

## **In Search of Imperfection**

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### *Perfection*

The first time that the word “perfection” was used, as noted in the Oxford English Dictionary, was in 1225. The meaning was then defined as “The fact or condition of being perfected or completed; completion; completed state, completeness” as illustrated in the example: “Hundred is ful tel, & noteth perfectiun, pet is, ful dede;”

Certainly, one would expect that the meaning of words would evolve throughout ages, but it is interesting to note how much more rigor and tension is implied in the more contemporary use of the word. While before it only suggested the “state of completion,” over a hundred years later, since 1340 according to the OED, it implied “The most perfect degree, the highest pitch (*of* a quality, condition, faculty, etc.); the extreme or height (*of* anything good or evil).” The “highest pitch” and especially the “extreme” bring “perfection” closer to what it connotes today: it does not mean completion, but undoubtedly suggests the highest degree of completion, its extreme and hence unattainable form.

I am suggesting that nowadays perfection is unattainable because while it is relatively easy to state that something has been completed, it is hard to judge whether it has reached its perfect state. The judgment that something has reached its “height” or “extreme” quality is subjective; there are no universal standards to judge perfection and I hope they will never be written. If they were established, humanity would not be able to discover new genres of literature or experiment with new scientific theories and technologies. If, for instance, perfection in literature would be defined as having certain elements, e.g. metaphors, symbols, etc, it would discourage writers who would want to achieve perfection from writing or experimenting with other styles or other literary devices.

Perfection, therefore, in its contemporary sense, does not help in development of an innovate idea, but rather constrains it by imposing certain subjective standards on how it should develop in order to be considered “perfect.” Coming back to the original meaning

of perfection or abandoning the idea that it can ever be attained would free humans from the constraints.

One may ask, “how does perfection relate to the issue of disabilities, are not these two concepts negating each other?” The answer is, yes, they are negating each other, but should they? It has been mutually agreed by a group of humans—and this paper will not attempt to define the group, since a separate paper could be written on the subject—that a perfect person should be without defects. In the next section, I will describe how the standards of what was considered “defective” have been changing over centuries and how many stereotypes are associated with disabilities. Had it been decided that not seeing or not hearing well, for instance, is no longer a defect, the disabled population would have a chance to be included in the race for perfection, unattainable as it is. Nowadays, because of the stereotypes and definition of who is disabled, this population seems to be excluded.

### *The Imperfect Humans*

For centuries, humans have strived to create better, more perfected generations of humans. Because of the urge to create better humans—whatever that would mean to different civilizations developing in different ages—infanticide was commonly practiced and was regulated to some degree by the state. Standards for the perfect baby, that is, the baby that would not be deliberately killed, have changed throughout ages, and thus while in Sparta feeble babies had to die, girls had the misfortune of being imperfect in some Asian societies (e.g. India and China). Never in history, however, was the imperfection of the disabled children questioned. It was assumed that they would die early anyway, so why not ease their suffering and kill them as soon as the disability manifests itself?

In *Quest for Perfection*, Gina Maranto describes how customary it was to throw the disabled or feeble children into Tiber: “Infants displaying obvious deformities wound up in the Tiber, as it was considered gravely unfair to the child, the parents, and society to keep such creatures alive” (p. 65).

Who are the disabled? As was the case with the perfection, when the word “disability” was first used, it meant inability to do something, e.g. as in the example that OED cites: “His disability to performe his promise..” Almost half a century later, the definition of “disability” expanded to “Pecuniary inability or want of means.” The “peculiar inability,” are the key words here. The “peculiar” implies something strange, unexplainable by humans, while “inability” implies comparison with ability: the implication quite grave in consequences since it supposes that somebody can do something, e.g. hear, while somebody else, cannot.

In his discussion of how problematic naming of disabilities is, Jennings states how the meanings of disability and handicap are socially constructed and how they change overtime (p. 561). Indeed, certain conditions nowadays labeled as disabilities, e.g. learning disabilities (LD) or attention Deficit Hyperactivity Disorder (ADHD) did not exist until 1845 when a physician, Heinrich Hoffman first described the “disorder.” In addition to being a physician, he was also a poet and when he could not find books suitable for his 3-year-old son, he wrote his own story, a book of poems, complete with illustrations, about children and their characteristics. "The Story of Fidgety Philip" was a description of a little boy who had attention deficit hyperactivity disorder.

Yet it was not until 1902 that Sir George F. Still published a series of lectures to the Royal College of Physicians in England in which he described a group of impulsive children with significant behavioral problems, caused by a genetic dysfunction and not by poor child rearing—children who today would be easily recognized as having ADHD. “Since then,” we learn from the brochure that the National Institute on Mental Health has made available on the internet, “several thousand scientific papers on the disorder have been published, providing information on its nature, course, causes, impairments, and treatments.”

Thus, a person who may have had these “disabilities” a century and a half ago would have escaped being labeled “disabled,” while nowadays, a person with the same behavior has to have the label attached to them. It would nowadays be hard to simply ignore the label once someone is diagnosed with LD or ADHD, because they have to go through mandatory therapies or take medications if they want to participate in regular classroom activities.

In a study on how children construct their concept of disabilities and rank them Altman (1981) brings up a number of studies that were done using the picture-ranking procedure. The results indicate that children rated the pictures as follows: 1). pictures of non-disabled children, 2). pictures of children with physical disabilities, 3). pictures of children with facial disfigurements, and 4). pictures of children who were obese. As can be seen, the children’s idea of what disabilities were was socially constructed and largely related to the ranking of how different somebody looked from a typical image of a healthy child; it did not reflect a “true” definition of “disabilities.” Being “obese,” for instance, is not equivalent to being disabled. Similarly, the facial disfigurement does not signify the presence of disability.

To me, the term “disabled” carries too many negative connotations. It is negative in several ways. First, it labels somebody as “disabled” versus “healthy” or “non disabled.” Second, rather than highlighting a person’s abilities, it overwhelmingly focuses on his/her disabilities. Moreover, it is applied to a large group of people, ranging from people with mental disabilities to people who have no limbs. I will discuss what

implications the three connotations have in a greater detail and I will divide the discussion into three subsections for the sake of clarity.

### *Am I Still Healthy?*

People who are considered “disabled” seem to deviate from the established norm. Thus, people who are physically disabled, for instance, cannot walk on their own and thus are considered disabled, even if they can adapt themselves and their lifestyle to overcome their inability to walk, e.g. by using a wheelchair. Nowadays, a disability that is being diagnosed in increasing numbers is called “learning disability.” People labeled as having learning disabilities are not necessarily incapable of learning, but simply people who may require more teacher’s attention or a different way of instruction (e.g. through visual, rather than written means). If people are forced to be doing things in exactly the same way, e.g. walk on their feet rather than be in a wheelchair or learn in exactly the same way others do, all creativity and variability of the human activity will be lost. If, say, painting will become a popular subject at school, and somebody will not be able to use the paintbrush in the same way that the teacher does, will he/she be considered painting disabled?

In *The Unschooled Mind: How Children Think and How Schools Should Teach* (1993), Howard Gardner states that many students who fail to adjust to the current learning techniques and tests are judged not to understand the material. In effect, it may be that the learning techniques and tests are to blame. People, according to Gardner, learn differently. In the current school system, however, those that fail the tests are considered bad learners, even if they can do the same tasks if they are explained in a different way.

### *Some Body.*

I have just finished working on a research about a person who is blind. A section that describes him as a blind person and begins like this:

- Tom speaks Swahili during one of the parties
- He speaks several foreign languages
- He is sociable
- He knows how to program computers
- Establish an online business

...

The list could probably go on and on. I wanted to underline Tom’s (my study participant’s) abilities and qualities, rather than the fact that he is blind. Certainly I could not hide his blindness, because that is a part of who he is, but I did not want it to be at the forefront of the study.

In fact, I asked him to draw a portrait of himself (on paper or in his imagination) and asked him to describe it to me. He said:

It is a very difficult question because I feel that I'm constantly changing and whatever was true couple of years ago that might not necessarily hold true today. I like to think of myself as somebody who is very goal oriented, people person, I think I get along with people very well, I do quite well in talking or connecting with different types of people (...).

Tom did not even mention his appearance and the fact that he is blind. It seems that it did not matter to him. Others may actually think of him as a blind person more than he himself thinks about himself in that way.

In addition to highlighting his abilities, I wanted to draw attention to him as a person, rather than a representative of a group of individuals, e.g. the blind or disabled people. I did not want to throw him into the vast category of the "disabled." He would have never identified himself with this category and I did not want to enforce it in my narrative. That is why I called this, and the section in my research paper, "Some Body."

*The "disabled"-- the "popular."*

What does it mean to have a "disability"? When I think of the term, an essay by Movag Shiach comes to mind. As the title of her essay suggests, she describes the "A History of Changing Definitions of 'the Popular.'" She shows how different meanings of the term have been created overtime to suit particular purposes. The government may be in favor or disfavor of the "popular action, for instance. In this case, the "popular" means an action supported by many people. In another instance, "the people" become a dangerous entity which must be controlled by richer and more powerful individuals. "Popular" can also describe the "ordinary people."

These are by no means all the definitions of "the popular," and I have limited myself to one author only; others, like Michail Bakhtin or Natalie Davis would add yet a different perspective of what "popular" means. A similar fate, to me, is associated with the term "disabilities." I have outlined two meanings in the previous sections, i.e. "disabled" meaning "not healthy," and "not capable of doing something" or, as the OED puts it, "peculiarly incapable" of doing something. These two definitions in themselves are broad: what does it mean to be healthy? Is it just not having a cold or hearing or seeing perfectly well (whatever that may be)? And is "peculiarly incapable" of doing something related to being incapable of eating, sleeping, walking, talking, climbing mountains? Are the "peculiarities" related to actions related to the human body and how it differs from the bodies of others, or is it related to the inability to perform an action which is considered "normal" (e.g. eating, learning, etc)?

The meaning of “disabled” seems to be negotiated by social perceptions and circumstances and, as can be seen, may encompass a large number of individuals, ranging from unhealthy ones to those who are “peculiarly incapable” of doing something. Under such circumstances, when disability itself is not a well-defined term, the state of perfection can be but a distant dream for the population labeled as disabled. How can the disabled remedy themselves, if they do not even know why they are considered disabled in the first place?

The dream is further distanced by the so-called side-effects created when the label is attached to somebody. One of these side-effects is stereotyping. In his article on categorizing the disabled people, Edwin J. Thomas explains how people with disabilities are put into five categories, such as “disabled patient,” “handicapped performer,” “helped person,” “disability comanager,” and “public-relations man” (1966). It is beyond the scope of this paper to discuss each of the five labels in a greater detail, but it is important to note that these have been the roles that the disabled people have been assigned by the non-disabled people. Stepping out of these categories is hard not necessarily because of the disability but because of the general public’s beliefs of the impossibility of stepping out of these categories.

These stereotypical roles may not be the dominant ones at present, but there are other stereotypes associated with people who are disabled, that have a great influence on their self-esteem. Margaret Nosek (2003) reports that women with physical disabilities that she interviewed often mentioned that they were told they were: “ugly,” “asexual,” “would never get married,” and “should not expect much from life.” Such stereotypical attitude towards the disabled women, Nosek claims, has a tremendous impact on their self-esteem. While some women were able to step out of these assigned fateful labels, others were not, due to their low self-esteem (Ibid, 2003).

#### *From Stereotyping to Some Bodies*

An interesting question is, to what extent these attitudes are stereotypical and to what extent they do characterize people with disabilities. In other words, how much is it possible to generalize about people with disabilities and how much is just others’ imagination about the disabled. In an essay called “Things to Do in Shopping Centers,” Meaghan Morris brings up the fact that people always do some extraordinary things, something that they normally would not do. She argues that because of that, sociologists should not look at people in the malls and generalize too much about their behavior or even worse, their character, because the image that they get may not be too close to how people would act on a different day, in other circumstances. She describes an image of a woman walking in a shopping center, which was published in one of the Australian newspapers and points out:

She becomes 'representative' of the leisure-resource portrait of "the shopping centre" for working-class women. ("The shopping centre, too, is abstracted as representative, since all we see of it is the speckled floor found in any downmarket centre anywhere) (p. 18).

The same type of generalization, I think, is true when it comes to people who are considered disabled. Let us look at the vast category of people in a greater detail.

Among the people conventionally labeled disabled, there are two prevailing attitudes, and it is hard for me to decide which one is worse than the other. One is a total acceptance of one's disability. I will call it a passive acceptance, because it is not the acceptance in a positive sense, where somebody would adapt to their supposed disability and just go on with their life, but the acceptance in the negative sense of the term: acceptance of all the prejudices and stereotypes that a society attaches to people with disabilities. People with such attitude do not question the fact that they are imperfect. They accept it as a fact and live with it till the rest of their lives.

At the other end of the spectrum, there are people who claim they are proud of their disability. A web site called [www.q.webring.com](http://www.q.webring.com) hosts web sites owned by people who are blind or who are in any way related to the issues of blindness. One time, I wanted to subscribe to the site, but my request was rejected because I did not want to put the following mandatory phrase on my web site: "This site is a proud member of [The Blind Ring](#). Follow this link to join the ring. Also, from this page, you may:(...)" Why would I have to identify myself as a member of the "blind ring" to anybody who visits my web site? And what is more, why would I have to be "proud" of it?

It seems to me that the easiest way out would be to cease accepting one's imperfection as a matter of fact, as well as being proud of it. Everybody, I think, is imperfect in one way or the other: some people cannot walk, some cannot see, some cannot paint, and yet others cannot communicate well with others. What everybody can do, regardless of whether one is disabled in a conventional sense or not, is to adapt to one's "disability" and not make one's life revolve around it. This attitude, the adaptation, is what I call the active acceptance of one's imperfection.

I do not want to sound too utopian, thus I quickly offer an example of such attitude. There is a program in Tibet which, among other things, aims at integrating people who are blind into the Tibetan society. I must add that in Tibet it is an especially difficult task because in Tibet, like in many parts of Asia, it is believed that one is blind because of the sins committed in one's previous life. The task is, therefore, not just to provide training for the blind, but to change the society's attitude.

In one of the projects, called “The Self-Integration Project,” children who were blind were taught how to gain self-confidence. In the case when students accepted the fact that they were blind and they could not accomplish a certain task, they were told that teachers at that particular program were also blind and they could do the task.

Sabriye Tenberken and Paul Kronenberg, the founders of the project, describes how blindness, definitely a visible emblem of imperfection was challenged. I allow myself to quote the entire passage because of the vivid description that they provide:

One day, a few of the students walked in the centre of Lhasa and some Nomads very rudely shouted at them: “Hey, you blind fools!!”. Kienzen, the oldest of the small group turned around and told the nomad that yes, he is blind but he is not a fool. “I am going to school, I can read and write! Can you do that?”. “I can even read and write in the dark! Can you do that?”The nomads were very astonished and of course they were not able to write because they never visited a school. They started a conversation and about 6 months later these nomads brought a blind little boy from their region to the project. This small example shows how important it is for the children to know that they are valuable members in society. We want the students not to be embarrassed to be blind, they should see it as a sort of quality. One person has big feet, another has red hair and some are blind. They should stand up in society and say, “I am blind, so what!?” ( [http://www.braillewithoutborders.org/ENGLISH/projectintibet\\_preface.html](http://www.braillewithoutborders.org/ENGLISH/projectintibet_preface.html))

In this passage, the active acceptance of imperfection is illustrated. The blind students have adapted to their “disability” and know what they are capable of doing, rather than what they cannot do.

### Striving for Imperfection

I realize that while I mentioned the premise of “Things To Do With Shopping Centers,” which is that we should not generalize people’s behavior or attitudes based on whenever we happen to observe them, I myself described the disabled in quite generalized terms. I wish there was more time (e.g. a long-term project) and more space (a book rather than a paper) which would focus more on single cases of people with disabilities to highlight the differences that exist between them, just as there are always differences between so-called healthy, perfect, or non-disabled people.

At the same time, I felt that since there is not a lot of literature that does talk about the differences between people with disabilities even on a general level—unless it describes symptoms of different disabilities and specific behaviors associated with them—it was important to start with the more general look at the imperfect population. The previous section, “From Stereotyping to Some Bodies,” I tried to reach a compromise between

generalizing and describing particular individuals. I first defined general attitudes of the disabled people and then focused on one specific instance of a blind child.

Still, I would treat this as the first step, since all generalizations are dangerous in that they may lead to the creation of stereotypes. An example is a stereotype that all or the majority of people who are physically disabled cannot get married, the stereotype that was actually (and sadly) confirmed in Nosek's studies.

In the beginning of the paper I suggested that in order for the disabled people—and I use the term for the lack of any other that exists to make this group less uniform, should I call them some bodies, perhaps?—to enter the path of perfection, the term would have to denote completion rather than its highest quality, or better yet, humans should cease striving for perfection and just be who they are. If humans could only accept the fact that nobody is perfect, in the modern sense of the word, they would not be valued and compared against each other and against some subjective standards of "perfection." Being imperfect would no longer be associated with something negative. It would merely mean so much as being different from each other.

## References

<http://www.nimh.nih.gov/publicat/adhd.cfm#readNow>, accessed on 05.07. 2005

[www.q.webring.com](http://www.q.webring.com), accessed on 04.21, 2005.

([http://www.braillewithoutborders.org/ENGLISH/projectintibet\\_preface.html](http://www.braillewithoutborders.org/ENGLISH/projectintibet_preface.html), last accessed 04.21.2005.

Altman, B. M. (1981). Studies in attitudes towards the handicapped: The need for a new direction. *Social Problems*, 28, 321-337

Caran, K. (2005). Tom's Story: His Life and Experiences.

Gardner, H. (1993). *The Unschooled Mind: How Children Learn and How Schools Should Teach*, Basic Books.

Jenkins, R. (1991). Disability and social stratification. *The British Journal of Sociology*, 42, 557-580.

Morris, M. (1999) Things to Do with Shopping Centers in *Cultural Studies Reader*, S. During (ed), Taylor & Francis, Inc.

Nosek, M. A., Hughes, R. B. (2003). Psychological aspects of sense of self in women with physical disabilities. *Journal of Rehabilitation*, 67, 20-25.

Shiach, M. (1989). *Discourse on Popular Culture: Class, Gender, and History in Cultural Analysis, 1730 to the Present*. Stanford University Press.

Thomas, E. J. (1966). Problems of disability from the perspective of role theory. *Journal of Health and Human Behavior*, 7, 2-14.

