2020年度

大学院文学研究科博士課程前期2年の課程入学試験

(春期・社会人特別選抜) 問題

筆記試験 社会学 専攻分野

試験開始の合図があるまで、この問題冊子を開いてはいけない。

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筆記試験(社会学 専攻分野)

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| 次の英文を | 読み、以下の問いに答えなさい。 |
| 問1 下線部 | 『(1)を日本語に訳しなさい。 |
| 問2 下線部 | 『(2)を日本語に訳しなさい。 |
| 問3 本文金 | 全体の内容を踏まえて stigma とはどのような概念か説明しなさい。 |
| 問4 Goffn | ianは stigma を持つ人々が様々な技法を用いて他者とやりとりしていると指摘している。 |
| こう | した技法にどのようなものがあるのか、具体例を挙げてあなたの考えを述べなさい。 |
| (出典 : Lee l | F. Monaghan and Simon J. Williams, 2013, "Stigma," Jonathan Gabe and Lee F. Monaghan eds., |
| Key | Concepts in Medical Sociology, Second Edition, London: Sage Publications, 58-62.) |
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| A D | Seminal work on stigma was undertaken within the interactionist tradition in sociology, which explores the structure of face-to-face encounters and issues pertaining to identity and selfhood. While recent sociological literature revisits and deepens such thinking in order to underscore the role of macro-social structures in stigma relations, and we will refer more to this work below, attention should first be drawn to Goffman's pioneering (1968) study, tellingly entitled Stigma: Notes on the Management of Spoiled Identity. As part and parcel of his own inimitable dramaturgical perspective on the vicissitudes of self-presentation in everyday life, Goffman's concern in this book is with the maintenance and integrity of the self, or perhaps more correctly in this case, the presentation of a discredited or discreditable self. Taking such a stance, in other words, provides a 'special application of the arts of impression management' (p. 155), revealing through its potential disruption, much about the taken-for-granted or tacit ways in which people organize their lives and everyday encounters. |
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Goffman identifies three distinct types of stigma, namely: (1) stigmas of the body (such as blemishes or deformities); (2) stigmas of character (the mentally ill or the criminal, for example); and (3) stigmas associated with social collectivities ('racial' or tribal), all of which he stresses are socially, culturally, and historically variable. Perhaps most significantly for this discussion, Goffman's social definition of stigma turns on the distinction he draws between 'virtual social identity' normative expectations, that is to say, of what the person ought to be - and 'actual social identity' - the category or attributes the individual actually possesses (p. 12). The stigmatized, from this perspective, are those who possess a deeply discrediting discrepancy between their virtual and actual social identity vis-à-vis those 'normals' for whom no such discrepancy occurs. 'A stigma, then, is really a special kind of relationship between attribute and stereotype' (Goffman, 1968: 14); a meaning imposed on an attribute via negative images, stereotypes and attitudes that potentially discredits a member of a particular social category. This, in turn, maps onto another notable distinction which Goffman draws between the discredited, whose stigma is evident or 'known about', and the discreditable, whose situation is the precise opposite (p. 14). In the former case, the prime dramaturgical task is one of 'managing tension', while in the latter case, it is one of 'managing information'. '[T]o tell or not to tell', to reveal or conceal, that is the question (p. 57).

clipsed Parsonian perspectives on illness as social deviance in the 1960s, stressing how stigma springs from the definitional workings of society, rather than the inherent qualities of the attribute or behaviour itself. The basic idea here, building on the work of Lemert and espoused by writers such as Becker, Erikson and Kitsuse, is one of 'primary deviance' (the original infraction), societal reaction (a public/professional 'crisis'), and 'secondary deviance' (the person's response to the negative societal reaction). Such processes lead to a 'master-status' (which drowns out all other roles and sources of identity) that is extremely difficult to disavow or shake off. In short, stigma as a societal reaction 'spoils identity', a phenomenon generated in social situations and the contingencies they entail by virtue of unrealized norms, which impinge on the encounter in more or less pressing and predictable ways.

Goffman, however, in typical iconoclastic fashion, adds a further twist. His penchant for mentioning troubling truths about individuals is clearly evident when he notes that the blind, the deaf, the ex-mental patient, the prostitute, the ex-convict, and many others discussed in the pages of his book, are not the only ones who experience stigmatization. Norms of identity, Goffman comments, breed deviations along with conformity. Stigma management is a general phenomenon, a process that occurs wherever there are identity norms. Few people are totally without discrediting attributes. The reader is led, therefore, to realize that 'stigma involves not so much a set of concrete individuals who can be separated into two piles, the stigmatized and the normal, as a pervasive two-role social process in which every individual participates in both roles . . The normal and stigmatized are not persons but rather perspectives' (pp. 163–4). This provides Goffman with the rationale for claiming that if people are to refer to the stigmatized individual as 'deviant', they might more profitably regard them as a 'normal deviant' (p. 155).

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