**Chapter 3: Building Reality: The Social Construction of Knowledge**

Discussion Questions:

1. Can you observe any commonalities between the social construction of reality discussed in these articles? If so what?
2. What type of research methods were used to conduct these studies?
3. Are the data presented in these articles based on qualitative and/or quantitative research?

Heith Copes & Andy Hochstetler

Situational Construction of Masculinity among Male Street Thieves

Journal of Contemporary Ethnography, Vol. 32, No. 3, 279-304 (2003)

<http://jce.sagepub.com/cgi/reprint/32/3/279?ijkey=133h0382/HMHo&keytype=ref&siteid=spjce>

**Abstract:**

Increasingly, theorists recognize that the influence of masculinity on decision making is situationally contingent and embedded in interactions. Using interviews with ninety-four male street thieves, the authors describe the situations that bring constructions of masculinity into the foreground of street crime. In certain situations, men are likely to engage in criminal behavior as a mechanism for constructing their masculinity. The authors find that hanging with criminally capable associates and partying are critically significant for understanding when masculine concerns bear on criminal decision making. In these situations, copresent others interpret inappropriate actions or responses as definitive signs of weakness, passivity, and failure in the struggle to be a man. They also examine how age and criminal experience shape conceptions of masculinity and the style of their enactment.

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Barbara J. Risman

College Women and Sororities: The Social Construction and Reaffirmation of Gender Roles

Journal of Contemporary Ethnography, Vol. 11, No. 2, 231-252 (1982)

<http://jce.sagepub.com/cgi/reprint/11/2/231?ijkey=QVSckFJhC6.5Q&keytype=ref&siteid=spjce>

**Abstract:**

Gender socialization in urban societies is acknowledged to occur primarily in preadolescence Risman's analysis of one college sorority displays additional ways in which women adopt role-specific behaviors that are formally encouraged by both official regulations and informally shaped by cultural norms. Her data suggest that the socialization processes and the consequent roles may in fact be inappropriate for facilitating women's adaptation to a changing social environment.

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Rebecca W. Tardy

"But I Am a Good Mom": The Social Construction of Motherhood through Health-Care Conversations

Journal of Contemporary Ethnography, Vol. 29, No. 4, 433-473 (2000)

<http://jce.sagepub.com/cgi/reprint/29/4/433?ijkey=vMB5YBFf2MQ4s&keytype=ref&siteid=spjce>

**Abstract:**

Examining the impact of health information seeking among informal, interpersonal networks, this article focuses specifically on the extent to which these conversations serve to identify role boundaries, specifically that of motherhood. Drawing on Goffman's work on region and regional behaviors, this ethnographic analysis of women in a moms and tots play group reveals boundaries between the public and private presentation of self. The regions of front stage, backstage, and "back"-backstage are used here to discuss how talk regarding health issues, and particularly inappropriate or taboo talk, defines and exemplifies the role of the "good" mother. The implications for the accessibility of information are discussed in light of the cultural contradictions women face in fulfilling this role.

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Peter Conrad and Kristin K. Barker

The Social Construction of Illness: Key Insights and Policy Implications

*Journal of Health and Social Behavior* 2010 51: S67

<http://hsb.sagepub.com/cgi/reprint/51/1_suppl/S67?ijkey=g0wBL51GCjAWQ&keytype=ref&siteid=sphsb>

**Abstract:**

The social construction of illness is a major research perspective in medical sociology. This article traces the roots of this perspective and presents three overarching constructionist findings. First, some illnesses are particularly embedded with cultural meaning—which is not directly derived from the nature of the condition—that shapes how society responds to those afflicted and influences the experience of that illness. Second, all illnesses are socially constructed at the experiential level, based on how individuals come to understand and live with their illness. Third, medical knowledge about illness and disease is not necessarily given by nature but is constructed and developed by claims-makers and interested parties. We address central policy implications of each of these findings and discuss fruitful directions for policy-relevant research in a social constructionist tradition. Social constructionism provides an important counterpoint to medicine’s largely deterministic approaches to disease and illness, and it can help us broaden policy deliberations and decisions.

Luc Pauwels

Visual Sociology Reframed: An Analytical Synthesis and Discussion of Visual Methods in Social and Cultural Research

*Sociological Methods & Research, May 2010; vol. 38, 4: pp. 545-581.*

<http://smr.sagepub.com/cgi/reprint/38/4/545?ijkey=.WKu1F4KLcScE&keytype=ref&siteid=spsmr>

**Abstract**

Visual research is still a rather dispersed and ill-defined domain within the social sciences. Despite a heightened interest in using visuals in research, efforts toward a more unified conceptual and methodological framework for dealing vigilantly with the specifics of this (relatively) new way of scholarly thinking and doing remain sparse and limited in scope. In this article, the author proposes a more encompassing and refined analytical framework for visual methods of research. The ‘‘Integrated Framework’’ tries to account for the great variety within each of the currently discerned types or methods. It does so by moving beyond the more or less arbitrary and often very hybridly defined modes and techniques, with a clear focus on what connects or transcends them. The second part of the article discusses a number of critical issues that have been raised while unfolding the framework. These issues continue to pose a challenge to a more visual social science, but can be turned into opportunities for advancement when dealt with appropriately.

Horwitz, Allan V.

**Creating an Age of Depression: The Social Construction and Consequences of the Major Depression Diagnosis**

Society and Mental Health, Mar 2011; vol. 1: pp. 41-54

<http://smh.sagepub.com/cgi/reprint/1/1/41?ijkey=xRMXEhCp2Y7xU&keytype=ref&siteid=spsmh>

**Abstract**

One type of study in the sociology of mental health examines how social and cultural factors influence the creation and consequences of psychiatric diagnoses. Most studies of this kind focus on how diagnoses emerge from struggles among advocacy organizations, economic and political interest groups, and professionals. In contrast, intraprofessional dynamics rather than external pressures generated perhaps the major transformation resulting from the Diagnostic and Statistical Manual of Mental Disorders, third edition, diagnostic revolution in 1980--the rise of Major Depressive Disorder as the central diagnosis of the psychiatric profession. Other interests, including the drug industry and advocacy groups, capitalized on the features of this diagnosis only after its promulgation. The social construction of depression illustrates how social and cultural processes can have fundamental influences over diagnostic processes even in the absence of struggles among forces external to the mental health professions. It also indicates how diagnoses themselves can have major professional, economic, political, and social consequences.