<u>**Sociology 3308: Sociology of Emotions**</u>

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<u>**Lectures 18-19: Emotional Deviance**</u>

Today we will introduce Peggy Thoits' concept of emotional deviance. After reviewing her work in this regard, we will move on next class to discuss how this idea has been utilized and expanded in some of my own work on crime victims.

Thoits begins by briefly reviewing literature suggesting that emotion is not merely a biological phenomenon, but that research has shown emotional experiences to be significantly influenced by social factors. Because emotions can be considered - at least partly - social constructions, it is possible to apply a variety of sociological concepts to them. For example, Hochschild, among others, have applied the concept of "norm" through terms such as "feeling rules" and the like. Essentially, emotional norms indicate the expected range, intensity, duration, and/or targets of specific emotions in specific situations. Norms are indicated most clearly by statements including the terms "should," "ought," "must," or "have a right to" in reference to feelings or feeling displays (e.g. "You should be ashamed of yourself"). Individuals spontaneously state such norms when discussing their own or others' emotional experiences and displays. They are also evident in dramatic changes in facial expression when someone new is introduced into a situation. Note that feeling rules or emotion norms refer to expectations regarding private or internal experience; display rules or expression norms refer to expectations governing public exhibitions of emotion.

It follows logically that just as behavior sometimes deviates from norms, so do many feelings and emotional displays. In other words, emotional deviance is possible. This refers to experiences or displays of emotion that differ in quality and degree from what is expected in given situations. It is clearly evident in the need to reduce inappropriate - or induce socially acceptable - emotions that Hochschild found in her research on emotion work.

Implications:

The concept of emotional deviance raises several interesting empirical and theoretical issues. Empirically, for example, just how prevalent is the experience of deviant emotion? What are the social distributions of emotional deviance (e.g. by gender and class). What emotions have been regarded as especially deviant or socially problematic cross culturally or historically?

The theoretical issues are numerous, and may, for convenience, be divided into motivational, processual, and applied substantive issues. Motivationally, if we desire to obtain and maintain social approval, how is it possible ever to experience or display deviant emotions? Moreover, if we not only do so, but wish to, what are the conditions under which this will occur, and under which we may seek the support of others to alter the norms?

Processually, there is the issue of just how emotion work is accomplished. What are the techniques that people use, and how do these vary across various demographic categories? Under which conditions do such attempts to manage emotion fail, and what does this tell us about the nature of emotion as a manipulable biopsychosocial phenomenon?

In terms of substantive applications, attending to emotional deviance may further elaborate processes that are frequently studied by sociologists (e.g. social change, subcultures, protest movements). One question could be how subcultural and protest group members create and legitimize new emotion norms, while more powerful societal actors refuse to grant the legitimacy or the group's deviant feelings (such as outrage).

The concept of emotional deviance also has applicability in the sociology of mental health, stress and coping. It has suggested new ways that mental illness may be recognized and labeled in oneself and others (emotional disturbance). It has also enabled Thoits to reconceptualize stress, as well as the coping and social support processes involved in the onset of mental disorder. These reconceptualizations lead to new research questions that may help elaborate how individuals become mentally ill (and recover).

In what follows Thoits attempts to raise some tentative hypotheses about the above issues, suggest some research strategies, and point to problems that will need attention in the future.

Research Questions:

Before getting into the frequency and distribution of emotional deviance, Thoits asks how we can identify this in the first place. She argues that we should take the perspective of the individual and what s/he reports. If the individual reports that his/her feelings or expressive behaviors differed from what s/he thought was expected in a situation, then that was an experience of emotional deviance. She contrasts this with Smith-Lovin and Heise's methodology of looking for discrepancies in before and after EPA profiles following identity disconfirming events - which she finds interesting, as well as "necessary to map out our cultural universe of normative and deviant feelings. However, such work would only be a preliminary step." Moreover, she feels that rough estimates of affective deviance could be obtained without such painstaking effort, if one were to conduct preliminary research based on self-reports.

This is what Thoits did in an exploratory study. She distributed an open-ended questionnaire to 200 college students, asking them to write detailed descriptions of 2 important emotional episodes in their recent lives - one positive and one negative. The questionnaire asked several follow-up questions about their reactions (e.g. guilt and shame). These attempted to elicit spontaneous responses regarding emotion norms and emotional deviance. Preliminary analysis indicated that these students explicitly stated norms in 23.1% of their negative experiences and 10.7% of their positive descriptions. Women were more prone to state norms in response to negative feelings (30.2% vs. 15.1%), but there were no gender differences for positive feelings.

When she looked at responses regarding guilt or shame about situational feelings, Thoits

found 46% felt guilty or ashamed about their negative reactions (vs. 12% for the positive). Among those not guilty or ashamed of their negative feelings, 50.6% said this was because these feelings were natural, normal, understandable, or justified (49% of those not ashamed of their positive feelings used similar reasoning).

Of those who did admit guilt or shame about their negative reactions, 30.7% said their feelings were deviant in their intensity, expression or content. Females were more likely than males to say this (38% vs. 21.6%). In the positive experiences, 16% of those who felt guilty or ashamed cited the inappropriateness of their reactions ('overreactions'). There were no gender differences.

Taking the sample as a whole, only 15.6% spontaneously described their feelings in the negative situation as deviant in some way, compared to 3% in the positive situation. Hence, the frequency with which emotional deviance is mentioned in single episodes is relatively low - but this is to be expected. Still, deviance is appreciably present and socially patterned. Compared to positive emotions, negative emotions are more likely to elicit references to norms and deviance, and women are more likely to make such references than men when their emotions are negative.

Of course, there may be better ways to measure feelings of emotional deviance, such as through having representative samples of adults keep daily diaries of feelings and displays that seemed wrong, too intense, too prolonged, or directed at an inappropriate target. Then, broader variations in the frequency of these occurrences could be examined by gender, age, race, marital status, etc. One might expect lower status groups to report emotional deviance more frequently, since more acts of disrespect or injustice may be directed toward less powerful members of society, and negative reactions are generally socially disapproved.

Similarly, we could move from studying private emotional experiences to the related issue of how often individuals encounter emotional deviance in others, and how they interpret and handle these encounters. It may be that emotional deviance may be interpreted as symptoms of psychological disorder by laypersons and psychiatrists alike, if it occurs repeatedly or persistently. Thus, it would be important to discover what aspects of the target person's behavior cause respondents to attribute psychological difficulties to him or her.

Studies of Conditions Generating Emotional Deviance:

Earlier Thoits asked how it was possible for well-socialized individuals to experience emotional deviance. Since we now know it occurs, perhaps the better question would be under what conditions people feel what they "shouldn't," or not feel what they "should."

One clear possibility is that people have not been well-socialized in the first place. However, this is an after the fact explanation to explain, say, emotionally disturbed adolescents, and tautological. While studies of the socialization of emotional norms are certainly warranted, this should not be relied on as the sole explanation of the etiology of emotional deviance.

Thoits suggests that certain *aspects of emotion* itself, along with *social structural factors*, could produce emotional deviance. With regard to emotion itself, she points to *time* (i.e. how emotions are often slow to dissipate, and may carry over into different situations); *memory* (i.e. continued attention to an emotional state may repeatedly renew it); and *situational stimuli* (e.g. one's father committing suicide on one's birthday eliciting horror and sadness, but also a hatred perceived as inappropriate).

As for structural conditions, Thoits points to the following factors as likely being associated with more frequent reports of emotional deviance: (1) *Multiple role occupancy* (e.g. the competing demands of being a husband, father and son); (2) *Subcultural marginality* (e.g. gay people in the closet facing competing feeling rules); (3) *Normative and non-normative role transitions* (e.g. postpartum depression vs. becoming divorced); and (4) *Rigid rules governing ongoing roles and ceremonial rituals* (e.g. having to always be pleasant to demanding infants; always having to display the proper emotions at birthdays, holidays, weddings and funerals). All of these structural conditions deserve further, detailed empirical investigation.

A related motivational issue noted earlier were the conditions under which people are willing to accept their emotional deviations and resist the sanctions of others. Especially interesting may be members of protest groups, who are likely to be motivated by their emotional reactions to situations of injustice, oppression or threat. Typically, too, their protests are likely to fall on deaf ears or to elicit negative responses from powerful others who are the perpetrators of injustice. Social support may be necessary for feelings that are deviant in the eyes of the majority to become legitimized, both for the minority and eventually for the majority. When feelings are shared and validated by others, they can become not only understandable and "normal," but also *normative*. Conditions under which deviant emotions can become normative may include prolonged contact between similarly affected individuals, a threshold number of such individuals, ineffective threats or incentives from powerful authorities for conformity, and perhaps a charismatic spokesperson for the group. Shared deviant feelings may be crucial in the transformation of similar others into counternormative peer groups, deviant subcultures and social movements. These matters need to be investigated empirically - either ethnographically, historically, or experimentally in small-group lab settings. The working hypothesis would be that without shared and validated emotional reactions among actors, an effective protest group would be unable to form or survive.

Individuals who join self-help groups may be motivated by self-perceived deviant feelings as well (e.g. American culture perpetuates a norm for the appropriate duration of grief that is inconsistent with the feelings of many bereaved individuals, and self-help groups function, in part, to validate feelings that members perceive to be deviant). In this, and any other number of stressful experiences, differential association and social comparison processes may be a key way for individuals to reduce the self-condemnation that may result from perceptions of emotional deviance. This would help to explain why social support buffers of reduces the psychological impact of major stressors. Ethnographic studies of self-help groups are hence also warranted, with the working hypotheses that emotional validation and emotional legitimacy are key motivators and rewards.

Studies of Emotion-Management (Coping) Processes:

Although support seeking is one way that people handle emotional deviance, there are a variety of others (such as those outlined by Hochschild). This raises the next issue: processes of managing deviant feelings. Thoits expands Hochschild's typology of emotion management. In doing this, she accepts Hochschild's four factor definition of emotion (situational cues, physiological changes, expressive gestures, and an emotion label attached to the specific configuration of the first three). However, she argues that changing any one of these components should dampen or alter the feeling experience itself. Changing any one emotional component in a subject's awareness can qualitatively alter his/her reported feeling state. Hence, emotion management, or coping, can be seen as deliberate attempts to change one or more of these components of one's subjective experience in order to bring that feeling in line with normative requirements.

In addition, Thoits argues that there are two primary modes that individuals use to alter components of emotional experience: behavioral and cognitive. That is, one can target any of the four components of emotion for change, and attempt to do so either behaviorally or cognitively. This results in an 8-fold table of emotion management techniques (*see table*).

Through her earlier survey of students' written accounts, Thoits obtained information on how they handled positive and negative emotional experiences. She notes that the ten most frequently mentioned techniques in handling a negative emotional experience were (in descending order):

- catharsis
-taking direct action
-seeking support
-hiding feelings
-seeing the situation differently
-leaving the situation
- thinking the situation through
-thought stopping
-distraction
-acceptance

The five most effective methods in students' minds were seeking support, seeing the situation differently, catharsis, hiding feelings, and taking direct action. In short, actions and thoughts focused on the situation itself or on the expressive component of emotion were most frequently used and perceived as effective.

Other key questions to explore are whether preferred emotion management techniques vary by structural variables such as gender, class and age; whether these vary with characteristics of the situation (positive vs. negative, controllable vs. uncontrollable, anticipated or not); and whether, and when, different emotion management techniques will be most effective in lessening

emotional distress.

With regard to the first issue, Thoits analysis indicated that there are gender differences, with women being more likely to use catharsis, seeking support, hiding feelings, seeing the situation differently, and, unexpectedly, writing. Men more frequently report thinking it through, engaging in hard exercise, and acceptance. Social class and age issues need further investigation.

Thoits' preliminary research also indicates that cognitive strategies such as acceptance may be utilized more frequently in uncontrollable situations. However, she feels much more empirical research needs to be done to flesh out the situational and effectiveness questions noted above.

Substantive Applications:

Thoits feels that some of the most obvious theoretical applications of the emotional deviance concept have been discussed above: experienced feelings, feeling and display rules, and emotional deviance are important and currently neglected topics in social change, stress and coping processes. Attention to the emotional dynamics in protest group formation and in stress management could elaborate substantive issues in each area *and* reveal more about the properties of emotions themselves.

For example, there is the differential impact of stress: some individuals become physically ill while others psychologically disturbed after major stressful life changes. However, both positive or negative life changes can produce physical illness, but the literature suggests only negative life changes produce psychological disturbance. Why should positive events predict physical illness but not psychological disturbance? Both may arouse and overtax bodily resources, but positive arousal is not a threat to self esteem - negative arousal is. Thoits feels attention to emotion could further specify the conditions under which stress exposure will result in physical vs. psychological disorder.

Further properties of emotion also might emerge from substantive research. For example, deviant emotions seem to be manageable up to a point, and people often report unsuccessful outcomes of their emotion management attempts. It could be that the connections between some components of emotion are stronger than others (e.g. situational stimuli, facial expressions, and emotion labels may be more closely linked than any of these with discernible physiological states). Thus, attempts to change feelings by manipulating an existing physiological state may be less successful in transforming a deviant emotion if physiological states are only weakly linked to other emotional components. More research needs to be done in this area.

The concept of emotional deviance can also be applied more generally in the field of deviance. It seems especially applicable to the recognition and labeling of mental illness, along with other social problems such as addiction. Thoits argues that a large subset (46%) of the mental disorders described in the DSM are essentially defined by the presence of deviant emotions or deviant expressive behaviors. Similarly, panel studies of vignettes have indicated that laypersons' attributions of psychiatric disturbance are based in part on emotional deviations.

It seems clear that clinicians and laypersons alike may recognize and label mental illness when emotional deviance is observed to occur persistently, repeatedly or with intensity.

Substantive attention to emotion management processes and emotional deviance enables the development of a theory of the social origin of mental illness. This asserts that structural conditions (role conflict, role strain, marginal status, normative and non-normative role transitions) can produce emotions that deviate from those that are socially expected in given situations. Desiring to maintain social approval, the individual will likely engage in emotion management attempts to bring feelings into line with expectations. Under certain stressful and persistent structural conditions, however, coupled with the lack of emotion management assistance from others, emotion management attempts will fail. This will result in continued or recurrent emotional deviance, interpreted by the individual or by others as symptoms of mental disorder. Once this deviance has been labeled, by the person, others or professionals, certain consequences follow (although transformation or sustaining a deviant identity through differential treatment is not always necessarily the case). Because mental health professionals are in the business of providing emotion management assistance, the willing participant may be able to convert his/her emotional deviance into emotional "normality" (at least according to Thoits' optimistic view).

Thoits notes how emotions theory helps integrate what have been treated as distinct substantive topics in stress and mental health research (e.g. stress, coping, social support and psychological disorder). Moreover, attention to emotional processes points to new hypotheses for research in mental health (e.g. if social support is conceived as emotion management assistance, then forms of support - or even psychotherapy - that legitimize and reinforce the individual's own preferred emotion management strategies ought to be more effective in transforming deviant feelings than support attempts that differ from those preferred). Hence, old notions can be reconceptualized and new hypotheses developed to better explain how important sociological phenomena such as deviance are created, maintained, and/or terminated.

In the end, the concept of emotional deviance is a rich one, with theoretical and empirical implications for a number of substantive areas: social problems, social deviance, social movements, stress, coping and mental health. Exploratory research into some of these issues should further refine our understanding of the emotional underpinnings of problems that have preoccupied the sociological imagination for some time.

My Homicide Research :Victims as Deviants?

(i) The Problem:

* Labelling theory tends to focus largely on the offender.

* Implicit concern for the social situation as a whole.

* This logically includes the victim of crime.

(ii) Literature:

* Taylor, Wood and Lichtman (1983) discuss many labelling concepts in terms of the sympathetic - and not so sympathetic - treatment of victims *as victims,* and their *responses* thereto (e.g. primary and secondary victimization).

* Wortman and Lehman (1983) discuss social responses to victims of life crises. Findings:

      (i) others often hold *negative feelings* about victims
      (ii) experience a great deal of *uncertainty* about how to respond
      (iii) hold a number of *misconceptions* about how victims should react

* Individuals engage in three types of ostensibly supportive behaviors:

      (i) discourage open expression
      (ii) encourage recovery
      (iii) fall back on automatic or scripted support attempts

* Victims may feel these ineffective and harmful because:

      (i) they encourage isolation with one's thoughts
      (ii) they dismiss victims' feelings as unimportant
      (iii) imply victim should not feel as bad as s/he does

* Research backs this up

      -infant deaths, constrained relationships and intrusive thoughts
      -grieving families losing 90% of friends

(iii) Theoretical Discussion:

* Integrating Clark's work on sympathy, I surmised that *most broadly* crime victims can be reacted to as (a) *victims* or (b) *deviants*.

* The label of *victim* has *three possible trajectories*:

  1. Victims may be reacted to as such, ascribed sympathy, and be offered unconstrained, accommodative support.

  2. Victims may be reacted to as such, ascribed sympathy, but others respond in ways

indicating uncertainty or misconceptions about interaction.

   3. Victims may be reacted to as such, initially ascribed sympathy, but others eventually may stigmatize them as "helpless victims" unable to cope.

  As for labelling as *deviants*, victims may experience this in two ways:

   1. Victims may be reacted to as "emotional deviants" (Thoits, 1990) as the result of their "inappropriate" emotions in a particular social context (e.g. at a party).

   2. Victims may be stigmatized as deviants who are blamed for their plight in the first place (e.g. drug dealers who suffer an assault).

* Issues of *sympathy* and *stigmatization* are important matters not only for distinguishing between the labels of *victim and deviant*, but *also between the various responses to victims*.

* This revolves around Clark's concept of "sympathy margin" - the limited amount of sympathy worthiness one is ascribed - which is continually renegotiated, and which may be used up.

* According to Clark, those who follow the "rules of sympathy etiquette" are ascribed more sympathy than those who do not.

* Important to examine the responses or *careers* of those so labelled.

* May elaborate a *parallel labelling process* for victims.

(iii) Methodology:

*This study involved the collection, transcription, and analysis of:

- 32 interviews
- 22 surveys
- 108 Criminal Injuries Compensation files

* All involved the experiences of those who had suffered the murder of a loved one

* A major focus was on individuals' helpful and unhelpful social interactions, and on how survivors felt that these had impacted on their experiences, choices, and coping

* These data were analyzed utilizing Q.S.R. NUD*IST over a two year period ending in 1998.

(iv) Results:

* I will briefly discuss the results in three parts:

    (a) extended family and friends;
    (b) acquaintances, strangers, and the community;
    (c) subjects' responses.

(a) Extended Family and Friends:

* A *minority* of respondents experienced widespread, *ongoing* support from the majority of their extended family and friends. (Qt)

* Sympathetic, and reportedly "helpful" responses included:

    -visiting and staying
    -providing ongoing emotional support
    -handling responsibilities
    - helpful communication (e.g. involving the ability of others to pick up   subtle cues regarding when, and how, to offer support.

* Demonstrate how some people may be reacted to as *legitimate victims*, who are *sympathy worthy*.

* A *majority* of respondents, however, experienced:

    (i) a generalized lack of support from the bulk of their extended family and friends;
    (ii) that persisted over time. (3 Qts)

* Reportedly "unhelpful" responses included

    -initial lack of support
    - rapidly disappearing support (e.g. after the funeral)
    - "inappropriate" attention and harassment
    - avoidance by others
    - problems with communication
    - overt conflict.

* Some people considered that these varying responses were the result of their being labeled as *victims,* others as *deviants*

* Survivors' *rationales* for these "unhelpful" responses were instructive in separating these:

    (i) Some labelled as *victims* asserted how many of their extended family and friends were afraid to do or say anything that might upset them further, and avoided contact as a result

(3 Qts)

(ii) Others labelled as *victims* noted how the initially sympathetic responses of others eventually gave way to others privately urging them to "get on with your lives." (1 Qt)

(iii) Some individuals felt that they were stigmatized as *emotional deviants* by others due to "inappropriate" behavior in public settings.
(2 Qts)

(iv) Some individuals were simply stigmatized as *deviants*. These were family members of individuals who were blamed, or somehow seen as contributing to their plight (2 Qts).

* Each of these rationales relate to:

(i) sympathy worthiness; and
(ii)the rules of sympathy etiquette

(b) Acquaintances, Strangers, and the Community:

* Respondents often noted receiving remarkable support from *mere acquaintances* (2 Qts)

* Acquaintances who labelled respondents as victims considered them as legitimately sympathy worthy as above, but their expression of sympathy was not so readily blocked by their own upset and familiarity with respondents.

* Respondents sometimes noted a groundswell of support from *strangers in the community* as well.

* Two factors were associated with such a sympathetic community response:

 (i) either the deceased, or their survivors, were well known, had much
   prior community involvement, or both (1 Qt); and
(ii) widespread sympathetic media coverage (1 Qt).

Indeed, in a number of such cases, it appeared that *respondents were cast into the role of crusading victim advocates* in such a context (1 Qt).

* In those cases where (a) was absent, sympathy margins were lessened (1Q)

* Where (b) was absent as well, or the murder involved much negative coverage and/or the proliferation of rumors, there was increased potential for stigmatization (1 Qt).

* Three negative responses occurred as a result:

(i) *harassment* (1 Qt)
(ii) *blaming* (1 Qt)
(iii) *notoriety* (2 Qts)

* Whether the predominant label was deviant or victim, such respondents reported *revictimization* in their encounters with others in the community.

(c) Subjects' Responses:

* Generally, survivors can either:

  (i) attempt to deal with things on their own; or
  (ii) seek help.

* Two factors appeared to affect their response in this regard:

  (i) their *gendered orientation to seeking help*; and
  (ii) a variety of *incentives/disincentives*

* With regard to *gender*

  - males were far less likely to seek out help than females
  (e.g. imbalance of women in self-help, victims organizations, and counseling)

* As for *incentives and disincentives*, there were five interrelated components:

  (i) level of sympathetic support in respondents' social context (4 Qts)
  (ii) type of encouragement to seek help (2 Qts)
  (iii) level of stigmatization
  (iv) additional victimizing encounters;
  (v) availability of choices.

* Taking these factors together, *four patterns or "careers" emerged*:

(1) Generally, those subjects who felt that they had sufficient, encouraging, but not overwhelming social support, little stigmatization, few revictimizing encounters, and meaningful choices *did not accept the label of victim as definitive.*

(2) When subjects (i) had a very high level of sympathetic support and "passive" encouragement, *or* (ii) were highly stigmatized or revictimized in upsetting encounters, they experienced

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secondary victimization. These subjects *used the victim role as a defense or reaction* to such treatment. This occurred in *two ways*.

(a) The subject could be altercast as a victim by others ongoing, accommodative sympathy (e.g. "coddling" by family).

(b) S/he may stigmatized as helpless, unlikely to recover, and avoided, or be "revictimized" further in a context in which s/he has no control (e.g. in court).

Of course, if encouraged to seek support and this was available, such options sometimes lead to participation in *subcultures* (e,g, support groups) or encouraged more formal labelling (e.g. by medical professionals).

(3) When subjects received a high degree of sympathetic support, "active" encouragement, and little or no stigmatization, then *tertiary victimization* was the result. Here, subjects were encouraged to *confront, assess, and reject the negative labels inherent in victimization and replace it with a positive identity*. For example, when encouraged to seek support and this was available (e.g. victims' rights groups), such options encouraged such a "positive" identity (e.g. "victim advocate," "survivor," etc).

(4) When there was a low level of sympathetic support, little or no encouragement, further upsetting or harmful encounters, and a high level of stigmatization as either *deviant* or *emotionally deviant*, then either *secondary deviance* or *secondary emotional deviance* was the result. Here subjects *again used the victim role as a defense or reaction* to such treatment. For example, if encouraged to seek support and this was available, such emphases could encourage dealings with official agents and formal labelling (e.g. psychiatrists / mental illness).

* All of these patterns were reflected in subjects' *utilization of the victim role*:

(1) Some, particularly those employing the victim role as a defense or reaction to a variety of poor treatment, utilized the victim role *as a shield* to deflect responsibility and account for their failure to cope in a variety of contexts (1 Qt)

(2) Others, who had rejected the negative labels inherent in victimization and replaced it with a positive identity, used the victim role *as a sword* to assign causes, specify remedies, and to generally fight for positive change (1 Qt)

(3) In some circumstances subjects learned to self-presentationally *alternate* between the two as circumstances demanded (*volitional gerrymandering).*

(d) Conclusion:

* This research elaborates on the range of social responses to victims of crime, and their varying reactions.

* It takes the labelling process traditionally applied to offenders, and makes many theoretical comparisons in the experiences of victims.

* It identifies a parallel labelling process for victims, and differentiates between the two on the basis of sympathy, stigma, and a variety of interactional responses.