the problem of the extremely thin.

In conclusion, then, I suggest that the definition of negative stigma should be revised. For degradation work to be successful, it is no longer enough merely to have as target a particular feature or type of behavior that used to be censured as a matter of course, even if normals still conceive of it as negatively different. The individual who is to be processed with a negative identity marker and a negative stigma must share the opinion of the moral-norm-maker about the negativeness of this differentness. If this does not happen, effective stigmatization cannot take place. If the person so labelled rejects the label, the process breaks down. I wish to end this expose by offering a model for the process of stigmatization. Since, from my perspective, stigmatization is a type of moral communication, my model will be a communicational one.
Moral communication takes place in relation and response to a referent which consists of the set of moral norms composing abstract, public morality. These referential norms were established, for a given social context, historically. The act of moral communication in the case of stigmatization process begins with the perception, by a member of society, of the violation of a relevant norm. A disapproval-message is coded and transmitted by the moral-norm-makers through the interactional communication channel. The code used may be verbal or nonverbal. The audience, i.e., the norm-breakers, receives it, decodes it and stores it. At this point, before transmission of response-message is undertaken, three main alternatives must be indicated based on the intention-position of the norm-breaker: 1. (s)he intends to transmit a response-message indicating conformity to the assigned label; 2. by disclaiming norm-breaking, (s)he intends to manipulate the sender into modifying his/her initial position; 3. total rejection of the assigned negative label. In case 1, both labeller and labelled will adjust their behavior according to the contents of the messages received. This is the model for effective stigmatization. In case 2, the perceived-to-be-norm-breaker sends a manipulative message upon the reception and decoding of which he expects that the original sender will respond by according him the status of respectability. If the original sender reacts in such a manner to the receiver's response-message as to indicate that (s)he disbelieves the veracity of the response-message and will let his/her reaction be known by a behavior which denies respectability to the perceived-to-be-norm-breaker, there is most likely some unintended or unsuccessfully hidden message that interfered with the expected reception and decoding of the response-message. It can be said that there was noise in the communication channel. For this reason, this is the model of "noisy" stigmatization. By noisy stigmatization I mean the following: both norm-maker and perceived-to-be-norm-breaker agree on the negativeness of a particular differentness. The norm-maker accuses his/her communicant of being an actor in or possessor of that negative differentness. The perceived-to-be-norm-breaker disclaims responsibility and claims innocence. The following is an example of "noisy" stigmatization: Communicant 1. "You have been drinking again; you are an incorrigible alcoholic!" Communicant 2 (with wobbly tongue): "No, you're wrong, I haven't had a drink for ages, this is my first drink today. God, it would be awful to be an alcoholic, I'm just a regular social drinker." Communicant 1 receives this verbal message and decodes it. But at the same time (s)he also receives unin-
tended messages: the lack of control over the tongue muscles, hence the slurred speech, lack of stable posture, etc. The latter two conflict with the intended message, i.e., create noise in the communication channel. The outcome will be the following: Communicant 1 will despise Communicant 2 for being an alcoholic and a liar and will possibly disseminate the news that Communicant 2 is a disreputable person. Communicant 2 will feel frustrated that his/her manipulation did not succeed; (s)he will be terrified as well that (s)he may be labelled an alcoholic because his/her moral-norms it is evil to drink excessively. (S)he will go on trying to make people believe (s)he is only a social drinker while simultaneously increasing his/her alcohol intake to overcome his/her anxiety. In the case of alternative No. 3, the stigmatization is either prevented or ineffective due to "crossed communication," i.e., the labeller behaves one way, and the unsuccessfully labelled behaves in a way which is contrary to what the labeller expects. This is the model for counter-stigmatization.

Finally, I wish to account for redundant messages transmission. This phenomenon is most commonly operative among the disreputable or discreditable. The individual who wants to keep his/her normbreaking secret will transmit several messages simultaneously all of them, having more or less the same referential meaning. This sort of message sending is used in order to reinforce to the fullest extent his/her feigned norm-observance. The convert effeminate homosexual, for example, will dress in rugged, sportsman-like fashion, smoke big cigars, walk in a John Wayne-like manner, drive powerful sports cars or large American sedans, use foul language, etc. All these messages have the same referential content, thus they are redundant; however, together they are sure to transmit the much reinforced message: "I am a he-man." If one of the messages were not properly decoded or not received at all, the others would still transmit the intended meaning. The redundancy is, therefore, often not tautological but meaningful.

If we agree with Douglas that there is a new improved ethics observable in North American society, model 3 has become one of the most dynamic social processes of the seventies.
Footnotes


2. For the sake of clarification, a word must be said about the reason why obese-ness is judged immoral. In North American Anglo-Saxon society with its puritan heritage the obese person is perceived as an individual who breaks the moral norm by behaving without the self-control expected of a "sensible" adult. (S)he is, out of prejudice, conceived of as an "indulger," as an "immature and selfish" person. (S)he is, therefore, accused of behaving in a childish, irresponsible manner. This behavior is judged abnormal.


5. J. D. Douglas, p. 22.


13. In case of positive stigmatization, the original message is not a disapproval but an approval-message.