



# The White Cane: An Ethnographic Account on the Widespread Ambivalence Amongst Visually Impaired Towards an Iconic Aid

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RESEARCH



## ABSTRACT

Many people with acquired or progressive visual impairments often exhibit reluctance towards using the white cane. This article employs a qualitative ethnographic approach to gain a deeper understanding of why some individuals might opt not to utilize the white cane, a tool widely acknowledged for its assistance in enhancing mobility and promoting independence. Based on fieldwork conducted at a Low Vision and Resource Centre in Sweden, which involved interviews with both new and experienced white cane users, as well as low vision teachers and therapists at the center, the study is aiming at more profound knowledge of the exposed position in society of visually impaired people. Additionally, it is argued that by recognizing the cane as a physical object within the human environment, we can gain further insight into the conflicting emotions experienced by individuals with acquired or progressive visual impairments. The article's overall conclusion suggests that the resistance towards this iconic aid is quite reasonable. The white cane inevitably prevents any attempt to pass as a fully sighted person, as it identifies the user as someone who differs from normative and ableist expectations regarding bodily function.

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The white cane was first introduced as an aid for the many people with disabilities during the First and Second World Wars. During the First World War (1914–1918), French “war invalids” started to use the white cane, and this soon spread to England and America. The particular technique of sweeping the cane back and forth was developed by Richard Hoover, an American teacher at a school for the blind, when war invalids returned from the Second World War (Borkowski 2009).

Nowadays, the white cane, also known as the white stick or mobility cane, has reached an iconic status as a simple and straightforward tool that allows practised users to feel the nature of the ground and to orient themselves in their surroundings. Consequently, it should reasonably be appreciated by those who have limited vision.

However, amongst Swedish low visions teachers and therapists, it is a well-known fact that persons with acquired or progressive visual impairment often prefer not to include the white stick in their everyday life, even if this involves limited mobility and considerable strain in encounters with other people (Bäckman 2022; Bäckman 2023; Berndtsson 2018). As witnessed by several other studies, this reluctance amongst visually impaired people to engage with the aid is not limited to Sweden (Dos Santos et al. 2020; Hammer 2012; Hersh 2015; Hogan 2012; Kudlick 2011).

A tentative explanation of this ambivalence—and even resistance—is that this is partly owing to the kind of matters other than surfaces and hinders in the way, that the white cane makes visible. Apparently, the aid is also a physical object that draws attention to visually impaired persons’ difficulties with their eyesight. By signalling to the surroundings that this is a person with visual impairment, the white cane thereby cancels the individual’s possibility to establish oneself as a fully sighted person, which is what many people with acquired or progressive visual impairment strive for as far as possible (Bäckman 2022; Bäckman 2023; Berndtsson 2018; Dos Santos et al. 2020; Hammer 2012; Hersh 2015; Hogan 2012; Kudlick 2011).

Situations when individuals do their best to conceal or under-communicate signs (e.g., skin, language, or behaviour) that might reveal them as other than what they want to appear as, have long been brought to attention within research on processes of marginalisation. *Passing* is an overall concept used for discussing these deliberate strategies in relation to one’s surroundings. If carried out successfully, such operations will let the individual escape the adverse associations that are evoked by the stereotype (Bäckman 2009; Kanuha 1999; Langemyhr et al. 2023; Majaj 1994).

Drawing from insights within the vast field of critical disability studies, I will in the forthcoming argue that the users’ attitude towards the white cane must be understood in close connection to the tool’s association with widespread norms of ableness (Garland-Thomson 2009; Michalko 2002; Michalko 2017). Due to this relation, the aid transfers the user from one societal status to another through what might be called the *negative visibility of the cane* (Alcoff 2006; Al-Saji 2014; Berndtsson 2018). For those who have some form of norm-breaking impairment, the power structure of ableness is no figment of the imagination. On the contrary, it is a social matter considerably affecting and limiting people’s day-to-day life (Bylund 2022; Hughes 2007; McRuer 2006; Rydström 2012; Scherer 2005; Shildrick 2012; Siebers 2008).

In this sense, the white cane functions to signify the user as a non-able-bodied person, invoking the work of Erving Goffman. The concept of *stigma* (Goffman 1990 [1963]) has informed a number of analyses concerned with the relation between a taken for granted ordinariness and different kind of social deviances (Berndtsson 2018; Dos Santos et al. 2020; Hogan 2012; Hersh 2015). As a well-established term denoting a mark of disgrace that adheres to an individual, the acknowledgment of stigma, similarly passing, is aptly suited for the purpose of my investigation.

In the following, I will first comment on the article’s aims and methodology. This will be ensued by a section explaining why the concept of the aid’s materiality has been assigned such a vital role in the discussion, and how this approach relates to both critical disability studies and the concept of ableism. The subsequent part of the article introduces several theoretical perspectives, all converging in their emphasis on different ways to establish the white cane as an extension of the individual’s own body. Following this, I present three analytical headings that delve into various aspects of how the white cane interacts with its social environment.

Throughout these discussions, insights gleaned from interviews conducted during an ongoing field study are employed to fortify and substantiate the analysis. In the last of these sections, I particularly scrutinize the question of why anyone might reject this aid, utilizing the concepts of stigma and passing to illuminate the specific social status jeopardized by the presence of the white cane. A final conclusive section summarizes the article and argument.

## AIMS AND METHOD

The aim of the article is to provide an in-depth analysis of the reluctance expressed by many individuals with an acquired or progressive visual impairment towards the white cane. In parallel, I intend to offer the reader a better understanding of the marginalized position in society experienced by visually impaired individuals. It is important to emphasize that, while the empirical basis of the discussion is the ambivalent feelings the aid often evokes in users, the actual research question is thereby positioned outside of the subjective experiences of the users themselves.

Being visually impaired myself as a result from a post-operative injury, I have taken part in several rehabilitation activities that are regularly offered at a Swedish Low Vision and Resource Centre for over a decade.<sup>1</sup> During the last three years, my participation has turned into a more systematic ethnographic fieldwork, as I then received funding for a still on-going project. More detailed information about the project and its funding can be found in the article's concluding sections. Additionally, there is a paragraph detailing the project's ethical approval and the use of informed consent. All personal names mentioned in the text are pseudonyms.

At the Centre, where the fieldwork has been undertaken, the users are divided into three groups according to age: children, corresponding to persons up to twenty years old; adults, referring to persons between 20 and 65 years old; and seniors, referring to people over 65 years old. All in all, I have interviewed around ten low vision teachers and therapists, almost everyone in the Centre with education in orientation and mobility training, and approximately 30 adult persons with visual impairments, all from the middle age group, and ranging from very experienced users to beginners.

Roughly half of the interviews were conducted and recorded face to face, either on site at the Centre or at a nearby establishment (such as a café or a quiet restaurant). The other half were collected during the COVID-19 pandemic and consist of recorded phone interviews. The average length of the interviews is one hour, albeit some of them were shorter while others lasted for about two hours.

The interviewees are both recently visually impaired persons and those with a longer history of either being blind or partially sighted. However, none of the individuals cited in the article was born blind, even though some of them have lost their eyesight early on in life. It is noteworthy that some of the interviews overlap, as some of the teachers and therapists also have visual impairments.

A specific difficulty when it comes to individuals with visual impairments is that it is not always possible to determine exactly how well or poorly someone sees. Because many visual impairments are not constant in nature, the same person may, on the contrary, have better or worse vision on different days. Visual ability can also vary due to factors such as access to light, or simply depend on the individual's current state. For this reason, the background information of the informants has been limited to details about age, approximate time of onset of visual impairment, and type of visual impairment (such as Glaucoma or Retinitis Pigmentosa).

To provide a comprehensive understanding of the study's empirical foundation, it is essential to supplement this general information with a few additional remarks regarding the methodology employed. The fact that I myself have a significant visual impairment means that I share experiences with my informants to a certain degree. The following discussion of the white cane, which illuminates the way its materiality influences both the self-image of individuals and relations between people, is thus supported by my own knowledge from within the field,

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<sup>1</sup> Since the spring of 2012, I have sight impairment with severe and permanent reduction of my field of vision in both eyes.

as well as by the experiences of other people.<sup>2</sup> As a researcher, this brings into focus a sensitive balancing act between empirical closeness and analytical distance. From that perspective, my own experiences may be both a resource and an encumbrance (Adams et al. 2015; Bäckman 2022; Davies 2008; Farahani 2010).

First and foremost, the discussion will however explore the realm of the interviews. This methodological choice is in accordance with a general trend within critical disability studies to acknowledge persons with first-hand knowledge of the compulsory norms imposed upon disabled bodies (e.g., Bylund 2022; Campbell 2009; Grue 2021; Kulick & Rydström 2015; Price & Kerschenbaum 2016). Other researchers have further clarified that one should think of disability studies as a critical methodology and mode of analysis, rather than merely a subject-oriented area of study (Minich 2016; Schalk 2017).

## THE WHITE CANE AS MATERIALITY

As previously stated, keeping the cane's material existence in view is a way to accomplish a greater understanding of the mixed feelings that many persons with visual impairments show towards the aid. Focusing on the white cane as an object and as materiality facilitates a closer examination of the broad range of effects and social situations that arise in its close vicinity. With its specific interest in the white cane, the discussion links with the field of medical humanities related to "the medical object" (e.g., Binnie, McGuire & Carel 2021; Hansson 2020; Rice 2010). To begin, we therefore need to elucidate what can be said of the aid as such an object.

A white cane can be between 100 to 150 centimetres in length; the shorter is a symbol cane used primarily to inform the surroundings of the user's impaired vision. The longer mobility cane is an aid for orientation, enabling a person to move around. When you use the aid, you hold it lightly with one hand sweeping or tapping back and forth along the ground in front of you. In this way, you can register the nature of the surface and discover any obstacles or differences in level. You can also just hold the cane firmly at an angle in front of you for others to see so they can step aside when you are approaching. Usually, the cane can be folded up and be discreetly deposited in a pocket or bag.

As a physical object in the world, the white cane is both an aid and a distinct signal to other people. In the latter capacity, it provides the surroundings with certain facts: this is a person with poor eyesight, be considerate, step aside. An illustration of how the aid affects its surroundings is the way the white cane communicates relevant information about its user, and in the same time, actively communicates useful sensory impressions to its user. As a globally established aid for visually impaired people, the white cane is therefore an obvious example of how a non-human object creates a distinct impact on a world populated by humans (Ingold 2007; Latour 1999, 2005; Miller 2005).

Those who study the materiality of the white cane realise that the intervention of the aid in people's social reality concerns far more than just increased visibility and the conveying of sensory impressions. Attached to the aid is a manual of directly addressed information. Wherever you are with your white cane, you can make it clear that you are (and most often be understood as) a person with some form of severe loss of vision: this is effective in relation to cars, cyclists and other people. On the one hand, the cane thus creates space and makes people willing to show extra consideration, on the other, the aid makes it clear that the user is in need of this extra consideration.

This double feature highlights the symbolic nature of the white cane. It is the same aid, which connects the users with their surroundings, that also points them out as different compared with individuals who correspond in a more clear-cut way to ideas of being fully able-bodied. The fundamental idea that a person is "disabled" (i.e., the phrase "visually impaired"), cannot be reduced to represent an easily observable characteristic of an individual. The alleged disability is instead the complex situation that arises when somebody with other abilities than the usual kind encounters a world that is shaped to suit those who have a fully able body. It is there and

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<sup>2</sup> For a thorough discussion of the autoethnographic aspects of the project, see Bäckman (2022). An interesting, yet reversed, example from another fieldwork is presented by Hammer (2013).

then that a person with an impairment literally becomes “disabled” in their interaction with their surroundings (Bylund 2022; Rydström 2012; Scherer 2005; Shakespeare 2000; Shildrick 2012; Siebers 2008; Thomas 2002). For a person who has severe loss of vision, this means that they, on a daily basis, have to handle the fact that they deviate from normative ideas of having a fully serviceable body.

This is also why ableism is such an important concept within the field of critical disability studies (Campbell 2009; Goodley 2014; Harpur 2009; McRuer 2006). With an explicit connection to other and more established concepts such as racism and sexism, ableism refers to a downgrading attitude from surrounding people towards all who are not fully able, and the consequences of this for the day-to-day actions of the disabled person. Like racism and sexism, ableism builds on the occurrence of already existing orders of power at the same time as the social downgrading is easily internalised when individuals project the gaze of the non-disabled person onto themselves (see also Fanon 2008 [1952]).

## THE WHITE CANE AS AN EXTENSION OF THE BODY

Over time, the white cane and its predecessors has attracted attention from various philosophers and thinkers (Kleege 2005; Paterson 2016). It has often been pointed out as a substitute for the blind person’s eyes. Maurice Merleau-Ponty (2002 [1962]) therefore regarded it as an extension of the blind person’s body. This phenomenologically influenced analysis is a common way of approaching the relation between aid and individual. Emphasis is placed on the aid as a means for blind persons to use their other senses to gain an understanding of their surroundings.

Based on recent interest for the agency of materiality, the white cane and the user could also be described as a union of different kinds of objects, features and bodies, referring to the kind of hybrid composition included in concepts such as *network* or *assemblage* (Latour 1999, 2005). Understood in this way, the human being and the white cane are united like a machine for successful movement. Such a line of thought is even more significant if it is applied to the comparably more complicated composition consisting of a visually impaired person and a trained dog in harness, usually termed a guide dog. This coordinated pair involves a temporary coexistence between human being, animal and material object.

A third and related manner of considering the white cane can be found in the studies of Donna Haraway (1991, 2008). In her work on theory of science, and moreover within the field of human-animal studies, she has questioned long-standing limits that separate concepts such as nature and culture, humans, objects, and animals. By using inclusive concepts such as *cyborgs* and *companion species*, she emphasises the ongoing interaction and co-constitution with surrounding materiality.<sup>3</sup> Her father, who was a sports journalist, had suffered from polio early in life and used crutches and a wheelchair to move around; for him, the aids did not exist separately, disconnected from his body. Rather, according to Haraway, they must be understood as an inevitable part of his everyday life in the world (Haraway 2008: 167).

The white cane can be described in the same way; not as an external addition to one’s body, but as part of it. In other words, the white cane can be regarded as the visually impaired person’s companion species. In my collected material from the Centre, there are several examples of people who attest to the white cane eventually becoming an integrated part of themselves over time. Nevertheless, just like the woman in the quote below, they had often spent a long time getting used to the aid.

How it felt to start using the cane myself? Not good, it felt like everyone would stare at me, it felt tough, I felt exposed and watched. I was scared, on uncertain ground, physically placing my feet. It took time before I used the cane at home with family and friends, I felt resistance. /.../ But I needed it, when I used the cane in the store, I encountered greater understanding. If I bumped into someone, they didn’t get angry, but apologized to me.

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<sup>3</sup> These two concepts relate to erasing absolute limits which usually occur between nature/culture and human/animal, see Haraway (1991, 2008).

I acquired a different identity, became someone other than who I had been before. I changed. And I changed in the eyes of others. /.../ But it evolved into something else; I was challenged. I put on makeup, wore a short skirt, and went out in town with my cane. I wanted to show that I can still be myself, even though I have a different identity.

Inger, in her sixties.

However, this is hardly the case for many people with impaired vision. Unlike the close relationship developed by Haraway's father to his crutches, the white cane is for many people far from a comfortably integrated part of their own body. On the one hand, as mentioned, it is not unusual for people with impaired vision to completely avoid using the aid. On the other hand, many who do incorporate the white cane into their own life world, consider it to be a foreign object that chafes and causes trouble. In short, it generates a striking dissonance for many users in their everyday life.

The white cane, I've had a white cane for a long time, a few years, but it never really comes out of my bag. Well, I'm shy of it, shy for people; about what they might say. 'That damn idiot.'

Nikolaj, in his forties.

You feel a bit substandard [with the white cane]. You're marked out. I have a handicap. Like second-grade goods. Seconds. A bit like that. That feeling... I mean, I know that it isn't really like that. But that feeling.

Carina, in her sixties.

This also applies to the previously mentioned guide dogs. Here, the ideas of both companion species and a closely knit assemblage are more relevant in many ways. Nevertheless, again it is a case of the perspective from which the human being and cane are regarded. One of my interviewees accentuated the relief she felt with a guide dog when the new "aid" distracted the attention which she had often found to be distressfully focused on herself while using the white cane.

Using her cane, she had frequently been stopped and asked what it is like to have poor vision, to be "blind", or not to be able to look after oneself. With the dog, these questions, which she had usually felt to be an obtrusive and unpleasant form of attention, suddenly ceased. Or more accurately, people still asked questions, but now they were about the dog and not about herself. What kind of dog? How is it trained? What kind of food does it like?

Amongst people the dog thus created a greater distance between herself and the loss of vision; it was actually a relief for the woman to be able to be out of sight behind the dog. She expressed this sentiment rather explicitly:

It might still be a bit more interesting for me to talk about the dog than to talk about being blind, which I have been for forty-eight years; it's a pretty worn-out chapter.

Sara, in her fifties.

## **MATERIALITY IN THE WORLD OF PEOPLE**

Whichever of the above-mentioned perspectives and concepts that are preferred, it is clear that the materiality of the white cane produces specific effects. Just like the black clothes of the football referee, the white cane is an object that focuses attention on the user, the visually impaired person. In that sense, the cane has the ability of literally changing physical reality. Like the staff of Moses, it parts the sea of people in crowded places. People see the iconic aid and step aside. A person who is using the white stick does not have to be afraid—or at least not as afraid as otherwise—of bumping into other people. And if this happens, oftentimes the person the individual collided with apologises. Thus, in other words, the white cane relocates the responsibility for the user's movements.

When the users and their bodies are temporarily placed in focus for the discussion in this way, it means that we simultaneously move the analysis to the visually impaired person's being-



in-the-world. From this phenomenological perspective, the white cane creates an expanding situation for the user, in which the remaining senses are allowed to expand and reach out to otherwise inaccessible parts of the world.

What the white cane does, the actual difference it achieves in the world, is not only to perform as an extension of the body of the visually impaired person, or to act as a substitute for the eyes of a person with low vision. With the cane in hand, the user also becomes an individual with impaired vision, somebody who is disabled in a world adapted to persons with full vision. Another common name for the white cane is indeed “blind stick”, underlining the close connection, which is taken for granted, between the user, cane, and visual impairment.

The agency of the cane is therefore not only a welcome help. Unlike a medical student who with a white coat and stethoscope feels proud of being recognised as a ‘doctor’ at a hospital (Rice 2010), the epithet of “visually impaired” is not an identification that induces the same uncritical embrace. Blind individuals just want to be treated as everybody else, to fly under the ableist radar and not be immediately defined by your physical inabilities.

I don’t flaunt the cane at all; I sneak around with it. In Stockholm, where no one who knows me can see it, I can use a cane. I’m not ashamed of being visually impaired, but I want to show that I’m just like everyone else. It’s still difficult.

Marika, in her forties.

I have no problems using it today. However, quite often I experience a certain aversion, a limited... let’s say perception of people with disabilities in general, in this case, those with visual impairments. You’re viewed in a certain way, in the eyes of others. I experience that quite often.

Linus, in his thirties.

While the guide dog in the previous example created a distance between the woman and her visual impairment when attention was channelled towards the animal, other people’s understanding of the cane user as primarily visually impaired is instead reinforced by the aid itself. According to my interviewees, surrounding people tend only to see and react to the deviation that is signalled by the white cane, thus limiting the user to just one side of their personality, as if the loss of vision is the only relevant part of them.

Nonetheless, the materiality of the aid can sometimes be expressed in more positive terms. The white cane can also be associated with something well-known that is familiar and sometimes even evokes pleasant feelings when used. Some users give their white cane a name and personalise their sticks with their own epithets; some that I have come across in my study are the names Horst, the fiancé/fiancée and the uncle (who does not want to be left alone and must be brought along when the user leaves home).

When the white cane is encompassed and enclosed in an everyday occurrence like this, the accounts of handling it are also less strained. Then it is the familiar feeling, the well-known weight and the natural balance in the hand that is stressed. On these occasions, the same persons who during interviews and group discussions at the Centre have vividly dwelt upon the disadvantages of the white cane and its usage have therefore instead elaborated on the pros and cons of different kinds of canes. Sometimes they refer to their own interest in being introduced to a new kind of white cane or type of tip.<sup>4</sup> For example, one man describes his own home-made white cane.

I have a wooden cane painted white. For practical reasons and emotional; I enjoy it. I have a sailing boat and then I’m out in the woods almost every day with my dog, and it is practical to have a walking stick, which is a blind stick at the same time (...) It isn’t longer than the usual one, it’s breastbone-height like an ordinary mobility cane; it’s around 1.30 metres and made of oak, so it’s quite heavy. But then I painted it white and with this stuff that you have on floorball sticks, this kind of tape. The tip is an ordinary one, which I took from an ordinary [laughs] Visual Centre cane!

Harry, in his fifties.

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<sup>4</sup> A range of tips for white canes are available to be used on different kinds of surfaces and depending on the type of stick and the user’s technique.

However, it is not just the users who shape and transform the cane through their choice of material. The fact is that an ordinary white cane has a corresponding impact on the user's own body. Despite the superficial simplicity, the white cane is a *technology* in the sense that it is an exterior aid with the purpose of achieving an intended end, such as increased visibility or better mobility. The white cane, like other technologies, thus affects the users themselves. Use of the white cane readjusts one's muscles; certain muscle groups gradually become stronger and gain in size. The user's posture changes, the sensitivity of their wrist is trained to a higher level than previously, and their ability to discern and interpret echoes increases. Incorrect use of the white cane can, on the other hand, cause aching muscles and painful inflammations. With inspiration of studies on social materiality, it is to some extent therefore reasonable to regard the white cane as an independent actor—or, in the words of Latour (1999), an *actant*—which causes certain bodies to step aside and others, literally, to change.

## THE WHITE CANE ENABLES—AND REVEALS

As previously discusses, the white cane is in many ways an almost optimal aid for visually impaired people, to enhance their orientation and mobility. It does not require any advanced or costly technology. It is easily exchanged if it breaks. When used correctly, it enables the user to feel the surface of the ground as well as obstacles. The experienced user can even decode useful information from the variation of the sound on different kinds of surfaces. The white cane itself makes different kinds of noises, rattling or tapping, depending on the technique. Altogether, this means that the user usually cannot move in a particularly discreet manner. You call attention to yourself not only by your visibility, that is to say by being equipped with a white cane, but also through the sounds caused by the active usage of the cane.

The same applies to the behaviour of the user. With the cane in hand, the user moves and navigates their surroundings in a way that differs from a person with full vision. For example, most people usually avoid various impediments, while the user of a white cane instead actively seeks them out, since they act as guides for orientation. The user needs to know where the obstacles are to prevent colliding with them and hurting themselves. Further, these obstacles are necessary points of reference for proceeding between one place and another. Therefore, the user of a white cane often actively moves to the edge of a pavement, a post, the wall of a house and then continues to the next known or unknown impediment. Frequently, these points of reference are part of a rehearsed route for being able to move from one place to another.

Understandably, such a manner of movement might attract attention. During one interview, Per, who is in his late fifties and completely blind due to adult-onset Retinitis Pigmentosa, described a situation where people with full vision would occasionally stop him, thinking he was about to walk into a post. However, this was actually his intentional action, a method he uses to precisely locate himself, as it allows him to move forward to the next familiar reference point.

As an experienced user of the white cane, Per describes it as an important aid which allows him to move around in known and unknown places. Nonetheless, the crux of the matter is, once again, that the empty space, which is usually created by the cane around the user as a result of people stepping aside when they see the aid, acts just as efficiently to publicly reveal the user's inabilities.

The white cane thus involves a distinct conflict of interests; it helps and supports at the same moment as it attracts attention and points out. The white cane thereby also gives rise to a social drama in which the identity of the person with low vision as being physically different is continually reinforced and confirmed in encounters with the surrounding world (Berndtsson 2018; Hammer 2012; Kudlick 2011; also, Bock 2012; Kanuha 1999). For this reason, many people with low vision experience the aid—the object and symbol—as a *stigma* (Goffman 1990 [1963]).

Subsequently, the interaction of the white cane with the surrounding world is far from limited to the context of the visually impaired person's loss of an important sense. Not least, the state of being visually impaired is made clear to the users themselves. For example, for those who have a progressive diagnosis, the cane is the definite proof that the eye-disease has advanced to a critical stage. Having to use the aid thereby means to be forced to admit that one's



independence is threatened. The white cane is a reminder of all that is already lost or that will go missing in a world that is almost exclusively adapted to and designed for people with full vision.

What I find difficult is that... somehow, you don't want to stand out. And even though I haven't had particularly good vision at any point, you don't want to be different from the crowd, so to speak. So, it's like, it sounds silly, but I didn't start using my cane until four years ago. And that's quite late. But I thought, 'I can see this well enough,' until eventually, you realize, 'No, I can't.' Now, I don't have much choice.

Karin, in her fifties.

The same cane that was previously described by phenomenologist Merleau-Ponty as an extension of the blind person's body can therefore just as well be regarded from the opposite perspective. When my informants tell me of various incidents and encounters in city environments, they often recount the event as if it were they themselves that had instead become an extension of the white cane.

This is a result of the strong symbolism of the white cane, which tends to erase the human being, the individual, from the user. In these encounters, the cane evokes a much more one-dimensional figure: the visually impaired or blind person. This means that the above-mentioned social drama is not only going on in relation to the user's own self-image but also outside the visually impaired person.

## THE WHITE CANE AS A SOCIAL MANUSCRIPT

To be able to penetrate a world of contradictory feelings aroused by the white cane in many people with impaired vision, we must take into account this ability of the cane to affect its surroundings. The white cane is not only an object in the world, it is also a powerful social materiality that impacts on and transforms reality. It creates new identities, orientation, reactions, behaviour, distance, bodies and patterns of movement.

In addition to its functional and orientating attributes, we can observe that the white cane must also be understood as an imperative that people understand, interpret, and with which they act in accordance. When the white cane is continuously read by nearby people, it has something to convey in response. The white cane is thereby a cultural and social manuscript; it establishes and forms a person with low vision as someone who is "partially sighted", "visually impaired", "blind", or "disabled" in a broader sense.

It is important to realise the decisive role of the white cane, the actual object, in these kinds of social settings. Belonging to the norm involves the privilege of being invisible in the face of others. Conversely, if you are situated outside the norm this involves a corresponding degree of, usually, negative visibility (Alcoff 2006; Al-Saji 2014; Kanuha 1999; Langemyhr et al. 2023). For those who became visually impaired in adulthood, who have once been able to pass as having full vision, this is a noticeable and severe transition from comparatively non-disabled to distinctly different. Having a body that fulfils bodily norms in our society implies not only an alleged ordinariness, but it also involves other prospects in life concerning a range of matters from education, professional work, economy, and health to self-esteem and independence.

The visibility created by the white cane in relation to the user is thus not any kind of visibility, it is a threatening kind that degrades and leads to a loss of status in society. Ableism can be understood as a set of societal and cultural norms that elevates the able-bodied (Campbell 2009; Goodley 2014; Harpur 2009; Hughes 2007; McRuer 2006), which means that many people with low vision are afraid to be categorized as underprivileged and subordinate. Consequently, the white cane, the recommended aid for the visually impaired, paradoxically also contributes to the establishment of power orders of ableism and exclusion.

Having said that, there is reason to recall the idea of the white cane as an extension of the blind person's body and senses, which can be united with and incorporated into a person's own body. In this type of phenomenologically inspired reasoning, the cane is mainly accounted for as creating possibilities. It is depicted as an aid allowing the blind person to "see" and experience such things that are otherwise concealed and out of reach.

In many respects, this is a correct description of what is sometimes achieved by the white cane for a person with impaired vision, it can be a truly welcome and efficient complement to failing abilities. However, we can now also state that the idea of the white cane as fundamentally an extension of the body is in part a desktop construction. The uncomplicated amalgamation which the phenomenological standard example is based upon can evidently be described as a considerably more problematic and multifaceted course of events.

This is not a deficiency of the phenomenological perspective. On the contrary, researchers inspired by phenomenology have written with awareness about people who struggle to integrate materiality imposed from the outside into their life-world, and in relation to their bodies. Not least artificial limbs have been the subject of such nuanced studies (i.e., [Hettirarachchi 2016](#); [Käll, Mitchell & Skiveren 2021](#); [Shildrick 2015](#)).

Nonetheless, it is important to realise that the enduring rejection mechanism displayed by many interviewees, towards the white cane, is intimately connected with the visibility and the above-mentioned ableism. For many people with visual impairment, this resistance against the white cane must be understood as a refusal to embody a failure to fulfil the norms of having a serviceable body. This is an important observation for the understanding of how an aid can be as much a problem as it is useful. It is not hard to understand that a person might want to reject a facility that recreates them into something else, and furthermore provides them with a status that is often associated with a subordinate group. However, a clarifying point is necessary before ending the discussion. The question is, where does this stigma come from?

The obvious answer is that it cannot be regarded in isolation from the surrounding society and its cultural norms. The circumstance that the white cane can at all be considered a stigma depends on the feeling of shame for failing to live up to the ideal of being able-bodied. In other words, during their life-course the interviewed persons have to some degree internalised the power order that points them out as physically different and ultimately also somehow substandard ([Fanon 2008 \[1952\]](#)).

As discussed, this is the reason the users not always associate the white cane with an useful aid. Instead, the aid itself becomes the visible proof of one's own failure, one's inability to present a convincingly competent and in that sense non-disabled body. This point can easily be pushed even further. From the perspective of the visually impaired person, the white cane is not only an outward sign of the loss of vision. It is also an object in the world that transforms the subject, through its very existence, into a person who has failed to live up to current norms of having a serviceable body. Consequently, many people that have acquired or progressive visual impairments wait as long as possible before coming out of the wardrobe as users of the white cane. Instead, they strive for as long as they can to pass as fully sighted individuals.

There is however nothing in the interviews that suggest that this must continue to be the case. On the contrary, individuals with a long-standing severe reduction in eyesight tend to be more familiar with using the white cane compared to those who have recently started using it. That is not to say that it is by no means easy to embrace the white cane, and thereby challenge the power of ableist norms in society, but it is certainly possibly.

## CONCLUSION

The empirical basis of this article is the ambivalent feelings expressed by many people with impaired vision in relation to the white cane. At a theoretical level, the aim is to illustrate how the cane, regarded as materiality and object, makes a real impact on its surroundings. By considering the materiality of the white cane, it is hence possible to deepen the understanding of circumstances that complicate a choice, which for an outsider would seem a straightforward beneficial option.

To understand how the white cane affects its surroundings, it is however necessary to consider its significance as an emblematic marker for impaired vision. The strong symbolism of the white cane gives it an almost existential dimension when it forces its users to confront their own inability to pass as ordinary persons. Accordingly, the issue at stake is the transformation from one social identity to another. If you no longer can manage without the aid, you enter a new status as visually impaired in a world adapted to people who can see.

What this discussion has illuminated is, on the one hand, the importance of considering the fundamental significance attributed to the white cane by the users themselves. On the other hand, this recognition cannot be fully understood or communicated without regarding the white cane as materiality in the world, and as an object that manifestly affects its surroundings. Often, it is the white cane and not the loss of vision that makes the user stand out in a crowd, thereby also revealing the user as differing from the bodily capacities of the surrounding people. The white cane therefore causes a break-down of the user's desire to pass as a non-disabled person by forcing them into a new identity: that of being "blind" or "visually impaired".

Symbols must be possible to decode, to be read or interpreted, in order to be socially active. The white cane makes the visually impaired person recognisable and comprehensible in the eyes of other people. Many times, this is exactly the problem. The white cane materialises the norm of having a serviceable body; the visually impaired person is established and pointed out as somebody who deviates from other people and who is not fully able-bodied.

The intention with this text has been to clarify some of the obstacles, and not least the massive social strain, that is directed upon those individuals from ableist society. Any avoidance of the white cane from individuals with visual impairments, should rightfully be understood in accordance with that normative pressure.

## ETHICS AND CONSENT

The project has obtained approval from the Swedish Ethical Review Authority (Ethix) under reference code: 2020-04389, and the data are being managed in accordance with this agreement. Prior to the data collection phase, the Low Vision and Resource Centre received a letter from the researcher providing information about the project. Following this, the researcher contacted employees who subsequently reached out to informants, providing them with project details. Informants were then given the choice to contact the researcher if they wished to participate, ensuring that participants were adequately informed in advance.

Participants granted verbal consent prior to the participatory observation period, and before the interviews, all participants provided oral consent. Additionally, the researcher reached out to informants outside of the Centre by disseminating information about the project within a larger group of visually impaired individuals. This resulted in individuals expressing interest in being interviewed about their use of the white cane. They were provided with both written and verbal information about the project before being interviewed. For confidentiality, pseudonyms have been used for all names mentioned in this article.

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## COMPETING INTERESTS

The author has no competing interests to declare.

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