The SRV JOURNAL

ISSN 1932 - 6963 December 2008 • Volume 3 • Number 2 www.srvip.org

Peer Reviewed Articles

L. Shevellar	**6**	"I Choose to be a Person of Integrity:" A Model for Constructive Relationships Between Human Services & Their Bureaucracies
T. Neuville *with* C. Hannah Smith	**18**	SRV & Teacher Prep: Not Just a Course, but a Course of Action

Article

S. Hartfiel	**26**	Suit & Tie

Reviews & More

K. Cocks	**38**	'Reducing Unwanted Risk for People with Disabilities and for Disability Workers' by B. Budiselik
D. Race	**41**	'Quality of Life for People with Intellectual and Other Developmental Disabilities' by R. Schalock, J. Gardner, & V. Bradley
S. Thomas	**43**	'Community-based Art Studios in Europe and the United States: A Comparative Study' by R.M. Vick & K. Sexton-Radek
S. Thomas	**45**	'The Counterfeiters' by S. Ruzowitzky
J. Osburn	**46**	'Cold Storage: Super Maximum Security Confinement in Indiana' by Human Rights Watch
S. Dewick	**51**	'little people BIG WORLD' by The Learning Channel
	60	List of Possible Items to be Reviewed

Training

	61	Calendar of SRV & Related Trainings

Column

W. Wolfensberger	**62**	Social Role Valorization News & Reviews

The SRV JOURNAL

Editorial Board:
Marc Tumeinski
Jane Barken
Jo Massarelli
Joe Osburn
Judith Sandys, PhD

Editorial Advisory Board:
John Armstrong
Tom Kohler
Zana Lutfiyya, PhD
Tom Malcomson, PhD
Nancy McNamara
Peter Millier
David Race, PhD
Susan Thomas
Wolf Wolfensberger, PhD

Editorial Consultant/Production:
Sandra Sasowski

Statement of Purpose:

We believe that Social Role Valorization (SRV), when well applied, has potential to help societally devalued people to gain greater access to the good things of life & to be spared at least some negative effects of social devaluation.

Toward this end, the purposes of this journal include: 1) disseminating information about SRV; 2) informing readers of the relevance of SRV in addressing the devaluation of people in society generally & in human services particularly; 3) fostering, extending, & deepening dialogue about, & understanding of, SRV; & 4) encouraging the application of SRV as well as SRV-related research.

We intend the information provided in this journal to be of use to: family, friends, advocates, direct care workers, managers, trainers, educators, researchers, & others in relationship with or serving formally or informally upon devalued people in order to provide more valued life conditions as well as more relevant & coherent service.

The SRV Journal is published under the auspices of the SRV Implementation Project (SRVIP). The mission of the SRVIP is to: confront social devaluation in all its forms, including the deathmaking of vulnerable people; support positive action consistent with SRV; & promote the work of the formulator of SRV, Prof. Wolf Wolfensberger of the Syracuse University Training Institute.

Editorial Policy:

Informed & open discussions of SRV, & even constructive debates about it, help to promote its dissemination & application. We encourage people with a range of experience with SRV to submit items for consideration of publication. We hope those with much experience in teaching or implementing SRV, as well as those just beginning to learn about it, will contribute to the *Journal*.

We encourage readers & writers in a variety of roles & from a variety of human service backgrounds to subscribe & to contribute. We expect that writers who submit items will have at least a basic understanding of SRV, gained for example by attendance at a multi-day SRV workshop (see this issue's training calendar), by studying relevant resources (see the next page of this journal), or both.

We are particularly interested in receiving submissions from family members, friends, & servers of devalued people who are trying to put the ideas of SRV into practice, even if they do not consider themselves as 'writers.' Members of our editorial boards will be available to help contributors with articles accepted for publication. The journal has a peer review section.

Information for Submissions:

We welcome well-reasoned, clearly-written submissions. Language used should be clear & descriptive. We encourage the use of ordinary grammar & vocabulary that a typical reader would understand. The *Publication Manual of the American Psychological Association* is one easily available general style guide. Academic authors should follow the standards of their field. We will not accept items simultaneously submitted elsewhere for publication or previously electronically posted or distributed.

Submissions are reviewed by members of the editorial board, the editorial advisory board, or external referees. Our double blind peer review policy is available on request.

Examples of submission topics include but are not limited to: SRV as relevant to a variety of human services; descriptions & analyses of social devaluation & wounding; descriptions & analyses of the impact(s) of valued roles; illustrations of particular SRV themes; research into & development of SRV theory & its themes; critique of SRV; analysis of new developments from an SRV perspective; success stories, as well as struggles & lessons learned, in trying to implement SRV; interviews; reflection & opinion pieces; news analyses from an SRV perspective; book or movie reviews & notices from an SRV perspective.

Send Correspondence to:

Marc Tumeinski, Editor
The SRV Journal
74 Elm Street
Worcester, MA 01609 US
Phone: 508.752.3670
Email: journal@srvip.org
Website: www.srvip.org

A Brief Description of Social Role Valorization

From the Editor

As this is a Social Role Valorization (SRV) journal, we feel it important to print in every issue a few brief descriptions of our understanding of what SRV is. This by no means replaces more thorough explanations of SRV, but does set a helpful framework for the content of this journal.

The following is taken from: Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry, p. 58.

> *... in order for people to be treated well by others, it is very important that they be seen as occupying valued roles, because otherwise, things are apt to go ill with them. Further, the greater the number of valued roles a person, group or class occupies, or the more valued the roles that such a party occupies, the more likely it is that the party will be accorded those good things of life that others are in a position to accord, or to withhold.*

The following is taken from: SRV Council [North American Social Role Valorization Development, Training & Safeguarding Council] (2004). A proposed definition of Social Role Valorization, with various background materials and elaborations. *SRV-VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux, 5(1&2)*, p. 85.

> *SRV is a systematic way of dealing with the facts of social perception and evaluation, so as to enhance the roles of people who are apt to be devalued, by upgrading their competencies and social image in the eyes of others.*

The following is taken from: Wolfensberger, W. (2000). A brief overview of Social Role Valorization. *Mental Retardation, 38(2)*, p. 105.

> *The key premise of SRV is that people's welfare depends extensively on the social roles they occupy: People who fill roles that are positively valued by others will generally be afforded by the latter the good things of life, but people who fill roles that are devalued by others will typically get badly treated by them. This implies that in the case of people whose life situations are very bad, and whose bad situations are bound up with occupancy of devalued roles, then if the social roles they are seen as occupying can somehow be upgraded in the eyes of perceivers, their life conditions will usually improve, and often dramatically so.*

Resource List

• **A brief introduction to Social Role Valorization**, 3rd (rev.) ed. Wolf Wolfensberger. (1998). (Available from the Training Institute at 315.473.2978)

• **PASSING: A tool for analyzing service quality according to Social Role Valorization criteria. Ratings manual**, 3rd (rev.) ed. Wolf Wolfensberger & Susan Thomas. (2007). (Available from the Training Institute at 315.473.2978)

• **A quarter-century of Normalization and Social Role Valorization: Evolution and impact.** Ed. by Robert Flynn & Ray Lemay. (1999). Ottawa: University of Ottawa Press. (Available from the Training Institute at 315.473.2978)

• **Social Role Valorization and the English experience.** David Race. (1999). London: Whiting & Birch.

• **A brief overview of Social Role Valorization**. Wolf Wolfensberger. (2000). *Mental Retardation, 38*(2), 105-123.

• **An overview of Social Role Valorization theory.** Joe Osburn. (2006). *The SRV Journal, 1(1)*, 4-13.

• **Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people.** Wolf Wolfensberger, Susan Thomas, & Guy Caruso. (1996). *SRV/VRS: The International Social Role Valorization Journal/ La Revue Internationale de la Valorisation des Rôles Sociaux, 2(2)*, 12-14.

• **A Social Role Valorization web page** can be accessed at: http://www.socialrolevalorization.com/

From the Editor

Call for Papers:
We will periodically publish a series of articles on the themes of SRV. The themes of SRV help one to understand and explain the reality of social devaluation and the power of social roles. The themes are based on the empirical realities which support SRV theory. Our goal is to invite people from a range of backgrounds and fields (e.g., psychology, sociology, law, medicine, human service, philosophy, theology) to engage with the content of SRV by writing about specific themes.

Our first call is for manuscripts on the theme of **interpersonal identification**. (Several articles in this issue touch on this theme; e.g., the article by Hartfiel and the reviews by Thomas, Osburn, and Dewick.) We are interested in manuscripts which use contemporary sources, especially ones accessible to the general public. Many writers familiar with SRV will reference standard SRV texts. We strongly expect that most writers will make efforts to use other texts and sources as well. Our goal is to build up a body of papers which show the relevance and utility of SRV, and to make connections between SRV and contemporary writing and research.

Suggestions for possible manuscript topics include: literature reviews; research; descriptive analyses **1)** of the theme, **2)** of a significant *aspect* of the theme of interpersonal identification (e.g., approachability, positive interpretation of people, shared positive experiences, helping others to experience the world the way another person does), **3)** of ways that interpersonal identification is facilitated or is blocked, and **4)** of similar or related ideas (e.g., empathy, compassion, role playing, peer tutoring); accounts of fostering interpersonal identification in specific settings (e.g., classrooms, doctor's visits with patients, jails, immigration); reviews of books, movies, and articles which illustrate the theme of interpersonal identification or certain aspects of it; vignettes which illustrate the theme; etc.

International SRV Conference Notice:
The 5th International SRV Conference will be held October 5-7, 2010 in Canberra, ACT, Australia, and is sponsored by the ACT Leadership Development Group of Koomarri and the Australia~New Zealand SRV Group. Details will be at socialrolevalorization.com and srvip.org.

Citizen Advocacy Conference Notice:
A national Citizen Advocacy conference will be held in Kent Town, SA, Australia on February 7-8, 2009. Pre-conference workshop on CAPE team leading on 6 February. For more information, email casa@tne.net.au.

Thanks to Our Editors:
We use many editors, from our board as well as outside, to review the submissions we receive. Without their commitment and freely-given efforts, this journal would never have gotten off the ground, let alone grown as it has. My sincere thanks to each editor for their dedication and hard work. In addition to our editors listed on the previous page, the following people have assisted us in the past year: Guy Caruso, Mike Morton, Elizabeth Neuville, Steve Wiseman, and Jack Yates.

Thanks to Our Sponsors & Underwriters:
This issue was financially underwritten by the Durham Association for Family Respite Services (DAFRS) in Ontario, Canada. We are sincerely grateful for their extremely generous contribution. DAFRS has heavily invested in SRV and related training, and has taken this additional step to support this important SRV publication. Our deep gratitude to the board and staff of DAFRS. We are of course truly grateful to all of our past and present sponsors.

Regards,
Marc Tumeinski

*The Alberta Safeguards Foundation & the Syracuse University Training Institute are pleased to announce the presentation of the **five day** workshop*

Crafting a Coherent Moral Stance on the Sanctity of All Human Life, Especially in Light of Contemporary Society's Legitimization & Practice of All Sorts of "Deathmaking" of Unwanted & Devalued People

DATES & TIMES: Monday, June 15 through Friday, June 19, 2009.
Each day begins at 8:00 a.m., & the last day ends at approx. 5:00 p.m.
There are evening sessions each day which are NOT OPTIONAL.

SITE: Providence Renewal Centre, Edmonton, Alberta, Canada (located in south Edmonton at 30th Avenue and 119 Street). All meals will be provided at the retreat centre. Directions will be sent with confirmation of registration. Phone: (780) 430-9491

TO REGISTER, OR IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:

Suzanne Frank, Alberta Safeguards Foundation
Ph. (780) 467-6515 **Fax:** (780) 417-4015 **E-mail:** slfrank@interbaun.com

WHO THE WORKSHOP IS FOR:

This event is intended for two kinds of people: (a) those who perceive that death "is in the air," so to speak, in the sense that there is a gathering momentum that works towards "deathmaking" of several classes of people, including those with impairments, the debilitated sick, and lowly people without defenders; and (b) those who are uncomfortable with a pick-and-choose approach that endorses some deathmakings and objects to others, and who would like to work toward a more coherent position on the sanctity of human life. It is especially relevant for any such persons who are on the side of societally devalued people, e.g., as family members, advocates, or service workers.

BRIEF OUTLINE OF THE GOALS OF THE WORKSHOP:

The content of this event attempts to accomplish four aims:

a. Awaken people to the fact that there is growing support in our society for various forms of "deathmaking" of people who are impaired, debilitated, handicapped, poor, elderly, unwanted, etc., and that such deathmaking has already begun on such a large scale that the term **genocide** is warranted to describe it. The term "deathmaking" refers not only to any practices which outright kill people, but also to those that greatly hasten death, or which lead other people to act so as to increase the risk of death for a person or group, or even to inflict death on a person or group.

b. Orient participants to the deceptive disguises and interpretations ("detoxifications") that are given to deathmaking so as to make it less obvious and less repugnant.

c. Spell out the societal dynamics and values which are leading to these developments.

d. Help people to see the validity of a coherent moral stance in defense of all human life, what such a stance would entail, and to work towards such a stance for themselves.

"I Choose to be a Person of Integrity:" A Model for Constructive Relationships Between Human Services & Their Bureaucracies

Lynda Shevellar

I know I could act like much more of a bureaucrat than I do now, but quite often I choose not to be that, I choose to be a person of integrity.
(Senior Policy Officer, State Government)

Background to this Paper

This paper emerges from my work in federal government departments, my subsequent role in a community-based change agency in the disability sector, and my Ph.D. study that has emerged from these experiences. My research examines how practitioners, who are located in 'top-down' bureaucracies, can create a space for 'bottom-up' developmental work and how they understand and enact their personal agency.

The context for this paper is the change to the landscape of human services in Australia. Through the New Public Management regime of the last decade, there has been a growth in the size of community organisations. As our service systems continue to expand, many people who began their careers in local community organisations find themselves being swallowed by larger structures taking advantage of opportunities for additional funding and growth. Linda Rosenman (2000) observes that human service workers initially enter the field driven by their desire to work with and help people, and find themselves unprepared for a world of competitive tendering, budgetary, financial and staff management concerns, and outcomes evaluation. For many workers located in bureaucracies this represents an ongoing tension in their work. The inherent value within their developmental approach "that people matter" stands at odds with the global neoliberal welfare regime that privileges economics over people (Shevellar, forthcoming Ph.D. thesis).

This paper therefore speaks to two agendas. It addresses the potential relationship between bureaucracy and the community sector. It also explores the relationship between an individual worker and their bureaucratic context. I draw upon examples from my area of interest: human services, and work in the disability sector in Queensland in particular. I also draw heavily upon the work of Wolf Wolfensberger, Michael Kendrick and the work of Community Resource Unit (CRU),[1] and their examination of the 'right relationship' between workers, people receiving services, bureaucracies, and communities. My aim is not to reproduce this fascinating and ever increasing body of work, but rather to develop a model that integrates key aspects of their discussions.[2] All models are inherently reductionist, and therefore limited. However, my intention is to provide an initial compass to help workers gain a degree of orientation within this complex landscape and to set a course that will hopefully stimulate deeper exploration.

The Nature of Bureaucracy

To begin this discussion it is first useful to explore the nature of bureaucracy. In defining bureaucracy, management theorists suggest that bureaucracies can be identified through a number of characteristics, including: functional specialisation; division of labour; hierarchical authority; formalisation, centralisation, standardisation; procedures defined by rules; rewards related to position; impersonal relations and continuity of employment (Mintzberg & Quinn, 1996; Scott, 1981).

A deeper understanding of bureaucracy is offered by sociologists. Their thinking holds that the most distinctive feature of the bureaucratic organisation is the way it constructs the relationship between individuals and the organisation (Maravelias, 2003; Weber, 1947, 1948). Bureaucratic organisations are not made up of people, but rather of roles. Working with roles rather than people is less complex. A role may be designed, modified, adapted, abandoned or repositioned in response to emerging technical, social and economic changes (Maravelias, 2003). Bureaucracies therefore function as normalising machines, making it 'natural' for individuals to switch between various roles, separating private and public life, and establishing professional norms (Rose, 1999). What is significant about bureaucracy is therefore not its structure or formality but the way in which it makes individuals "with a willingness and capacity to treating herself as an object of discipline and control" (Maravelias, 2003, p. 553).

Bureaucracy is far from new. Although the French term did not gain currency until the nineteenth century, the phenomenon was observed in ancient China, the Roman Empire, in the Church, in the Ottoman Empire, and in the European kingdoms following the Middle Ages. However, it is within modern industrial states that the bureaucracy has flourished, with a great deal of academic interest in the phenomena following World War II (Kaufman, 1981). One school of thought sees the spread of bureaucracy as a response to industrialisation and the personal subjugation, nepotism, cruelty, emotional vicissitudes, and capricious judgement of management practices of the industrial revolution:

> *As a protection against corruption and the wilful misuse of power, the impersonal and 'inflexible' rules and regulations of bureaucracy have been a relief and an advance. (Wriston, 1980)*

Thus the very things about bureaucracies that create frustration–their slowness, and meticulous, rule-following nature–are the very things that protect rights, ensure democracy, and guarantee equality before the law. The rule-bound character of bureaucracies ensures accountability and responsiveness. At the same time these qualities also constrain efficient operation, coordination, communication, managerial initiative, and innovation (Welch & Pandey, 2007). In fact, some scholars argue that it is the compassion, the generosity, the high idealism, and the responsiveness of bureaucracies which has led to so much red tape (Kaufman, 1977, cited in Wriston, 1980).

Critics suggest that such neutrality on the part of bureaucracy is illusionary at best and that bureaucracies are, and always have been, a means for those in power to enact their will:

> *The dragon of modern bureaucracy resembles traditional bureaucracy as a form of hierarchic organization designed to dominate and control subject populations and to do so efficiently … no bureaucracies, modern or traditional, are democratic; they are instead administrative and hierarchic. (Riggs, 1997, p. 347)*

This largely negative depiction of bureaucracy raises some points of tension for people seeking to work constructively in bureaucracies. Bureaucracies have been depicted as "inborn evil" and as diseases (Dimock, 1944, p. 198). They are unre-

sponsive, arbitrary and out of control (Kaufman, 1981). Bureaucracies are "slow, unfeeling and misguided creations" (Wriston, 1980, p. 179); and "mechanism[s] of oppression, which degrade human dignity and inhibit emancipation" (Maravelias, 2003, p. 549). In the "raging pandemic" of anti-bureaucratic sentiment, bureaucrats have been depicted as "drab, faceless, timid and obscure," "incompetent, bungling, lazy and stupid," and somewhat contradictorily, "dominant, sinister, diabolically clever self-seeking conspirators" (Kaufman, 1981, p. 7). Little wonder that workers actively seek to distance and identify themselves as 'other' than a bureaucrat!

Often the denigration of government and bureaucracy sits alongside a haloing of community[3] with bureaucracy, government and large organisations all seen as inherently evil, and community and community organisations seen as a fundamental 'good.' Neither description is accurate or helpful. What is more useful is understanding the complexity of the landscape we are practising within.

It is not, as the worker in the opening quote suggests, a distinction between being a bureaucrat and having integrity: the question is how to be a bureaucrat with integrity. I also contend that anyone connected to a human service engages in, with, and **as** bureaucracy at varying times. We comply with relevant legislation, policies and procedures, fill in forms, complete time sheets, and pay our taxes. We shape particular models of bureaucracy through our acts of resistance and reform as well as our acts of acceptance and compliance. What is required is not denigration or denial of this activity, with the simplistic idea that there are bureaucrats and non-bureaucrats, but increased consciousness of the bureaucracy that we co-create in our daily interactions, to ensure such activity is kept in 'right' relationship to the work we are actually seeking to do.

What this paper is therefore also raising is the concept of personal agency. Agency refers to the capacity of individuals to plan and initiate action (Leonard, 1997). How do workers respond to bureaucracy and how do they understand their capacity to act within this context?

Programmatic & Non-Programmatic Elements of Service Delivery

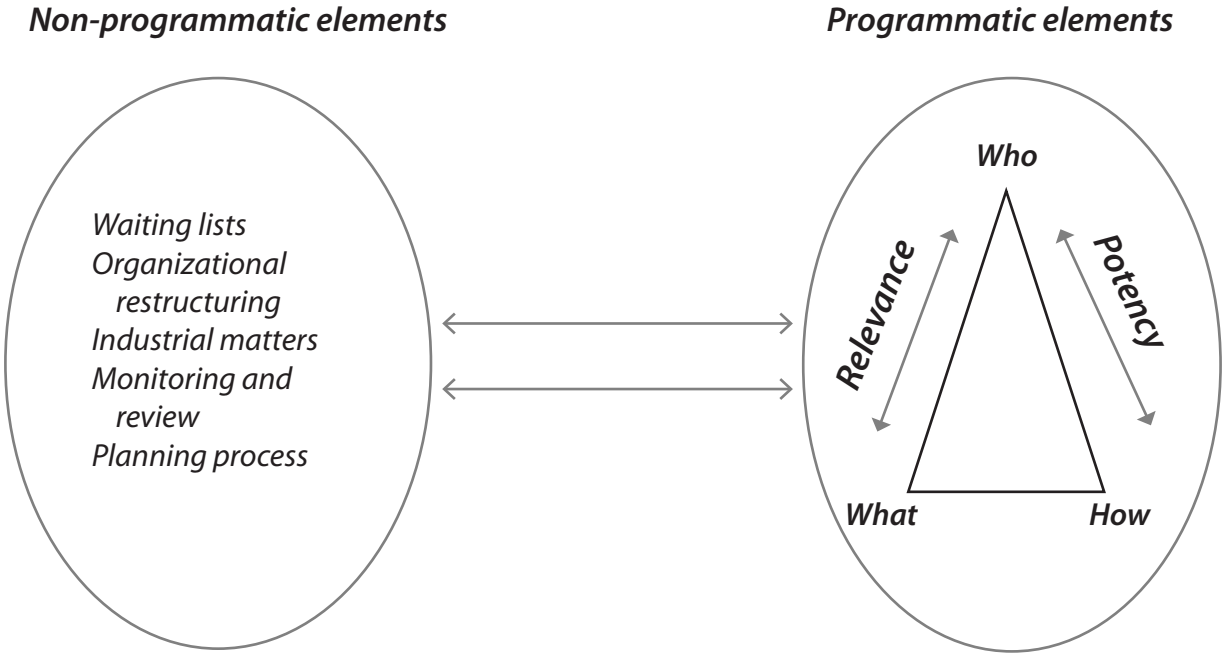
Wolf Wolfensberger provides a helpful classification for beginning this exploration (Wolfensberger, 1992; Wolfensberger & Glenn, 1975; Wolfensberger & Thomas, 1996, 2007). In his consideration of model coherency and program elements, he makes the distinction between the programmatic and the non-programmatic elements of service delivery. Programmatic considerations are directly linked with addressing the needs of service recipients. This is based on a deep understanding of the people being served and their fundamental needs. Such considerations include physical characteristics of a service, how a service groups the people it serves, and the processes and treatments of a service (Cocks, n.d.). Errol Cocks points out that the programmatic elements of a service should have a high degree of relevance to the person receiving a service.

By contrast, the non-programmatic elements pertain to the interests of people other than the service recipient. Such elements would include the needs of staff such as pay rates, rosters, career needs, the needs of funders such as accountability and record-keeping requirements, the needs of organisations such as historical commitment to a particular model of service, and the needs of regulatory bodies such as compliance mechanisms and quality system implementation (Cocks, n.d.).

It is important to note that the programmatic and non-programmatic are both crucial elements of service delivery; neither is intrinsically good nor bad. These terms simply describe the different elements of human services. A second point is that all human services, no matter how idealistic, have a non-programmatic element. How much this work supports or interferes with the 'real' work of a group is the issue at hand.

When people refer to 'bureaucracy' in negative terms, they are usually referring to bureaucratism in non-programmatic elements of service delivery: 'red tape,' rules, rigid guidelines, and so forth. However, for a worker located in bureaucracy to actually do their work well, they need to be across both programmatic and non-programmatic elements to understand the impact of decisions. Bureaucracy is the means by which many non-programmatic elements are delivered–but its impact upon the programmatic is too easily underestimated.

Figure 1: Non-programmatic & programmatic elements of a service



The non-programmatic and programmatic elements of a service are depicted in the above diagram[4] (see Figure 1). These will be explored in greater detail in the following discussion.

Programmatic Elements of Service Delivery

In the disability sector, one of the most thorough means of evaluating the programmatic content of a service is provided by PASSING (Wolfensberger & Thomas, 2007). It utilises 42 ratings to evaluate a service based on SRV criteria from the perspective of the person receiving the service. More significantly, it asks not 'why' a service does what it does, but examines simply 'what' the service does, and what the impact upon the person receiving that service is likely to be. For example, programs may seek more individualised means of serving people, but will argue that funding limitations, staff structure, duty of care, risk management practices, and so forth all inhibit their ability to meet this stated aim. Both the power and the frustration of the PASSING tool is that it does not speak to this tension. PASSING observes that no matter what the intention of the service may be, or the reasons behind particular choices–the relevance and potency of what is offered, and hence the *impact* upon the person, will be the same. This is the programmatic element.

In Queensland, Australia, despite the current spate of enthusiasm about practices that purport to assist a personalised approach, including independent program plans and person-centred plan-

ning, traditional forms of service still abound. The present policy environment encourages a return to traditional institutionalised practices with large scale residential institutions, day centres, sheltered workshops, day-activity centres, the building of cluster housing, group homes (up to 20 beds) and the new euphemistic "villages," which are modelled on–or even an extension of–retirement villages and aged care models. As Cocks observes, despite the rhetoric of person-centred planning, human services are generally planned primarily from the standpoint of non-programmatic concerns (Cocks, n.d.).

However, at the other end of the spectrum, a number of service models have emerged that consciously work to ensure that people have a rich and meaningful life. According to SRV theory, assisting people to have valued roles in society is the primary service activity which will make the good things of life more likely to be accessible to the person. Wolfensberger says that "a service is likely to be more socially role-valorising if it: precisely addresses the needs of the people it serves, and does so in ways which are individualized and highly challenging to them" (Wolfensberger, 1992, p. 48).

Examples of these models might include host agencies, individual companies, host family models, and individual- or family-governed services. Of course, simply naming something as family-governed does not ensure its greater quality. However, what these newer service models indicate is whose needs are primarily being met. By comparing the range of human services available in the disability sector, it is possible to imagine a continuum from the very traditional, and usually passive, modes of service delivery to those which provide greater program relevancy and potency. The continuum is depicted in Figure 2 (adapted from Dunst, Boyd, Trivette, & Hamby, 2002).

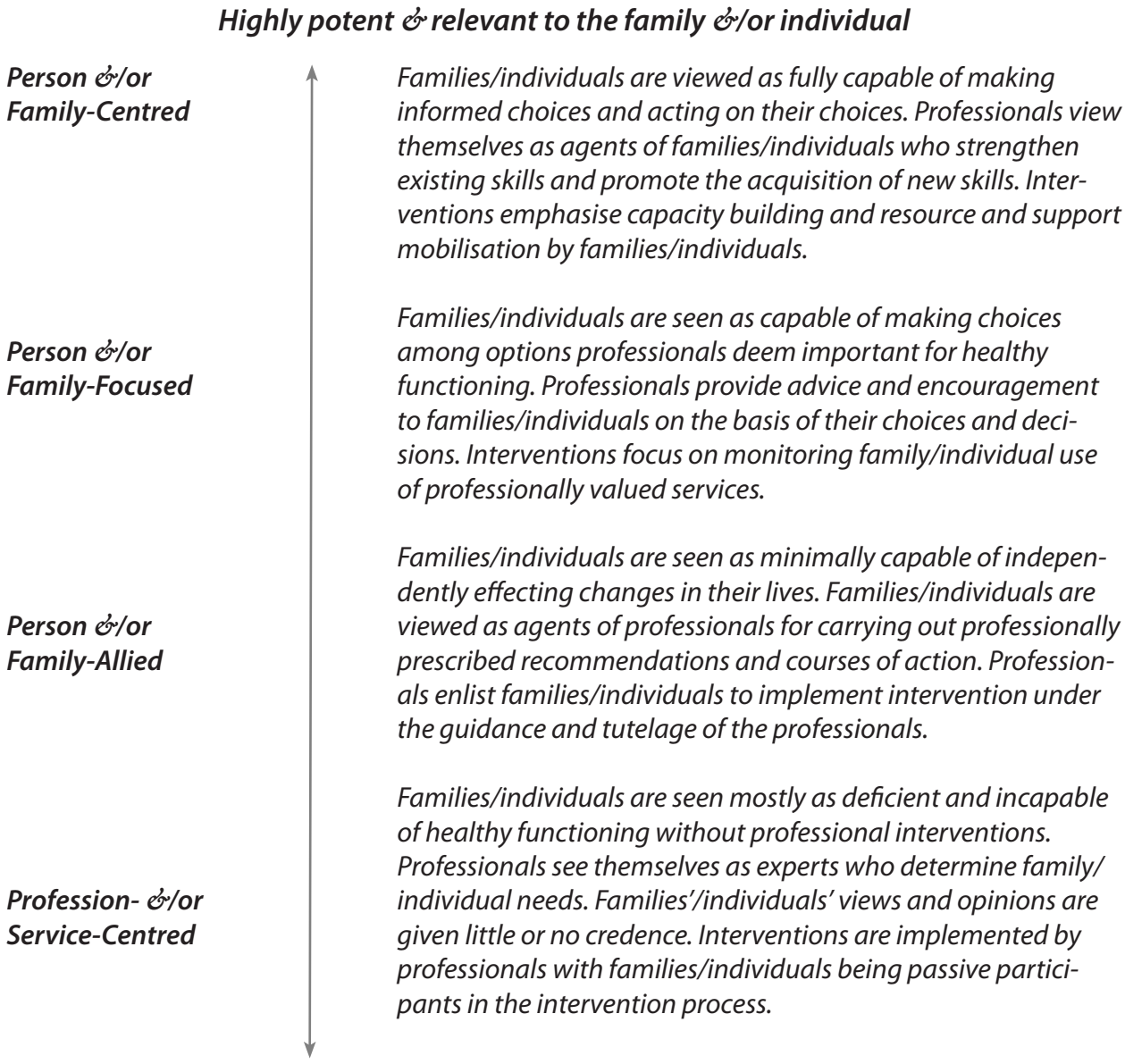
Obviously this continuum is highly idealised, representative of services in a pure form and no guarantee of their true nature. For example, it is possible to imagine a family-focused service that vests authority in the family. In turn, family members may actively support traditional congregated and segregated activities for their family members. It is also necessary to observe that services are not static and that a highly personalised service without strong safeguards may deteriorate quickly. To remain personalised, a high degree of consciousness must pervade not only the governing structure but all programmatic aspects (Kendrick, 2000a; Schultz, 2003).

Non-Programmatic Elements of Service Delivery

Where bureaucracy does not work well, it serves to limit the programmatic elements of the service it is intended to support. There are numerous management tools for evaluating the non-programmatic aspects of a service. There are financial records to track financial accountability. There are quality systems to track record-keeping. Time and motion studies evaluate role efficiencies. To my knowledge none of these tools evalu-

If you know someone who would be interested in reading *The SRV Journal*, send us their name & address & we'll mail them a complimentary issue.

Figure 2: Programmatic elements



ate the flexibility of the bureaucratic process and how well it supports an organisation to meet its stated aims.

Non-programmatic elements such as duty of care, risk management policies, or an insistence on criminal history checks for visitors are enacted in ways that interrupt the natural dynamics of human interaction and bluntly cut across the fragile threads of new relationships. In this way they can serve to reduce access to the good things in life by limiting the roles available to a person. For example, the non-programmatic can support or negate a person's movement into the role of home-owner, neighbour, friend, community member, participant, and so forth (Wolfensberger, Thomas, & Caruso, 1996). As Wolfensberger (1992) demon-

strates, very simple things like who has the keys to the front door, or the display of badges, uniforms or signage, all provide community members with clues about the real role the person is in, and can quickly move someone from 'resident' to 'client.' Similarly, the adherence to occupation, health and safety legislation through an abundance of fire extinguishers can quickly communicate the role of 'menace' and 'threat' rather than 'neighbour.'

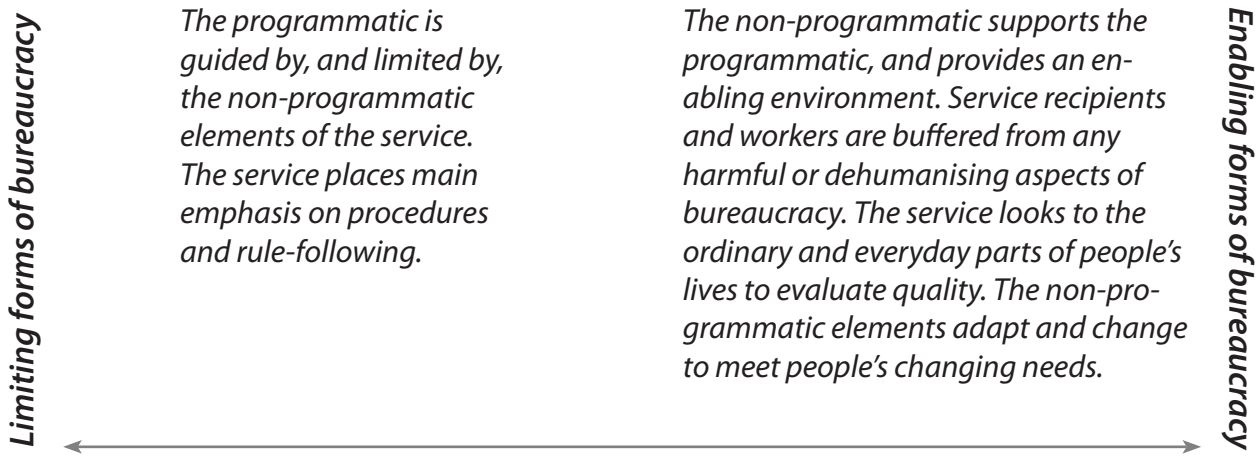
Where bureaucracy works well, the non-programmatic elements of a service support the programmatic elements. It ensures bureaucracy does not cut across people's lives or limit their potential. Services will look for ways that measure, record and administer any necessary information in ways that are more naturalistic and non-intrusive.

For example, host agency models seek to shield the individual from the non-programmatic elements of service delivery by locating these elements in an external 'host' organisation, well away from the programmatic arm of the service. Services may vigorously adopt conditional delegated authority, so that as much authority rests with the person and the family as is possible–providing certain conditions are met. In this way decisions are made by those closest to the person.

It is possible to again imagine a continuum of practices from those non-programmatic elements which are very limiting to those that are highly enabling (see Figure 3).

By plotting these two continuums together, as shown in Figure 4 (next page), a matrix emerges upon which the relationship between the programmatic and non-programmatic elements can be envisioned and the outcomes for people imagined. It demonstrates that, whilst a service can be person-centred and have potential to assist access to the good things of life, this potential can be frustrated if the non-programmatic elements are not enabling.

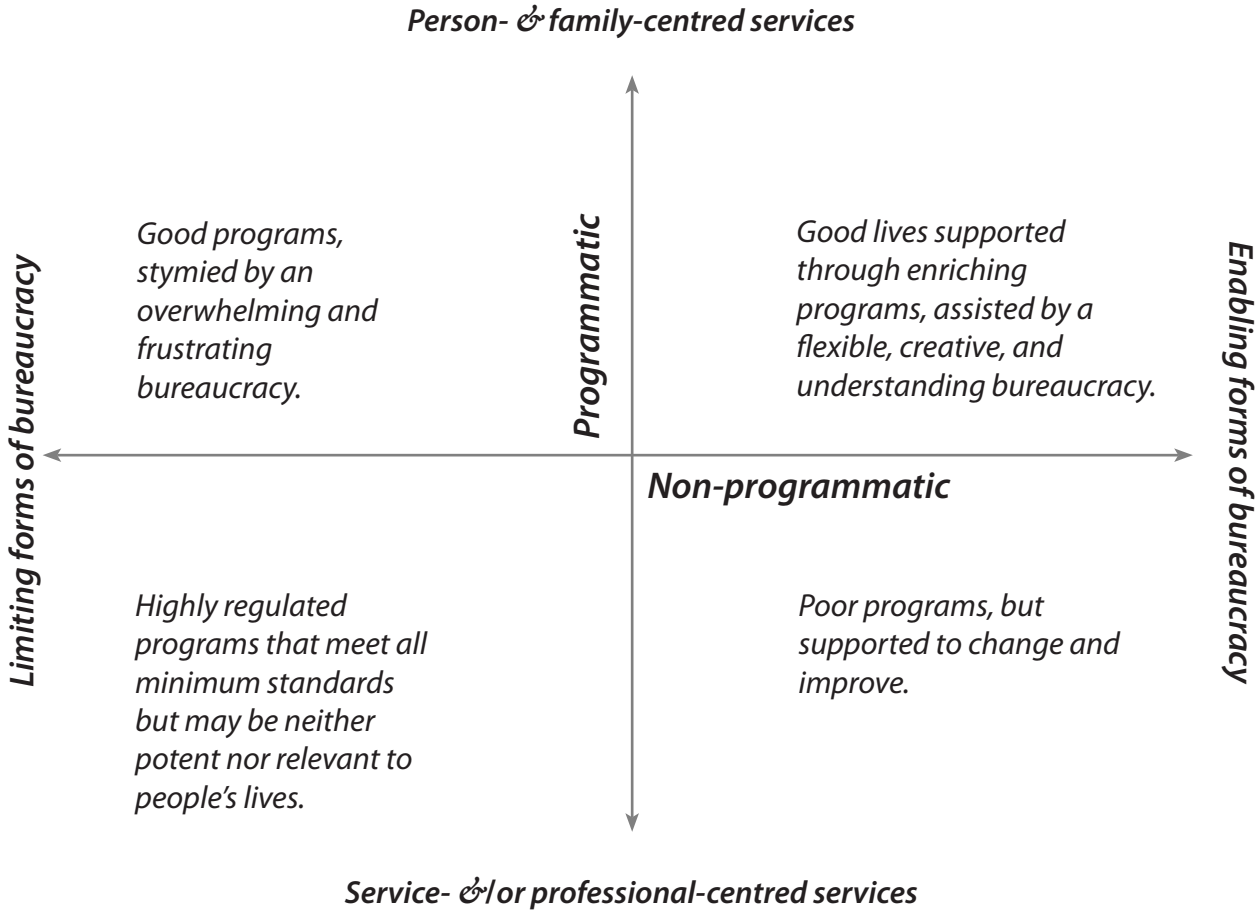
Figure 3: Non-programmatic elements of a service



The Role of the Bureaucrat: Some Compass Points & Possible Directions

What this matrix demonstrates is the importance of having people in bureaucracy that understand the impact of the non-programmatic elements upon a person's life, and who can work in ways that negate more harmful effects. In other words, what is needed are workers with a strong sense of personal agency: a sense that their actions matter. This matrix provides clues about the likely role of the bureaucrat, and consequently their likely behaviours.

Figure 4: Plotting the programmatic & non-programmatic elements of a service



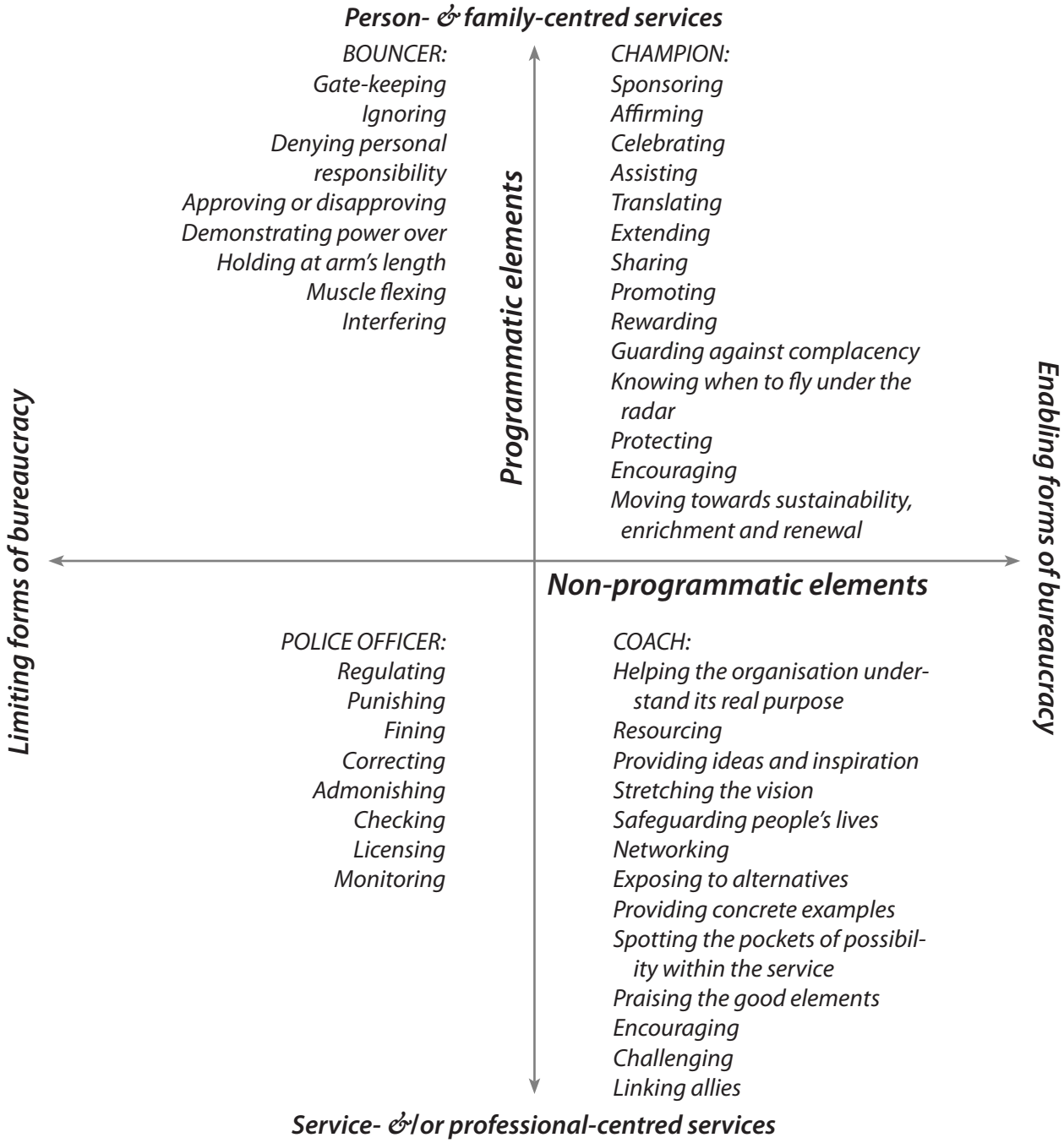
As Figure 5 illustrates (next page), on the left-hand side of the matrix, the more limiting models of bureaucracy see two possible roles for the bureaucrat. Firstly, for those services which I have labelled "service &/or professional-centred," the bureaucrat is likely to emerge in a **police officer** role. There are agreed rules within society, and the police officer's job is to enforce those rules. The consequence of rule breaking might include fines, loss of license, or even imprisonment. It creates compliant workers and clients. For people within service or professional-centred services, being 'policed' ensures that although minimum standards may be met; there is little to assist people to grow rich lives, to imagine better or to stretch the vision of what might be possible. The main aim is to simply produce conformity. For example, we have witnessed services where people have their own 'person-centred' plan–despite each plan being largely identical to that of other residents in both format and outcome. For the purpose of accreditation, meeting 'individual needs' is seen to be observed; however, little is done to expand the menu of choices available in a person's life.

The second potential role within a 'limiting' bureaucracy I have named as **bouncer**. Such a role is likely to emerge when a limiting bureaucracy is working with a more progressive service. In other words, good work is stymied by a frustrating process and an overwhelming bureaucracy. The asso-

ciated behaviour of the role of bouncer would be a great deal of muscle flexing, to demonstrate who has the "power over" whom (Macy, 1983). There may also be denial of personal responsibility.

A simple example illustrates the gate-keeping role of the bouncer bureaucrat. Under recently introduced legislation in Queensland, any organisational staff–including volunteers–require criminal history checks to work with people with disabilities. On more than one occasion we have witnessed potential friends being re-classified by the organisation as a 'volunteer' and being therefore subject to such background checks before a relationship can be 'allowed' to proceed. As can be

Figure 5: The programmatic & non-programmatic matrix: Roles & behaviours



imagined, such behaviour does little to encourage members of the community to offer friendship. Within the organisation, there is a denial of responsibility as it fails to realise its own agency, to challenge its interpretations of government policy, or to creatively work through alternatives.

Moving to the right-hand side of the matrix, for the bureaucrat seeking a more enabling means of working, two additional roles emerge. For the enabling bureaucrat working with a service or professional-centred service, the role required of the bureaucrat is that of **coach**, to assist the service to imagine better and to resource the organisation to do so. Poor programs may be evident; however, the role of the bureaucrat is to encourage improvement. Such behaviours would include: providing ideas, assisting, helping to build networks, stretching the vision of what might be possible, deliberately exposing leaders to alternatives, supporting leaders in their own growth and development.

The coach role is not necessarily a purely supportive role, as good coaches must seek balance between challenge and nurture. And should the service fail, then there is always the threat of being cut from the team! Less flippantly, a key role of the coach is to safeguard the people's lives, to understand the greater goal and to realise what is at stake. This is not simply change for change's sake, but requires a great deal of vision and belief regarding what is possible. Such a role is long-term and not for the faint-hearted. An example here is a local organisation CRU has worked with, whose origins lays in a large residential institution for people with intellectual disabilities. Over the last decade it has worked to assist people to move out of the institution and into their own homes. This work has required great levels of vision from the leadership team as well as flexibility from both internal and external bureaucracies. It has required trial and error and the development of a learning culture within the organisation as they re-evaluate the purpose of the service and reconsider what people are capable of.

Perhaps the most subtle and sophisticated work of all is that required by the fourth role, that of **champion**–which emerges when an enabling bureaucracy is teamed with a person-centred model of service. Here it is possible to imagine good lives, supported through enriching programs, assisted by a creative and understanding bureaucracy. The role of the bureaucracy here is to assist, to affirm, to reward, to celebrate and to share. In less positive policy environments, the role of the bureaucracy may be to shield, protect and buffer the organisation from external threats, and to assist the work of the organisation by translating back and forth between the community and the bureaucracy.

A number of examples serve to illustrate this point. In one example, a government department has established a website where it promotes the success stories of the projects it has funded. Whilst obviously assisting the public reputation of the department, it also serves the purpose of further strengthening the work of the local project, aiding their sustainability. In doing so, it also assists the department's work with less progressive services as it enables a vision of what is possible. In another example, a local housing organisation provides annual awards to members of local councils, government departments and private enterprise who have enabled them to take their work further. The awards night is one of the highlights of the local community and celebrates the partnerships that are possible.

In a very different example, a worker within a very large community organisation has recognised the less visionary climate in which he is working. He sees his role as shielding the work of a more entrepreneurial service within the organisation by what he refers to as 'flying under the radar,' ensuring that all the paperwork is complete so that no attention is drawn to their efforts, and buffering the organisation by absorbing conflict he feels from his organisation. Some critics have argued this is a highly paternalistic way of working. However, the worker is clear that the role of the service is to assist people to get good ordinary lives. His role is therefore to do whatever it takes to enable them to get on with their real job and to shield them from other distractions.

Conclusion

At the heart of this discussion is the issue of 'agency:' the relationship between individuals and social structures. For those of us located within bureaucracies it is often tempting to indulge an all-control stance that locates all agency within the social structures: we are left to indulge a victim mentality or to lament our impotency within the system. Yet "the battle is lost when we let ourselves become convinced that our efforts and vision do not matter" (Kendrick, 2002, p. 2). However, the notion of the great battle is problematic too. It is equally tempting to adopt a moral high ground "*as a person of integrity*" on a moral crusade against the evil empire. Such crusading, however, is both naïve and unhelpful. It lowers our consciousness and blinds us to the role we play in the creation of the social structures around us. It also sets us up for martyrdom and an eventual fall (Smith, 2007).

Transcending the binaries of all freedom or all control is the idea of an interactive agency: while individual action is purposeful, reflexive and intentional, structures shape the context, orientations and choices available to actors (Bone, 2005). At the same time, there are no 'given' aspects of social reality–they are all subject to change through human intervention (Giddens, 1976). This view is both more sobering and more hopeful. It suggests that whilst complete freedom may be a myth, we always have some capacity to act: to resist, to protest, to challenge, to shield, to buffer, to encourage, to connect, to protect, to collude, to include, to inform, to resource, to safeguard, to imagine and to hope. Our greatest action yet may simply be the raising of our own consciousness regarding the role we play. As Kendrick (2003) observes:

> *We are all the beneficiaries of the countless decisions of many anonymous people who have simply decided that ethical principles matter to them, and that they will try to uphold them. (p. 5)*

Endnotes

1. I am particularly indebted to Jane Sherwin for her assistance with earlier drafts of this paper, and to officers within Disability Services Queensland who provided me with initial feedback on the models presented here.

2. E.g., see Kendrick, 2000b, 2000c, 2002, 2003, 2005.

3. There is an enormous body of literature speaking to the co-option of community. References are available upon request.

4. Thanks to Jane Sherwin for her permission to adapt her original diagrams representing the work of Wolfensberger and Cocks.

References

Bone, J.D. (2005). The social map and the problem of order: A re-evaluation of 'Homo Sociologicus.' *Theory and Science, 16*(1), 1-21.

Cocks, E. (n.d.). Model coherency analysis and the evaluation of human service quality.

Dimock, M.E. (1944). Bureaucracy self-examined. *Public Administration Review, 4*(3), 197-207.

Dunst, C.J., Boyd, K., Trivette, C.M., *&* Hamby, D.W. (2002). Family-oriented program models and professional helpgiving practices. *Family Relations, 51*(3), 221-229.

Giddens, A. (1976). *New rules of sociological method*. London: Hutchinson.

Kaufman, H. (1981). Fear of bureaucracy: A raging pandemic. *Public Administrative Review, 41*(1), 1-9.

Kendrick, M. (2000a). Person-centredness: A characteristic of people, not systems. *CRUcial Times, 18*, 9-11.

Kendrick, M. (2000b). Some initial thoughts on establishing 'right relationship' between staff, professionals, service organisations and the people they assist. *Queensland Advocacy Incorporated Newsletter* (April), 1-9.

Kendrick, M. (2000c). When people matter more than systems. Paper presented at *The Promise of Opportunity* conference, March 27-28, in Albany, New York, US.

Kendrick, M. (2002). The ways in which people can make a difference. Paper presented at the *Partners in Change* workshop, September, in North Queensbury, Fife, Scotland.

Kendrick, M. (2003). The role of personal integrity in upholding 'right relationship' in organisations. *CRUcial Times, 28*, 4-5.

Kendrick, M. (2005). Exploring whether there is an optimal relationship between public bureaucracies and communities. Holyoke, MA: Kendrick Consulting Intl.

Leonard, R. (1997). Theorizing the relationship between agency and communion. *Theory and Psychology, 7*(6), 823-835.

Macy, J. (1983). *Despair and personal power in the nuclear age*. Philadelphia: New Society Publishers.

Maravelias, C. (2003). Post-bureaucracy–control through professional freedom. *Journal of Organizational Change Management, 16*(5), 547-566.

Mintzberg, H. *&* Quinn, J.B. (1996). *The strategy process: Concepts, contexts, cases*. Upper Saddle River, New Jersey: Prentice Hall.

Riggs, F. W. (1997). Modernity and bureaucracy. *Public Administration Review, 57*(4), 347-353.

Rose, N. (1999). *Powers of freedom: Reframing political thought*. Cambridge: Cambridge University Press.

Rosenman, L. (2000). Turning threats into challenges: A positive perspective on the future. In I. O'Connor, P. Smyth, *&* J. Warburton (Eds.), *Contemporary perspectives on social work and the human services: Challenges and change*. Melbourne: Longman, 190-197.

Schultz, R. (2003). Safeguards that keep programs consumer-centred. Unpublished manuscript.

Scott, R. (1981). *Organizations: Rational, natural and open systems*. Englewood Cliffs, NJ: Prentice-Hall.

Shevellar, L. (Forthcoming Ph.D. Thesis). *"With the voice of this calling:" The experience of community development practitioners in the organisational context of bureaucracy.* University of Queensland, Brisbane.

Smith, J. (2007). Martyr syndrome: Its impact on SRV practice. Paper presented at the *4th International Social Role Valorization* conference, May, in Ottawa, Ontario, Canada.

Weber, M. (1947). *The theory of social and economic organization* (T. Parsons, Trans.). New York: Free Press.

Weber, M. (1948). *From Max Weber: Essays in sociology* (H.H. Gerth *&* C.W. Mills, Trans.). London: Routledge *&* Kegan Paul.

Welch, E.W. *&* Pandey, S.K. (2007). E-government and bureaucracy: Toward a better understanding of intranet implementation and its effect on red tape. *Journal of Public Administration Research and Theory, 17*(3), 379-404.

Wolfensberger, W. (1992). *A brief introduction to Social Role Valorization as a high-order concept for structuring human services* (2nd (rev.) ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership *&* Change Agentry.

Wolfensberger, W. *&* Glenn, L. (1975, reprinted 1978). *PASS (Program Analysis of Service Systems): A method for the quantitative evaluation of human services: Vol. 1. Handbook: Vol. 2. Field Manual* (3rd ed.). Toronto, Ontario, Canada: National Institute on Mental Retardation.

Wolfensberger, W. *&* Thomas, S. (1996). The problem of trying to incorporate a model coherency analysis into a PASSING assessment. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux, 2*(1), 12-15.

Wolfensberger, W. *&* Thomas, S. (2007). *PASSING: A tool for analyzing service quality according to Social Role Valorization criteria. Ratings manual* (3rd rev. ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership *&* Change Agentry.

Wolfensberger, W., Thomas, S., *&* Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux*, *2(2),* 12–14.

Wriston, M.J. (1980). In defense of bureaucracy. *Public Administration Review, 40*(2), 179-183.

Lynda Shevellar currently works as a social & organisational consultant in the areas of disability, mental health & community economic development. This research was completed as a doctoral candidate in the School of Social Work & Human Services, The University of Queensland, Australia.

The citation for this article is
Shevellar, L. (2008). "I choose to be a person of integrity:" A model for constructive relationships between human services *&* their bureaucracies. *The SRV Journal, 3(2),* 6-17.

SRV & Teacher Prep: Not Just a Course, but a Course of Action

Thomas J. Neuville *with* C. Hannah Smith

Editor's Note: *This article describes the incorporation of the theory of SRV into a context perhaps unfamiliar to many of our readers; in this case, a university class for student teachers. This article and the practice of incorporating SRV with various human service approaches raise a number of questions which we hope to explore in future pages of this* Journal. *How does one balance SRV with other theories, approaches or practices? How well can SRV theory be used with other theories or practices? Does such incorporation create any tension(s)? How can these tensions be addressed constructively? What happens when SRV conflicts with another theory or common service practice? And so on.*

I encourage *university and college professors who incorporate aspects of SRV into their teaching to submit manuscripts to this journal describing these courses and their experiences teaching them. What successes and struggles have you and your students faced with the material? How well can students relate to Social Role Valorization if they have little or no prior experience with devaluation or devalued people? What have you and your students learned? What questions have been raised? Are there aspects of SRV which students seem to have a harder time understanding? If so, which ones, and what is the misunderstanding? Have you as a teacher had to pick and choose different aspects of SRV to focus on? What have you left out? And so on.*

Introduction

One cannot underestimate the importance of having student teachers come to be motivated to understand and be inspired by the theory and themes of Social Role Valorization (SRV). SRV, when used as a tool for bringing in particular heightened consciousness to the student teacher, has the potential to benefit that student, that student's own future students, and countless others with whom each of these persons comes in contact. Perhaps no other student teachers benefit more from studying SRV than those pursuing coursework in special education. The potential benefits for the most vulnerable students, with whom the student teacher someday will surely have influence and impact, are untold.

I am fortunate to have the opportunity to teach a sophomore-level required course in my University's teacher preparation program titled "Psychological Aspects of Individuals with Disabilities." I say fortunate because I clearly benefit as much as, if not more than, my students as my instruction and the students' engagement with the material allows for continual exploration and application. Pedagogically, the course offers significant opportunity for lecture and participatory processing. Through this course, it is my intention to provide the student teachers with concrete tools and refined theoretical concepts unavailable elsewhere in their teacher preparation coursework and practicum.

As evidenced both by the anguish I hear expressed by colleagues who would prefer students not "bring that SRV stuff into my classroom" (after all, it complicates things), and by students, years past their graduation, reporting the importance of the course to their current teaching, the course clearly has both instigatory and impactful consequences. While the course's future is always uncertain (perhaps due, in part, to its powerful nature), for now it continues to be made available to students.

The nature of the course, as with SRV itself, often engages the student to journey from anger to embrace, from surface understanding to a deepening, and from viewing the material as a belief system to evidence-based applicable theory. Some, many, do not make these connections and are typically blocked by immature value systems. Those who do, however, engage in a profound journey that leads them, at the conclusion of the course, to be able to answer questions such as "How, specifically, does your ability to identify the socially constructed experiences of individuals with disabilities prepare you as an educator to facilitate an empowered and unified P-12 (prekindergarten through 12th grade) learning community?", to which students reply "It is important to have knowledge of the person with the disability first before learning about their disability. It is important to know about their life, study habits, and interests when creating a unified learning environment," and "These concepts are key when facilitating an empowered and unified learning community; I am helping students build the basic skills critical for academic success, to help them take charge of their own learning."

Course Background

The teacher candidate, according to the National Council for Accreditation of Teacher Education (NCATE) standards, must graduate with the ability to teach *all* students. "The methods of building capacity within individual students, parents and communities are critical to education reform and the serving of diverse students" (Vos, 2002). When I first was introduced to the course I now teach, several problematic issues exposed themselves. The course, originally written by a faculty group trained at a state institution, focused on terminologies, diagnostic characteristics, and behavioral screening tools. One might have expected this focus were it the 1960s or 70s. However, given the comprehensive and depthful information offered by Dr. Wolf Wolfensberger since that time, and to which I had been exposed, it would have been inexcusable for me not to subject the course to a comprehensive review process. After extensive revision to the course content, the course maintains a focus on psychological aspects while benefiting from current researched perspectives on the importance of social roles (Wolfensberger, 1998; Gottheil & Dubow, 2000; Hartung, 2002), disability as a social construct (Hartung, 2002; Goodley, 2001), and the need for acculturation and social integration as it applies to education (Minnes et al., 2002).

Course Description

Psychological and sociological aspects of individuals with disabilities are surveyed. Environmental and socio-cultural factors are emphasized and analyzed in relation to human adjustment and social roles. Coherent educational service recommendations and whole person assessment concepts are explored. The history of services, socially constructed definitions, and characteristics of the disability movement form a basis for understanding.

Course Objectives

- Identify the socially constructed experiences of individuals with disabilities and the resulting power structures.
- Identify the characteristics of individuals with disabilities resulting from sociological and cultural variables.
- Identify behavioral characteristics and causes brought on by the psychological and

sociological assumptions about the roles of individuals with disabilities.
- Develop capacity to use personal awareness effectively as it applies to diversity, multicultural collaboration, and ethics.
- Analyze, evaluate and think critically regarding the socio-political impacts on support services and individuals with disabilities.
- Prepare the student for his or her life's work.

The course objectives and assignments are based on Bloom's taxonomy and as such use two of the critical areas: (1) Cognitive (Bloom, 1956): mental skills (Knowledge); and (2) Affective (Krathwohl, Bloom & Masia, 1973): growth in feelings or emotional areas (Attitude).

The course links experience (ten hours of community service) with analysis of socio-cultural realities (use of SRV and Social Devaluation exercises).

The course discussions, readings, experiences and products call each student to engage in critical thinking by applying the themes of SRV, which have been internalized by experience, to scenarios of educational settings.

Students demonstrate, in future courses and teaching environments, a carryover of the applicability of the themes of SRV as they engage methods and implement lesson design.

Course Assignments

The course assignments emphasize the incorporation and understanding of devaluation and wounding, as well as the themes of SRV. These assignments have evolved over time and are part of a comprehensive 30 page syllabus (a copy may be acquired by contacting the author). The assignments are founded on student analysis (see Sample Exercise 1), research regarding associated laws (see Sample Exercise 2), and teaching the material as it pertains to a specific given subject (see Sample Exercise 3). During the past two semesters, a requirement to analyze a human service environment (see Sample Exercise 1) was enhanced by adding an expectation of including the 10 Themes of SRV[1] (Wolfensberger, 1998), including unconsciousness; the conservatism corollary; the dynamics of interpersonal identification; the power of mindsets and expectancies; the dynamics of role circularity; symbolism and imagery use; model coherency, and relevance and potency; personal competency enhancement and the developmental model; the power of imitation; and personal social integration and valued societal participation. The addition of the integration of the 10 themes of SRV has given clarity to the project and enhanced classroom discussions. Additionally, the themes continue to play a prevalent and relevant role in subsequent courses.

The most potent coursework includes exploration of the following exercises:

Sample Exercise 1–Social Devaluation Discovery Project (35% of total grade)**.** This assignment is designed to assess the impact of social devaluation on an individual, understand human needs, and create ideal environments of support that positively

Since you are reading this journal,
why not tell someone else about it? We believe Social Role Valorization is an important tool that concerned individuals can use to address social devaluation in people's lives. As someone who shares that belief, encourage others to read and subscribe to the only journal dedicated to SRV. Information available at http://www.srvip.org/journal_general.php.

cause a more desirable future. The student volunteers a minimum of 10 hours over a minimum of 3 visits at a human service provider of the student's choice. The student assesses the environment and its impacts on the psychological and sociological experience of a person served by that provider. The student (1) demonstrates a comprehensive understanding of wounds, (2) has clearly considered the realities of a person's life experiences, and has evaluated the degree and presence of wounding experiences (according to the framework of the 18 wounding experiences of vulnerable people,[2] as proposed by Dr. Wolf Wolfensberger), (3) demonstrates a personal internalized comprehension, (4) demonstrates understanding of the responsibility of the service provider to respond to the individual's wounding experiences past and present, and (5) has competently and comprehensively considered, explored, and portrayed the importance of relevance, potency and model coherency, clearly combining these components for an overall assessment. The analysis of an ideal human response must make practical use of a minimum of six of the ten major recurring themes from SRV. Of these six themes, these three must be included: interpersonal identification; the power of mindsets and expectancies; and personal social integration and valued social and societal participation.

Sample Exercise 2–Special Education Law Project (20% of total grade)**.** This assignment may be completed individually or in groups. The student researches the history of Special Education Law. The student produces a paper that details the history of various educational and civil rights laws[3] (including the ADA - Americans with Disabilities Act, NCLB - No Child Left Behind, Oberti and Gaskin cases, and IDEA - The Individuals with Disabilities Education Act), assessing the impact the laws have had on options for creating valued social roles for marginalized people. The student (1) makes a clear link between social devaluation as detailed by Wolfensberger and other texts, (2) lists the actual impact of the specific law on people with disabilities, and (3) uses sections of the law and its intent to demonstrate an understanding of the potential positive impacts. *Initially, the law project tended to result in retellings of the laws and histories as one might easily construct after completing an internet search. After the expectation of linking the information to social devaluation was added, as well as a requirement to provide evidence of the positive impact on people with disabilities, students began to use the method of application of the themes not only in this assignment, but in subsequent assignments and their own classroom content design work as well.*

Sample Exercise 3–Group Student Teaching Project (30% of total grade: 15% oral; 15% written)**.** Student teams (three to four students) prepare an oral and written presentation related to a subject provided by the instructor. These subjects are related to current topics in the education of students with disabilities (i.e., self-advocacy and self-determination, full inclusion as social justice ideology, historical perspectives on charity-pity relationships, impacts of standardized testing, belonging and valued social roles, inner work, disability culture, voices of the marginalized, right to die and death-making, issues with the concept of 'tolerance,' and uses and abuses of person-centered approaches). Each team designs a 30-minute comprehensive in-class learning experience and provides supporting evidence for their findings.

Course Materials

The required texts are a mix of evidenced-based theory (Wolfensberger, 1998), practice (May *&* Raske, 2005), *SRV Journal* materials, and historic cultural trends (Schwartz, 1997). The texts all build on one another, allowing the student to coherently draw upon the resources available therein.

- May, G. *&* Raske, M., eds. (2005). *Ending disability discrimination: Strategies for social workers.* Boston, MA: Pearson, Allyn, *&* Bacon.

- Schwartz, D. (1997). *Who cares? Rediscovering community*. Boulder, CO: Westview Press.
- Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.
- Various. *The SRV Journal* (current year's subscription).

Many students, during the serious moments of considering the wounds, have requested that I give them the positive alternatives as well. Because of this, I considered the wounds and simply present the extreme opposite view through something I have titled "Robustness as the Most Common Variable Toward a Contributing Person" (see Figure 1). I do not include this as a new theory or even valuable alternate theme set. Rather, I use the robustness tool to bring the students to an understanding of the power of the material by presenting a framework for contemplation through an opposing entryway. I rely on it only as supplementary material when holding a brief lecture of how one may make use of the SRV material and the 10 themes of SRV. *I apologize to my friend, Dr. Wolfensberger, for taking such joyful liberties with his material.*

Figure 1: Robustness as the most common variable toward a contributing person

Wounds	**Robust Alternative**
Relegation to low ("deviant") status	Assignment by external forces to a high social status
Rejection, perhaps by family, neighbors, community, society, service workers	Acceptance and recognition by family, neighbors, community, and society
Cast into multiple historic deviancy roles	Launched into multiple and even historic roles of distinction
Living in a state of multiple jeopardy	
Symbolic stigmatizing, "marking," "deviancy-imaging," "branding"	Warmth as a central feeling: usually by integration, belonging, and identification with a wide variety of diverse groups
Distantiation: usually via segregation and also congregation	Continual and growing desire by social groups and individuals to unite with one
Loss of control, perhaps even autonomy and freedom	Governance of one's own life: especially when a method or system of support is in place that may hinder autonomy
Physical discontinuity	Expedited understanding of technology and our physical environment
Social and relationship discontinuity	Harmony with one's neighbors and community members

Loss of natural/freely-given relationships and substitution of artificial/paid ones	Paid relationships based on stewardship: the paid person is accountable for outcomes in the individual's life, without acting to define that person's life purpose, control the actions of the person's environment, or caretaking of the individual (where caretaking carries the assumption of fundamental incompetence)
Deindividualization	Celebrations of who the individual is with understanding of the importance of oneself (of one's soul) and of the world
Involuntary material poverty	Control of financial resources both earned and entitled
Impoverishment of experience, especially that of the typical, valued world	Immersion in experiences, opportunities and learning which are generally highly valued
Exclusion from knowledge of/participation in higher-order value systems	Inclusion in (knowledge of and participation in) higher-order value systems that give meaning to life and provide community
Having one's life wasted	Having a flourishing life which is marked by growth, prosperity, success, and thriving–on multiple levels in multiple realms
Brutalization, death-making	Being the receiver of all that is humane; being imaged as alluring or captivating, so much so that people have thoughts of renewal, regeneration and 'lifemaking'
Awareness of being a source of anguish to those who love one	Being a core of solace and inspiration, a 'heartener' to people who love one
Awareness of being an alien in the valued world; personal insecurity, perhaps dislike of oneself	Appreciation of one's role and contribution in the world

As mentioned earlier in this article, clearly not every student is able to internalize the material. Overall, however, I do believe even a willingness to grasp for understanding of the material is valuable. Additionally, while there are clearly some students who glimpse the implication of the power of the material, the systems they are entering have years of practice and multiple strategies to convince them that what they see or are caused to ponder is simply an ideal, but not based in realistic possibility. Because of this, as part of the coursework, I ask each student to construct an ideal school environment founded specifically on the 10 themes of SRV. This sharpens the student's focus and benefits their design. While students often continue to believe in the perfectibility of structures and systems, especially special education models, they clearly have a new level of consciousness about the forces at work. Given these limitations, the course content is continuously under review and revised, as deemed appropriate, in an effort to ever more fully provide the students with tools and resources of value to their journey. For example, the current 'Call for Papers' issued

by *The SRV Journal* (see page 4) will be followed with an effort to collect papers addressing each of the 10 themes of SRV. These papers will become a bound resource for classroom assignments, the intention of which is to provide further potential for deepening understanding on the part of the student of the concepts presented and explored.

Concluding Thoughts

There have been a few surprises throughout this journey. Surprisingly, colleagues report that students have pulled out the Wolfensberger text and their research paper and presented them as evidence counter to what the professor teaches. Even more surprising, the professor occasionally reports that the student has persuaded him or her. The other significant surprise is the amount of work the students are willing to engage in and submit. They are willing and eager to meet the high expectations placed upon them. They produce two research papers (one of 25 pages and one of 40 pages), one group subject paper (10 pages), and design and deliver a lesson relevant to course material. Colleagues report this level of expectation to be masters' level work and yet the students predominantly report highly positive experiences such as the student who expressed, "This course provided a very applicable understanding of special education. I appreciated that we not only learned about special education within the school system, but we also learned about the foundational problems of discrimination and devalorization. The class, along with the group work and community service, got me more interested in the personal aspects of special education, rather than just the disorders, laws, or systems. Having knowledge of socially constructed experiences will be a great advantage to me not only when working with people with disabilities, but in simply being a member of society."

While the course content will continue to be reviewed and modified as needed, I am confident the changes that have been implemented, specifically the integration of SRV theory and themes, will make all the difference in the impact our future teachers have in the lives of students, particularly those most vulnerable.

Endnotes

1. Further exploration of these themes may be achieved through attendance at an introductory or advanced Social Role Valorization workshop. Information on these workshops is available at www.socialrolevalorization.com.

2. Please see Figure 1, the reciprocity table on robustness, included in this article. The left-most column of the table reflects the 18 wounds as proposed by Dr. Wolf Wolfensberger. Further exploration of these wounds may be achieved through attendance at an introductory or advanced Social Role Valorization workshop, as well as reading Wolfensberger, 1998. Information on these workshops and other SRV resources is available at www.socialrolevalorization.com.

3. US educational civil rights laws relevant to students with disabilities, including:

ADA – The Americans with Disabilities Act was enacted in 1990 and is a wide-ranging civil rights law that prohibits discrimination based on disability. Disability is defined as "a physical or mental impairment that substantially limits a major life activity."

NCLB – The No Child Left Behind Act, enacted in 2001, aimed at improving the performance of schools in the United States and is based on the theory of standards-based education (the theory that high expectations and measurable goals will improve outcomes for students).

IDEA – The Individuals with Disabilities Education Act was enacted in 2004 and governs how states and public agencies provide early intervention, special education, and related services to children with disabilities.

References

Bloom, B.S. (1956). *Taxonomy of educational objectives. Handbook I: The cognitive domain*. New York: David McKay Co., Inc.

Goodley, D. (2001). Learning disabilities, the social model of disability and impairment: Challenging epistemologies. *Disability and Society, 16* (2), 207-231.

Gottheil, N. & Dubow, E.F. (2000). The interrelationships of behavioral indices of bully and victim behavior. Paper

presented at the *108th Annual Conference of the APA,* August 4-8, in Washington, DC, US.

Hartung, P. (2002). Cultural context in career theory and practice: Role salience and values. *Career Development Quarterly, 51*(1), 12-25.

Krathwohl, D.R., Bloom, B.S., & Masia, B.B. (1973). *Taxonomy of educational objectives, the classification of educational goals. Handbook II: Affective domain.* New York: David McKay Co., Inc.

Minnes, P., Buell, K., Feldman, M., McColl, M., & McCreary, B. (2002). Community integration as acculturation: Preliminary validation of the AIMS interview. *Journal of Applied Research in Intellectual Disabilities, 15*(4), 377-387.

Vos, R. (2002). Collaborating to close the achievement gap. Paper presented at the *Annual Meeting of the American Association of Colleges for Teacher Education*, February 23-26, in New York, NY, US.

Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Thomas Neuville, PhD, is an Associate Professor of Education at Millersville University in Pennsylvania, US. He has more than twenty-five years experience in community and organizational development. C. Hannah Smith is a community member whose life is enriched by personal relationships with vulnerable people. She credits Social Role Valorization as a powerful framework which influences how she parents her children.

The citation for this article is

Neuville, T. with Smith, C. (2008). SRV & teacher prep: Not just a course, but a course of action. *The SRV Journal, 3(2),* 18-25.

Suit & Tie

Susanne Hartfiel

Editor's Note: *This article recounts a significant part of the life story of one devalued person, along with an SRV-based analysis of lessons the author drew from reflecting on her relationship with this person. Such stories and analyses can: help us to understand SRV better; prevent us from perceiving SRV as merely intellectual or abstract; be an excellent teaching tool; provide insights into applying SRV; etc.*

The article *shows how valued roles can lessen the effects of social devaluation and bring greater access to the 'good things of life' (Wolfensberger, Thomas, & Caruso, 1996), yet can be difficult to support and do not* ***eradicate*** *devaluation. It also explores one of the good things of life which valued roles can make more attainable for devalued people; namely, a transcendent belief system. While belief systems are a prominent component of culture and an integral part of contemporary societies, we have seen comparatively little writing about supporting devalued people in such valued roles. We encourage writers to submit manuscripts about their efforts in supporting devalued people in valued roles related to belief systems, religions, etc.; what strategies you used; what benefits accrued to the person; what struggles you faced; and so on.*

The Story

When I first met E., he was begging in front of a Catholic church–drunk, dirty, smelly. He told me he was living in a private shelter, in a small room with two friends. One of them always had to sleep on the floor because there was only one bed with space for two. The owner of the shelter was making a lot of money because each bed cost as much rent as an entire apartment. The city was paying for it because public shelters were overcrowded.

E. was to become a regular visitor to the church, always begging with his friends at the front entrance, sometimes standing inside the church at the back, but never participating in the Catholic Mass. One day he told me that earlier in his life he used to go to church every Sunday, but his need for money prevented him now from staying inside for too long: he had to be outside begging as worshippers left the church. He said he still owned his suit, shirt and tie that he used to wear on Sundays. I offered to replace his begging 'income' with a donation, if instead of begging, he would go to church with me and wear his suit. He looked at me and replied that he would only wear his suit if I, too, dressed up a little. I understood his point, so the following Sunday, I dressed up.

E. did not believe that my offer was serious, because the next Sunday he was dressed as usual and when he saw me all dressed up, he looked at me in great surprise. I kept dressing up on Sundays, and E. kept making excuses for not wearing his suit: his pants were missing, they had not been ironed, his matching shirt had dirty spots–until one day, he showed up nicely shaved, with a new hat and his suit. However, on top of his suit he was wearing his dirty, old, stinking jacket. He was

too embarrassed to accept my donation and still preferred to stand begging in front of the church instead of joining me. He said he needed that old jacket; if he did not wear it, people would not give him money because they would not consider him a real beggar.

A few days later, being really drunk, he was caught stealing a small amount of money from the church collection basket. Emotions ran high, and the police were called. Many parishioners felt the time had come to stop this 'disturbing begging' in front of their church. A poster was put on the church's front door, asking parishioners to stop giving money to beggars; instead, beggars should be referred to social services that specialized in helping the homeless and addicted. The same request was made in the church's bulletin.

E. and his friends, deeply hurt and embarrassed, stayed away from the church for a few weeks. They eventually came back, but there was no more talk about the suit and joining me for Mass.

In the following three years, E.'s life became even more difficult. His best friend died in a prison cell, as a result of liver disease and lack of medical treatment. E. and his friends lost their bed in the private shelter when the city decided to close it down in the middle of winter because it did not comply with 'regulations.' They ended up living on the streets, often sleeping in the main post office whose door they knew they could open. A friendly cleaning lady made some space in the supply closet for them to store their few belongings during the day. She woke them up every morning so that they could leave before the post office staff and customers would arrive. Quite often though, the security guards kicked them out in the middle of the night.

E. spent all his days begging and drinking at the city's main square, in front of the main church, opposite the state parliament and the mayor's house. A few attempts of the city to 'clean up' its prestigious and touristy downtown area of homeless and poor people failed, because despite police presence and fines, people always came back –just like E. and his friends had come back to the church that rejected them. E. started to call himself "Uncle E." and became one of the best-known drunkards and beggars of the city. Some people regularly provided him with food and clothing, but nobody seemed able to find decent housing for him or for his friends.

Professional services that were supposed to serve addicted or homeless people turned out to be referral experts: the housing service for the homeless said they were not able to help because he was too drunk, too dirty and too badly dressed. The alcohol counseling service said they specialized in people who still had work and a place to live, and they did not know what to do with somebody like him. The alcohol detoxification program referred him to a rehab program which required him to not only stop drinking or using drugs, but to also stop smoking tobacco, drinking coffee, eating sugar and watching TV, all of which were considered addictive. E. was not ready for that, so he went back to the streets. Somebody eventually found him a room in another terribly expensive private shelter in which everyone living there was constantly drunk or on drugs.

Things kept getting worse. E. was beaten up and robbed by a youth gang who considered it Saturday night fun to beat up homeless people. An argument over money with an acquaintance led to a concussion and a broken nose that the hospital would only fix if he came back sober the next day. Of course, he was not able to, so they sent him away. His health declined and his drinking increased. He kept collapsing on the streets, but when he woke up, he vehemently refused any medical treatment, as he had become deeply suspicious of all medical or other professional services.

At some point, E. was imprisoned for two months because he had been convicted of using local public transportation without paying, and he had not paid the fine imposed by the court. Sadly enough, the time in prison seemed to be good for him because alcohol was not as readily

available. He ate and slept regularly, some of his health issues were treated, and he worked. Forced sobriety in prison made him think of his past life, and he began writing letters to me telling about it: of his family, of his grandson whom he had never met, of the church he had neglected, and of God who had seemed so far away and so silent for so many years.

E. had grown up and lived in a small town in the south, was married and had an adult daughter, as well as a large extended family. He had been a well-respected businessman in that town, the senior manager of a large insurance company, and later ran his own business. He was elected as a high government official of his town, and was head of the local sports association. He had been a member of the church choir, and involved in many other town activities and associations. As an often-invited guest to many celebrations, parties and dinners, he personally knew many locally famous people: entertainers, sports celebrities, business people and clergy.

He also wrote about his wife and daughter whom he left behind when he decided to move away from his hometown with his young, attractive girlfriend. After the girlfriend and his money were gone, he started to lose control of his drinking. His debts increased, he lost his job, his friends, and finally his apartment. He ended up in the private shelter where he met other marginalized people who then became his new friends.

When E. was finally released from prison after two months, he went straight to the liquor store to celebrate his newly attained freedom with those friends. It did not take long until everything was as it had been before. Nobody expected anything good of him any more.

One evening a policeman called me, saying that he had found E. in his room close to death. He had called an ambulance to take him to the hospital, and wanted to let me know where to visit. The policeman explained that in his job patrolling the downtown area, he often looked out for poor and homeless people. He helped them deal with the courts to avoid being imprisoned for small offenses; he stored their important documents in his office so they would not get lost; he negotiated with the local transportation company to not turn people over to the courts for riding without paying the fare; he tried to convince people to see a doctor, or to go to the hospital if necessary; and he searched for people who had not shown up for several days to see if everything was all right. One of E.'s friends had told him that E. had disappeared, so the policeman had broken into his room and found him there. As E. had mentioned my name to him several weeks earlier, the policeman went to the trouble of asking people if anybody knew who I was so he could call me. None of this was part of his job, and he depended on his colleagues tolerating what he was doing.

E. ended up in the intensive care unit of a nearby hospital, and soon recovered enough to be transferred to a regular unit. His recovery there lasted only a few hours. Suddenly he became unconscious, one side of his body contracted. The doctor said that this was the result of alcoholism, and there was nothing they could do. The nurses stopped paying attention to his personal care. Everybody seemed to be waiting for E. to die.

A friend from the street, a lady who distributed food to homeless people, a few people from the church, and I visited E. Some doubted the doctor's diagnosis and inquired about E.'s condition, asking the doctor to do something. The doctor became angry, but finally scheduled him for the necessary testing. It turned out that E. had bleeding in his brain, so they transferred him to a hospital that specialized in brain surgery.

In the new hospital three miracles happened: first, everybody there did the best they could in caring for E. The new doctor dropped all confidentiality concerns and talked to us about E.'s condition and treatment, and performed an operation that brought E. back to consciousness and on his feet within three days. With that accom-

plished, he sent him to the hospital dentist to look after his teeth. The nursing care was excellent, and when the nurses found out that E. did not have enough clothes, they asked their brothers and husbands to provide elegant pieces of clothing. They invited E. to come and visit after his release from the hospital if he ever needed coffee or a free lunch. They bent the rules to keep him in the hospital long enough to figure out what he would do after his release. They made sure E. could always get in touch with us.

The second miracle was that E. fully recovered and he seemed healthier than ever.

The third miracle was that he decided to stop drinking. The hospital arranged for an alcohol counselor to inform him about available programs. E. decided to join a day program that promised office work for a few weeks, and help in finding a paid or unpaid job somewhere else.

When he left the hospital, his problems were still overwhelming: he got a letter informing him that he was going to be imprisoned for yet other incidents of unpaid bus fare, unless he paid a large fine and court fees within the next three days. The local transportation company threatened that unless he paid yet more fines, they would turn him over to the courts. That meant lots of money or prison. The health insurance company kept sending bill after bill, for more money that he did not have. He needed to see an eye doctor too; without glasses he could not read one single word. He also needed new teeth, which required several dentist appointments and, of course, money.

The welfare service, mandated by law to pay for some of these expenses, could not find his records. It had just moved its offices, but instead of telling him, it kept referring him to other offices with long waiting lines, which then turned out not to be the right ones. The bank gave him a hard time when he tried to withdraw the little money he still had in his bank account, because he had forgotten the password. His room was in bad shape and needed a lot of work, as well as being in a house filled with people who were drinking. His friends from the street showed up to sleep in his room and drink there.

The day program, in which he had put so much hope, turned out to not offer any real work; they promised only one phone call to find out when the unemployment office would be open. He was offered lengthy breakfasts and lunches, interspersed with group counseling sessions where people's difficult life situations would be discussed. E. went to see his former boss instead and asked for a job. That failed because the boss wanted a doctor to attest that the work did not pose any danger for E.'s health, but because of his brain injury no doctor was ready to put that in writing for at least a year.

At the same time, E., the policeman, and the other people who helped him, managed to negotiate with the State Attorney to keep him out of prison, as well as with the public transportation company and the health insurance company to find realistic ways of dealing with his debts. They also raised some money for food, glasses, teeth, public transportation and other necessities, and they turned his room into a place that was habitable. As E. now had more elegant clothes, he was able to dress as he did when he had held a good job. He started to go to church regularly.

When he showed up for church in a suit and tie, people did not recognize him. They thought he was a stranger. During his stay in the hospital, word had gotten out that he was dying. Now he was back, a new person. Everybody was amazed.

E.'s sobriety, combined with his dignified personal appearance, opened many doors. He again became a gladly invited lunch and dinner guest; people took him to concerts and other evening events. He eventually found a small occasional job as a gardener, and became a volunteer at the church. E. got back in touch with his daughter, who sent pictures of his grandson whom he had longed to see, and they planned for a visit. He talked to his wife. He was extremely happy with his new life, seeing and

experiencing good things he had not seen and experienced for years.

Persistent problems remained. Some seemed unsolvable: it was impossible to find a new place to live, in part because he was a welfare recipient and had a bad reputation among housing authorities. Subsidized housing projects would not take him, while regular apartments were much too expensive. The city in which he lived lacked sufficient affordable housing for poor people, making it difficult for everybody on welfare to find decent housing. E. had plans to move back to his hometown which made him decide to hold out in his old place, but that meant a lot of drinking around him, all day long, every day. His newly acquired roles–as church member, friend, guest, volunteer, gardener, and grandfather–though valued, still did not quite fill his days, so he spent a lot of time by himself. He also missed his old friends from the streets with whom he had spent so many years, day and night.

Friendships among people who live on the streets can be very strong. People sometimes do things for each other that people living in more favorable conditions would not do. The violence, hardship and rejection that come with life on the streets often prompt people who share the experience to draw very close to each other. E. and the people with whom he had shared his bed and room in the shelter were such friends. They had always stuck together. He saw them occasionally, brought them coffee and food, and worried about their bad situation. A well-meaning lady who begged food from business people and distributed it to the homeless pressured E. to beg for her. He was very successful at it, but it also trapped him in his old beggar role, although this kind of begging was less devalued than the former because at least he was begging for others, not for himself. Being a welfare recipient meant that he spent a lot of time in all kinds of offices waiting and filling out forms; it also meant a lot of humiliation, because the public officials saw in their records that E. had been a homeless alcoholic who had served time in prison. To them, once an alcoholic criminal, always an alcoholic criminal, no matter how well dressed.

His life between two worlds lasted about four months. Nobody except E. knows exactly when he had his first drink again, but from that moment on things went downhill rapidly, until he was back on the streets with his old friends, who were sorry but glad at the same time to have him back.

I left Germany for a few years, and when I returned, I found E. still begging in the streets, but living in a small institution for alcoholic men where everybody drank. His health and drinking were worse than ever. A few weeks later, he was taken to a hospital. A legal guardian was appointed.

When E. recovered, he was sent to a local institution in which several hundred people of all kinds of different devalued identities were segregated from valued society and congregated. He was not allowed to leave institutional grounds and was put under so much supervision that he was unable to start drinking again. As one might expect, living in that institution was a hardship for many reasons, but there were also at least two positive aspects to it: one was that E. was sober and thus able to enjoy visitors. Parishioners and other people who had gotten to know him when he had walked around in his suit and tie and had kept in touch with him over the years came to visit. The institutional staff were very welcoming to the visitors. The other positive aspect was that the institutional doctor took his job quite seriously.

It was discovered that E. had bladder cancer, and so the doctor scheduled him for an operation in a nearby hospital. When he showed up for that operation, the hospital doctors told E. that the operation was not necessary and sent him back. The institutional doctor got him another appointment right away, but only a few weeks from then, as German hospitals have limited capacities for certain procedures. When the day of the operation came, E. had to be treated as an emergency case. His bladder and kidneys were badly infected, causing

seizures and a coma-like condition. The emergency doctor was furious, saying that E. had not received his operation because it was considered a waste of money to perform such operations on people living in institutions or nursing homes. E.'s general condition was so bad that the bladder operation could not be performed. It very likely would have killed him. The doctors managed to get the seizures under control. E. was awake for periods of time in the weeks that followed, but the bladder and kidney infections led to a bad pneumonia.

After four weeks in the intensive care unit, E. died at age 59 on Easter morning at sunrise. He had received the Catholic sacramental rites and been visited day after day by many people who spent hours at his bedside. While some nurses had been quite unwelcoming at first towards his many visitors–who were perceived as disturbing hospital procedure–their hostility eventually turned into friendliness when the visitors kept coming back. The night E. died, a friend was called to sit with him, and was given coffee and food by the nurses.

The Citizen Advocacy Foundation of America

From the Editor

Citizen Advocacy (CA) is an advocacy model developed by W. Wolfensberger which in practice is informed by and relevant to Social Role Valorization. CA arranges and supports relationships between socially valued, competent citizens, and individuals who are socially devalued. The intent is for the typical citizen to respond to and to represent the devalued person's needs and interests as if they were their own.

The Citizen Advocacy Foundation of America is a non-profit, tax-exempt foundation. It solicits financial contributions to be used to make grants to CA-related projects, providing a means for assuring the continuity of CA and CA programs. Historically, CA programs have had great difficulty finding initial and ongoing funding. The Foundation will only fund projects closely related to CA, striving to achieve the greatest benefit to the CA movement overall.

The viability of this Foundation depends on financial contributions made to it by generous donors. We ask readers of this *Journal* to please consider making a donation, and/or to share this information with others who may be able to make a donation. All contributions are exempt from US taxes. For more information about the Foundation, contact Susan Thomas at 231 Miles Avenue, Syracuse, NY 13210; 315.478.3797.

To learn more about Citizen Advocacy, three excellent written resources are:

Wolfensberger, W. & Zauha, H. (1973). *Citizen Advocacy and protective services for the impaired and handicapped.* Toronto: National Institute on Mental Retardation.

Hildebrand, A. (2004). *One person at a time.* Brookline, MA: Brookline Books.

O'Brien, J. & Wolfensberger, W. (1988). *CAPE: Standards for Citizen Advocacy program evaluation (Syracuse test edition).* Syracuse, NY: Person-to-Person Citizen Advocacy Association.

The funeral was held in a beautiful convent chapel located next to the parish church in front of which E. used to beg when I first met him. It was celebrated by one of the parish priests, attended by E.'s wife and daughter, many parishioners, the nuns, E.'s friends from the streets and the institution for alcoholic men, two policemen, a human service professional, and the 'food lady.' It was followed by the funeral repast in the convent's library. For a few hours, people of extremely different backgrounds and social circumstances were able to overcome their differences, enjoy each other and feel comfortable in a beautiful environment. None of the parishioner's original fears about societally devalued people came true; everybody acted appropriately. It turned out that some parishioners were not even aware that several of their fellow mourners lived in extremely bad circumstances. For a few hours it seemed as if the normal patterns of devaluation and wounding had taken a break.

The Interpretation

There are many Social Role Valorization (SRV) aspects in his story–good ones and sad ones–to think about, consider, and learn from, but I will only cover a few of them.

One is the power of expectations–positive and negative. When I first asked E. to wear his suit and attend church with me, I could honestly see him being a faithful Catholic parishioner, even though nobody else could, not even E. himself. Over the years, when things did not change for E., my once high expectations were almost gone but I always forced myself to act as if I still held them. That was enough to plant a small seed in E., so that when finally almost everybody expected him to die, or at least to be impaired for life, he got out of his hospital bed, dressed up in the fancy clothes the nurses had given him, and went to church.

The doctor and the nurses at the second hospital had not only given him the best possible medical treatment, but by doing so they also put him in the most valued patient role possible. The patient role comes with a bandwidth of valuation: it can go all the way from being extremely devalued (e.g., the 'hopeless coma patient') to being on the borderline between valued and devalued (e.g., filled by the rich valued citizen who receives the most exclusive medical treatment by a famous doctor in a prestigious hospital). In the first hospital E. was in the dying alcoholic patient role. Every bit of staff effort was considered a waste of time and resources. In the second hospital he was in the valued patient role, someone whom everybody expected to recover and get well. This made all the difference, and not only saved his life but also reinforced the strong expectation in him that he could become the valued citizen he once was.

If one wants others to perceive devalued people more positively and to help them fill more valued roles, one of the things one can do is to help them project an appearance that is highly valued in society (Wolfensberger, 1998, p. 68). All too often, however, many people, including service workers, think that devalued people should decide for themselves how they want to look, and that society should accept them 'as they are.'

E.'s story powerfully illustrates the power of personal appearance, and the expectations that it conveys: E. himself knew very well what trappings of the beggar role he had to convey to the parishioners to get money from them. When he met these parishioners three weeks later after being released from the hospital, dressed in a suit and tie, they did not recognize him but treated him like an honorable fellow parishioner. When they discovered who he was, nobody objected any more to him coming to church; the external change made them assume that he had changed internally as well. They were suddenly able to identify with him, as a fellow believer who repented of his past life and tried to change.

E. then became eager to wear his suit all the time because he realized that he was much better treated almost everywhere he went. Of course, there were exceptions, e.g., when he had to deal with welfare officials, but in most situations his

positive appearance clearly contributed to upgrading his roles, and allowed him to enjoy some of the good things of life (Wolfensberger, Thomas & Caruso, 1996).

Another example of setting powerfully positive expectations was E.'s funeral: the physical environment was extremely beautiful and thus invited people to act appropriately, the mourners present modeled how to behave, and people who wanted to participate were told in advance that two things were asked of them: not to be intoxicated and to behave appropriately. Some mourners had never been to a Catholic funeral before and found themselves in a new situation. They looked to their fellow mourners for how to act appropriately. As a result of these positive expectations, people who often acted in ways that were extremely devalued by society instead were perfectly able to live up to these expectations. They did this so well that the more privileged parishioners were able to identify with them as fellow mourners, some not even noticing their huge differences in social status.

The negative expectations which surrounded E. were very strong as well, and he finally submitted to them: his neighbors' expectations that he would start drinking again; his friends' expectations that he would rejoin them in their life on the streets; his doctors' expectations that he was not able to work; the welfare officials' expectations that he was an alcoholic criminal and a burden on society; the human service workers' expectations that he was a client to be counseled and engaged in group therapy; the well-meaning lady's expectation that the best role he could fill was that of a beggar.

Social Role Valorization (SRV) teaches that people who are valued in society get to fill social roles that are valued by society, such as E. being a businessman, husband, father, church member, and respected citizen in his earlier life. People whom society devalues fill social roles that are devalued by society, such as E. being a homeless beggar, an alcoholic criminal, a welfare recipient, a sick and dying person, to mention just a few of his devalued roles. People seen in valued roles tend to get treated well, have many positive expectations placed upon them, and get afforded many good things of life, whereas to people in devalued roles, many bad things tend to happen and negative expectations get placed upon them.

After his decision to stay sober and change his life, E. found himself between two mutually exclusive worlds of valued and devalued identity: he was not a member of the street culture any more –though he was living very close to it–but he had not recovered his earlier identity as a valued citizen yet, just small aspects of it. There was hope that he might attain it in the future, but it was still a long way to go. Being pulled in two opposite directions, with opposite expectations placed on him constantly, and living between two possible worlds of different identities, is a difficult and confusing situation. E. ended up trading this confusing, contradictory identity for a familiar but clearly devalued one.

He also traded his few and relatively small valued roles (as a friend, guest, church member, volunteer, gardener) which did not fill his time, for one big and time-consuming devalued role, that of a begging drunkard. That big devalued role had the advantage of keeping him busy all day and providing relationships–with his old friends, and with people he asked for money and engaged in conversation on the street–whereas before he felt lonely much of the time and in need of some meaningful occupation.

From the perspective of the people who tried to help E., it seemed difficult enough to address some of the most immediate and urgent problems to prevent the worst from happening, and to help him enter, and keep, a few small valued roles that he would enjoy. What would have been necessary for him not to lose hope would have been at least one, or even two, big valued roles: a meaningful work role, and a role that combined positively experienced relationships with a true home. He also needed those roles quickly, not after a long waiting period.

E. experienced all the wounds that are described as common to devalued people (Wolfensberger, 1998, pp. 12-24). He did not start out with a physical or functional impairment, but he ended up with them as a result of being beaten up and hitting the hard surface of a city street, resulting in his brain injury. He experienced deep rejection by many people, e.g., by his landlord who kicked him out in the middle of winter; by his church who would not even tolerate him in front of their church building; by the city who did not want him in their downtown tourist area; by professional human service workers who did not want to serve him; by doctors and nurses who refused to treat him. His later life was an accumulation of devalued roles: 'homeless man,' 'beggar,' 'drunkard,' 'welfare recipient,' 'prisoner,' 'moneymaker for the better-off' (e.g., the owners of the private shelters), 'garbage' (for the city officials who wanted to clean up the downtown area), 'burden of charity' and 'human service client' (for parishioners), 'easy victim of abuse' (for the youth gang), 'menace,' 'hopeless patient,' and 'better-off-dead institution inmate' are just some of the devalued roles he filled.

Everything about him conveyed that he was a devalued person, and his social status could not have been any lower. He became a scapegoat whenever one was needed, e.g., for journalists and city officials who blamed people 'like him' for destroying the nice ambience of the city, or for human service professionals who blamed people 'like him' for being 'therapy resistant' and rejecting the nice services they provided.

He was congregated with other drug or alcohol addicts into houses in which no valued citizen would want to live, and later with people of all kinds of devalued identities into a huge institution. He lost almost all his freely-given relationships, to the point where his only friends were other homeless people. He totally lost control of his life to his alcohol addiction, but also by being imprisoned, deindividualized and institutionalized. He was excluded, not only from most typical places and experiences in life (e.g., by not having a place to live, by being thrown out of stores, coffeeshops, and similar places), but also from practicing his religion. He was poor to the point that all he owned was contained in a bag, stored secretly in a post office closet. The day service which he hoped would help him tried to waste his time. The doctor and nurses at the first hospital tried to make him dead by not diagnosing and treating him. Finally, a few years later, he most likely was made dead by the doctors who refused to perform the operation which might have saved his life.

Addressing such overwhelming devaluation takes a lot of time, effort and perseverance. In E.'s situation, the people who ended up treating him well and saving his life were another lowly drug addicted homeless man, a policeman, a brain surgeon, nurses at a specialized brain unit, a few people from a church whom he met begging, and a lady who distributed food to homeless people. Not one of these people was a case manager, social worker, or therapist. Some of them one might not readily expect to be allies of devalued homeless people. They were flexible enough, however, to respond to (at least some of) E.'s needs at the right moment, when he was ready to change.

Professional addiction services often do quite the opposite: they not only often believe that decades of addiction, wounding and devaluation can be fixed in an instant and without much effort, but they are also typically quite inflexible and tend to impose their expectations of when a person ought to change and develop (Hartfiel, 2006). If the person to whom such service is offered is unable to change at that point in his or her life, then the opportunity is missed, the person tends to get blamed for it, and the offer of future services is always tainted by the person's previous 'failure' or 'stubbornness.' In E.'s situation, non-medical professional services did nothing at all that was helpful for him at the point in his life when he was ready to change. But a few years later, when he had given up the hope of ever being able to stay sober again, they forced sobriety on him. The cost of this sobriety was a form

of imprisonment and it came with an exchange of one extremely devalued identity (hopeless alcoholic beggar) for another extremely devalued identity (institution inmate).

All of this illustrates that unpaid personal relationships with competent valued people are often the means to higher expectancies, valued opportunities, and more valued social roles; a point that is emphasized repeatedly within SRV workshops, and which Citizen Advocacy is built upon.[1] If E. had not had at least a few such valued allies, very likely nothing positive would have happened in his life. Most of his relationships with valued people were sporadic, and not very deep, but once they decided to be helpful to him, several such people were able and willing to respond, at least to some degree.

The most devastating wound that was inflicted on E. was the wound of brutalization and deathmaking (Wolfensberger, 1998, p. 21; Wolfensberger, 2005a). Had there not been at least some valued people as allies, he very likely would have been dead much earlier, although, at the end, even those people were not able to prevent his being made dead because in one decisive moment (his scheduled operation) there was nobody to protect him. Wolfensberger suggests a 24-hour bedside presence to protect vulnerable people in hospital settings (Wolfensberger, 2005b). This is certainly ideal in many situations, yet in practice it is often not feasible for various reasons. For instance, certain settings, such as German intensive care units, will absolutely not tolerate it. Sometimes there are simply not enough volunteers to do the bedside-sitting and/or not enough money to pay people for doing it. However, even when people only come for a few hours and/or sporadically, it can have very positive effects. In E.'s case, his visitors' repeated asking about his condition eventually prompted the doctor in the first hospital to do the necessary testing and transfer which saved his life. At the end of his life, the doctors and nurses saw the stream of valued citizens as visitors who were concerned about E.'s recovery and well-being, and thus E.'s value in the eyes of these doctors and nurses rose. They started to take better care of him. Many visitors did not perceive the danger to E.'s life in hospital settings, and if they had perceived it, they might not have been ready or willing to offer protection. They were still invited to visit and contributed to the positive change in the doctors' and nurses' perceptions of E.

Sometimes there was outright hostility towards visitors who were perceived as interfering with hospital procedures or as being judgmental about poor medical and nursing care, but such enmity was often changeable. During E.'s last stay in the hospital, some nurses' hostility slowly turned into disbelief that 'somebody like him' would be so important to so many ordinary valued citizens, and finally into some kind of identification with him, as they started to be able to see him as a fellow human being who wants to live like everybody else, instead of as a better-off-dead institution inmate and financial burden on society. What drove this change in perception and upgrading of his role was valued people being constantly juxtaposed to him, or, in other words, societally valued visitors letting staff know through their behavior and communication how important E. was for them.

E.'s story also illustrates in other ways the immense protection that valued roles offer, in the face of the heightened vulnerability of devalued people. If E. had lost his home while he was still a valued citizen–like through a fire–it would certainly have been a great hardship for him, but he very likely would have received many offers of hospitality by family members and friends until he found a new place. When he was an alcoholic beggar, being kicked out of the shelter in the middle of winter was life-threatening because homeless people often freeze to death. When he tried to stay sober and get away from his drinking neighbors, no alternative place was available for him.

When E. left his hometown, he left many of his valued roles behind (e.g., his roles of 'husband,' 'father,' 'church member,' business owner,' 'well known citizen'). When bad things happened in his life, the relationships that had come with his previous valued roles were not there any more to protect him from entering the downward spiral of increased drinking, and the loss of yet further valued roles due to his drinking. So in a way, giving up these valued roles probably contributed more to his severe devaluation than his drinking. In his hometown he might very well have been a highly respected citizen with a bit of a drinking problem for the rest of his life; in a new city he ended up as a drunk beggar.

One last observation I would like to make is about the importance of interpersonal identification in E.'s life, and in the relationships between parishioners and beggars. SRV theory emphasizes the importance of interpersonal identification between valued and devalued people as a prerequisite for valued social participation and personal social integration, as well as for devalued people entering many valued social roles (Wolfensberger, 1998, pp. 118-120). When I first met E., the relationships between parishioners and the people begging in front of their church were mostly marked by hostility, rejection and distancing. When E. had died, many mourned for him and were able to celebrate a beautiful funeral Mass.

Several things helped parishioners change their perception of E., and consequently also of other homeless and addicted people. First, in his few sober months he was able to recover one role that was important and valued in the eyes of the parishioners, that of a practicing Catholic. By the way he dressed and talked they could also perceive some of his past valued roles as a respected citizen. Both helped parishioners to perceive him as less different and more like themselves. Secondly, as parishioners got to know E., they started to develop personal relationships with him and offer help. They enjoyed doing this and thus became able to perceive some of the adversities that people face who want to change their lives, and some of the injustices people have to deal with when dependent on professional services. Some needed help interpreting what was going on, but the previous assumption that 'everything is the addict's fault, just stop drinking or doing drugs!' had been put into question. Thirdly, the parishioners and E. were engaged in shared activities in valued settings that everybody enjoyed which greatly contributed to E. being perceived as 'one of us.' Even when he relapsed and was finally institutionalized and then hospitalized, some kept up their relationships with him.

Endnote

1. Citizen Advocacy is an advocacy model developed by Wolfensberger which arranges and supports relationships between socially valued competent citizens, and individuals who are socially devalued. The intent is for the typical citizen to respond to, and to represent, the devalued person's needs and interests as if they were their own. Good Citizen Advocacy resources are Wolfensberger & Zauha, 1973; and Hildebrand, 2004.

References

Hartfiel, S. (2006). Chronic criminal disease: An SRV-based critique of drug addiction services. *The SRV Journal, 1*(2), 7-24.

Hildebrand, A.J. (2004). *One person at a time: Citizen Advocacy for people with disabilities.* Newton, MA: Brookline Books.

Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W. (2005a). *The new genocide of handicapped & afflicted people* (3rd (rev) ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W. (2005b). *A guideline on protecting the health and lives of patients in hospitals, especially if the patient is a member of a societally devalued class (2nd rev. ed.).* Syra-

cuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W. & Zauha, H. (1973). *Citizen Advocacy and protective services for the impaired and handicapped*. Toronto: National Institute on Mental Retardation.

Wolfensberger, W., Thomas, S., & Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux*, *2(2),* 12–14.

Susanne Hartfiel spent time studying in the US with Dr. Wolfensberger. She now lives in Bremen, Germany and works as a personal care assistant serving two impaired women in their own homes.

The citation for this article is
Hartfiel, S. (2008). Suit & tie. *The SRV Journal, 3(2),* 26-37.

Reviews & More

Reducing Unwanted Risk for People with Disabilities and for Disability Workers. By Bill Budiselik. Paper presented at the 41st National Conference of the Australian Society for the Study of Intellectual Disability, Canberra, Australia, 2006.

Reviewed by Kevin Cocks

This article is a response to a paper presented by Bill Budiselik at the September 2006 41st National Conference of the Australian Society for the Study of Intellectual Disability (ASSID). Budiselik titled his paper *"Reducing unwanted risk for people with disabilities and for disability workers."* My critique is from an abridged version of the paper he presented at the conference.

Budiselik's paper opens with a strategic question: "Can my organisation demonstrate it has reduced the risk of abuse and achieved protectedness?" The author identifies two motives why human service organizations should try to reduce abuse, neglect, and harm, and provide protective environments for vulnerable consumers. He states that first there are obvious moral considerations, and second, a strong business case as well. Regarding the latter, he then identifies three more specific reasons:

1. There can be substantial legal and financial consequences for organizations and individuals found negligent if abuse or harm occurs;
2. How much the agency pays for insurance premiums might increase;
3. The agency can make a stronger case for more funding if it demonstrates good risk management practices.

The above reasons are sound and valid. The highest motivation for a serving entity should be driven by its concern for the dignity, welfare, safety, and lives of the people it serves. Particularly when they are reliant on having their fundamental needs met through paid service providers, no one would argue against the need to protect people from abuse and neglect.

However, it appears that the motivation for reducing risk in the approach presented by Budiselik is driven primarily by the fear of substantial legal and financial consequences for human service organisations found guilty of allowing and perhaps covering up abuse and neglect of vulnerable persons in their care. This approach reflects the common decision-making framework in many human services, which is that service policy and service practice be 'emotionally distanced' from the service recipient. Moral reasons are acknowledged by Budiselik, but he does not elaborate on what needs to be considered from a moral point of view. His primary framework is a technical, managerial, and legal approach. This ignores the true nature of human services, runs counter to their origins, and distances itself from the very people it is reportedly trying to protect from abuse, neglect, and harm.

This 'risk management' approach is not the most relevant for human service delivery, and certainly not effective when it comes to protecting vulnerable people from abuse and neglect. At best, the approach may shuffle the deck of cards and on the surface give the appearance of concern or even reform that leads to greater protection. However, in reality, it pushes the perpetrators underground and thus increases the vulnerabilities of already vulnerable people, making it harder to protect them.

I believe the issue is a moral one–a question of what is right and wrong. Certainly one must recognize that organisations, to deal with the issue thoroughly, need to identify risk implications and institute technical, managerial, and legal approaches in response to identified abuse and neglect. A much higher order of thinking, though, beyond the level of these techniques, is required

to reduce risk of abuse and neglect for people with disabilities. I have several suggestions for how an organization or an individual could approach the higher perspective which I believe is the more protective one.

First, one must better understand the history of human service delivery, including especially in this regard how the dynamics of power, control, and violence get played out in human services.

Next, one must ask, "What makes an individual less prone to being abused and neglected?" I would answer for myself that, firstly, it is the people I have in my life, those whom I have freely-given relationships with, those people who would stand by and up for me if I were in a position where I was unable to do so for myself. Secondly, it is understanding my identity and who has defined my identity. For example, is my identity one of a valued citizen? Have I had the opportunity to evolve and develop my identity as a valued citizen, or is my identity one of a person devalued (Wolfensberger, 1998) by others who have authority and power over me?

Following are other fundamental questions that I believe need to be explored in developing an organisational culture which protects vulnerable people from abuse and neglect:

- Does the organisation support and promote people in a way that gives dignity to the person with disability in every aspect of his/her life?
- Does the organisation have a culture of openness?[1]
- Are vulnerable people with disabilities involved in all aspects of organisational decision-making processes?
- Is person-centred planning utilised when assisting a person to plan for his/her future?
- Are vulnerable people visible and known in a positive way in their communities?
- Does the organisation value its staff at the coalface of service delivery?
- Does the organisation have a charter of values?
- Does the organisation have guidelines on how to identify abuse and to respond to allegations of abuse?
- Is regular time set aside for staff and vulnerable people to discuss and reflect upon service design, practice, and philosophy?

The above list of questions is not exhaustive. However, it indicates an approach that addresses

Peer-reviewed articles

Issues of the SRV Journal occasionally include a section of double blind peer-reviewed articles. Full-length manuscripts on research, theory, or reviews of the literature relevant to Social Role Valorization (SRV) are invited. These articles, with no identifying information about the author(s), will be sent by the Editor to appropriate experts for review of academic merit and relevance to SRV theory and application. Reviewers will be drawn largely, but not exclusively, from the editorial board. It is anticipated that the review process will take two to three months, at which time the Editor will communicate directly with the lead author regarding the outcome of the review process. Manuscripts may be accepted as submitted, may be accepted contingent on revisions, or rejected for publication. The final decision as to whether or not an article is published rests with the Editor.

The average length for peer reviewed articles is 6000 words. Authors should submit articles as an email attachment. All identifying information about the author(s) should be included in the body of the email that accompanies the attachment, not on the attachment itself. If at all possible, articles should be submitted in Microsoft Word. They should be double-spaced and in 12 point Times New Roman font.

Articles should be sent to the attention of Marc Tumeinski, The SRV Journal, journal@srvip.org.

the moral obligation as a higher order approach to reducing abuse, neglect, and harm, and the need to provide protective environments for vulnerable people with disabilities. Whilst we continue to invest in and rely on technical, managerialist, and legal remedies to reduce abuse and neglect of vulnerable people and provide protective environments for them, we will continually fail to achieve this worthy goal.

The process of interaction between people with and without disability is a social exchange. The experience of people with disability is that they are often seen as recipients of charity. A more positive exchange would be for people with disabilities to be seen as social contributors. A person without a disability can also gain from a positive interaction by having an opportunity to engage with another person's experience of disability and, as a result, become more aware of his or her own humanity. Both lives can be enriched through a positive exchange.

We must institute a belief that all human beings are equally important, unique, and of intrinsic value. Everyone should be seen and valued as a whole person, first and foremost. Human beings are fundamentally social beings. We all need love and relationships, and to be part of a community (cf. Wolfensberger, Thomas, & Caruso, 1996). Everyone has the potential to learn, grow, and make a positive social contribution. Each of us has the capacity to contribute to the well being or to the harm of others. Some people intentionally do harmful, dangerous or life threatening things to others. Sometimes unintentional harm is done by well-meaning people. Others contribute positively to people's lives. Human well-being is dependent on belonging to a socially just community.

Beliefs and values are the core ingredients of organisational culture. If the beliefs and values of an organization are counter to the ones I am suggesting, then no matter what quality assurance systems are in place, vulnerable people will not be protected.

Editor's Note: *Readers interested in this topic may also wish to read* Pacey, S. (2008). What keeps people safe? An exploration of Australian historical roots & contemporary expressions of abuse. *The SRV Journal, 3(1), 7–19.*

Endnote

1. A culture of managerialism and risk management/aversion lead to an organisational culture which: is closed, defensive, and secretive; and has a militarist hierarchy. An organisation with a culture of openness: is typified by communal management; has open access to the information or material resources needed for projects; is open to contributions from a diverse range of people who receive/produce/contribute to the service; and has flat hierarchies and a fluid organisational structure. Communal management is usually done with decisions made by some form of consensus decision-making or voting.

References

Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W., Thomas, S., & Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux*, *2(2),* 12–14.

Kevin Cocks directs Queensland Advocacy Incoporated in Brisbane, Australia (www.qai.org.au). He has always been interested in issues of social justice; this interest deepened when in 1981 he acquired a disability through a sporting injury.

The citation for this review is
Cocks, K. (2008). Review of the conference paper *Reducing unwanted risk for people with disabilities and for disability workers* by Bill Budiselik. *The SRV Journal, 3(2),* 38–40.

• • •

Quality of Life for People with Intellectual and Other Developmental Disabilities. By R. Schalock, J. Gardner, & V. Bradley. Washington, D.C.: AAIDD, 200 pages, 2007.

Reviewed by David Race

This review was written to a backdrop of a debate in the author's country engendered by the passage through the two Houses of Parliament of the *Human Fertilization and Embryology Bill,* a revision to earlier legislation that sought to regulate the various scientific developments that the title of the bill implies. The major focus of the media concerned public exhortation by a number of Catholic bishops on an aspect of the bill permitting, in certain defined circumstances, the growth of human tissue in non-human eggs, with those in favour citing the advances in developing 'cures' for various impairments of genetic origin, and the bishops raising the 'Frankenstein monster' scenario, along with statements about the value of all human life. Buried in the parliamentary debate was an attempt at an amendment to the legal time limit for abortion of a foetus deemed to be 'severely disabled,' which currently is right up to term. This amendment, proposed in the House of Lords, was to reduce the time limit to that for all other abortions, and was defeated after a debate in which one of those opposing the amendment opined that certain disabled people were "not viable people" (Hansard, House of Lords debate, 28 January 2008).

This view of disability was discovered to be still common in an examination of intellectual disability services in seven countries (Race, 2007), including the setting for the book under review. The notion, therefore, of 'Quality of Life' (QOL hereafter, following the book's convention) for a group that seem to have an increasingly lower chance of being born struck a somewhat ironic cord. For readers of this journal, too, an initial inspection of the references and index of the book leave a sense of omission of reference to those from the SRV field and its offshoots. In particular, reference to a forerunner of the book (Goode, 1994), with a similar title, although published only 13 years before this current volume, was noticeable for its absence, despite a number of historical developments being outlined by Schalock and colleagues. Even if Wolfensberger's contribution to that earlier edited collection, entitled "Let's hang up 'quality of life' as a hopeless term" might have deterred the current authors, Wolfensberger's views were significant for their minority status.

So this reviewer came to the detailed reading of this book with limited enthusiasm, reinforced by the somewhat repetitive nature of the various summaries that preceded and ended the sections and chapters. Getting into the detail, however, the feeling that a more nuanced approach to the book was called for began to grow. Clearly reflecting the significant place of QOL measures and influence on policy and practice in the US, the authors set out their primary readership as being "providers and policy makers," though they then list other groups who may find the book of interest. As an outside academic, with some knowledge of the Byzantine nature of the US service system, these initial objectives suggested that there might be too much 'local knowledge' needed, if such outsiders were to be able to find the book useful. Again, however, on full reading, it seemed to be a lesson, if a rather exhaustive one, in discovering that you have spent a lot of time trying to find a detailed, and quantifiable, answer to a simple question, but have found that, like many such questions, there is a complicated, elusive, and essentially qualitative answer.

This initial analysis may seem at odds with the general tone and presentation of the book, which conveys messages of empirical rigour and academic and professional respectability, including of course the image of its publishers, at least to outsiders, as the intellectual disability service empire writ large. Indeed, such thoughts would be confirmed by the early chapters, on 'The Individual Perspective' on QOL. Extensive compara-

tive listings of the various 'objective measures' of QOL are given, along with the acknowledged tension between such objectivity and the increasing use of self-reported assessments of well-being, in the domains of QOL commonly in use. The need to have QOL measures that meet 'psychometric standards' is a constant refrain, as is a sense that the development of QOL measures represents a reaction to service system (and academic) market forces, rather than being focussed on making lives better for people. A telling statement by the authors (p. 26) that the "criteria for selecting quality indicators ... reflect the concerns of program managers, but also recognise that people are *as important* as programs" (reviewer's emphasis added) seems to support this feeling.

People keep creeping in, however, to the forest of tables and psychometric fog. The 'domains' that emerge from the various measures bear a striking resemblance to the decidedly non-psychometric listing of the 'good things of life' (Wolfensberger et al., 1996), achievement of which, of course, is widely taught as the primary goal of SRV. Here, and subsequently, the feeling of the emperor's foundation garments being more importantly on show than the mysterious topcoat of elaborate psychometric measures grows stronger. In fact, as the authors get into the second and third sections, headed 'The Organizational Perspective' and 'The Systems Perspective,' the thought emerges that a substitution of the words 'good things of life' for 'quality of life' would not affect the analysis of how to implement change at organizational and systemic levels.

The difference seems to be that, by talking the language of empiricism, quantitative and 'objective' measures, the changes can at least get a foot in the emperor's door, if only at the tradesmen's entrance. The use of classic 'management of change' literature for the organizational section, and systems theory, for the systems section, are entirely appropriate and interesting, but do not appear to this reviewer to be dependent on QOL issues for their success. Indeed, in the references to 'learning organizations' in the former section, and the diagrammatic representation of the systemic change, a sense of *déjà vu* was felt, eventually traced back to two pieces of work by John O'Brien and others, one and two decades ago. These were *Celebrating the Ordinary*, subtitled *The Emergence of Options in Community Living as a Thoughtful Organization* (O'Brien et al., 1998) and the diagrams in the (unpublished) handbook for O'Brien's *Framework for Accomplishment* workshops in the late 1980s, though a number of other outputs from this source could also be brought to mind. The point is that they were not dependent on QOL or QOL measures for their success.

The last section, then, appears to this reviewer to be the point where the authors themselves realise which clothes are more important, or perhaps that changes in emperor and how the empire is run are more important than what clothes he wears. They call on their readers (who, it will be recalled, are primarily program managers and policy makers) to undergo a change in their "mental model or mindset" (p. 168). This includes, for example, changes in service organizations' behaviour which represent:

- Shifting from organization-based programs to community-based support systems;
- Changing from organizations as primary service providers to organizations as bridges to the community;
- Emphasising the critical role that direct support professionals play in enhancing personal outcomes (p. 174).

Readers of this journal may be tempted to the reaction 'you don't say,' as they reflect on their efforts on these lines over at least two decades, but if the authors' view that such changes are an inevitable result of the 'quality revolution,' and their status in the empire is such that the changes happen, then those same readers might say 'so be it.'

From a distance, therefore, this reviewer's perception is that the ideas, writers and policy makers that pushed concern for QOL measures to the forefront at the organization and systems level are more universal than just this narrow notion of

QOL affords. The forces of neo-liberal economics and managerialism were as much in evidence in the study of seven countries referred to earlier as the low chances of certain disabled groups being born. It therefore seems to be a matter of debate whether QOL measures are a way of deflecting change (or restricting potential change makers to those in the guild of psychometric tailors) or whether there can be a realisation of what the authors describe (p. 168) as an "emerging movement" for people to be "*both in and of the community*" (emphasis in original).

Ultimately, the initial foreboding described at the start of this review was transformed into a hope. This hope is that Schalock and his colleagues had, by the end of the book, echoed T.S. Eliot's words regarding a rather broader concept of the meaning of life than QOL:

> *We shall not cease from exploration*
> *And the end of all our exploring*
> *Will be to arrive where we started*
> *And know the place for the first time.*

References

Goode, D., Ed. (1994). *Quality of life for persons with disabilities: International perspectives and issues*. Cambridge, MA: Brookline Books.

O'Brien, J., O'Brien, C.L., & Jacob, G. (1998). *Celebrating the ordinary: The emergence of options in community living as a thoughtful organization*. Toronto: Inclusion Press.

Race, D.G. (2007). *Intellectual disability—Social approaches.* Buckingham: Open University Press.

Wolfensberger, W., Thomas, S., & Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux*, *2(2),* 12–14.

Dr. David Race is a Senior Lecturer at the University of Salford in the UK & a corresponding member of the North American SRV Development, Training & Safeguarding Council.

The citation for this review is
Race, D. (2008). Review of the book *Quality of life for people with intellectual and other developmental disabilities* by R. Schalock, J. Gardner, & V. Bradley. *The SRV Journal, 3(2),* 41–43.

• • •

Community-based Art Studios in Europe and the United States: A Comparative Study. By R.M. Vick & K. Sexton-Radek. *Art Therapy: Journal of the American Art Therapy Association, 25*(1), 4-10, 2008.

Reviewed by Susan Thomas

While I am not familiar with the art therapy literature, I would not be surprised if this were one of a minority of items in that literature that reference normalization and Social Role Valorization (pp. 4, 5, and 9), and that identify the medical- and sickness-imaging that come with the ideas of art as therapy. The authors sent a questionnaire to 22 "community-based, therapeutic art studio programs" (p. 5), 12 in Europe and 10 in the US, and compared their answers. (We are not told how many items were in the questionnaire, only that it included questions on mission statements, funding, participants, staff functions, range of services provided, and that the survey was done by email.) The survey followed a visit to a number of such programs in Europe by the first author. Fifteen completed surveys were returned, and from these, the authors tried to identify similarities and differences among the programs, focusing especially on comparisons between the two continents. In the European sample, there was much more emphasis on the art studio as similar to generic art galleries, and the participants in these studios as artists, whereas the US programs studied had much more of a "social service" emphasis–in SRV language, this would be phrased that the European programs were closer to the culturally valued analogue of art studios, ateliers, and galleries than the US programs.

Interestingly, the authors report that during the first author's European trip, almost all the studios he visited proclaimed, "We do not do art therapy!" (p. 4).

The differences were illustrated by the language used by the US versus the European programs, the names given to staff roles and the functions they were expected to carry out, and the differences in the stated purpose of the programs. For example, the US programs tended to use such staff terms as 'art therapist,' 'therapist,' 'wellness staff,' and 'group leader'–all terms implying a human service–while the names for staff for the European programs (translated into English) included 'art teacher,' 'artistic leader,' 'gallerist,' and 'manager.' And while all the programs tended to engage in some similar activities–the production of art by individuals and groups, holding exhibitions and having in-house art sales–there were also some significant differences in activities. For instance, more of the European programs held sales of participants' art in commercial galleries, and maintained a permanent collection of the art produced, whereas more of the American programs provided art and other 'therapy' and counseling.

Without using the term, the article repeatedly underlined a big problem of what in Social Role Valorization (SRV) is called model incoherency (Wolfensberger, 1998, pp. 111-118), meaning a mix of elements of a program that is not harmonious, that conveys multiple and conflicting messages, and that is not concordant with culturally valued analogues (Wolfensberger & Thomas, 2007, p. 30). For instance, many of the surveyed programs accepted anyone as a participant, whereas in 'real' art studios, a prospective artist would have to submit a portfolio of work, and have it judged. Similarly, many programs did not reveal the artist's name when a work was shown, in order to 'protect client confidentiality'–which of course is not how art is shown in the real art world. And sale of the work produced was beset by considerations of conflict of interest and professional art therapist ethics, which prohibit making a profit from the clients' work; but of course, a gallery manager, exhibitor, or agent for a 'real artist' would make a percentage on the sale of an artist's work, and the artist would earn something himself. Also, art therapy programs have historically been used for the purpose of 'diagnosis' of a client's problems or 'pathologies,' which is not the case in the real art world; and when the making of the art is valued primarily as a form of self-expression and the building of self-esteem, then how the eventual art product looks is minimized by art therapists–but in the real art world, how the art looks makes a big difference in whether there is an audience for it, how much it will bring at sale, etc.

All this raises a number of Social Role Valorization-relevant questions.

1. Are even studio-based art-as-therapy programs primarily therapy, or primarily the production of art? This has major implications to the proper culturally valued analogue for the program.

2. Are the participants in the program primarily in the roles of clients or service recipients, or are they in the role of artists; and if the latter, are they to be hobbyists or professional (i.e., career) artists? This itself raises questions about whether the impaired clients/artists will be able to make a living at it, since successful artists are few, and many have to earn their living doing something else. So exactly what roles should such programs try to cultivate for their participants?

3. If the programs are really about real art and the real role of artists, then should they not rid themselves of therapy and service concepts, imagery, and language?

References

Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W. & Thomas, S. (2007). *PASSING: A tool for analyzing service quality according to Social Role Valorization criteria. Ratings manual* (3rd rev. ed.). Syracuse, NY:

Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Susan Thomas is the Training Coordinator for the Training Institute for Human Service Planning, Leadership & Change Agentry, Syracuse University, Syracuse, NY, USA. She is the co-author of PASSING.

The citation for this review is
Thomas, S. (2008). Review of the article *Community-based art studios in Europe and the United States: A comparative study* by R.M. Vick & K. Sexton-Radek. *The SRV Journal, 3(2),* 43–45.

• • •

The Counterfeiters. By Stefan Ruzowitzky (Director). 98 minutes, 2007.

Reviewed by Susan Thomas

This German film, called *Die Fälscher* in the original, is based on the book *Die Teufel Werkstatt (The Devil's Workshop)*, and tells the story of Operation Bernhard, a counterfeiting operation run by the Nazis out of the concentration camp at Sachsenhausen. It is said to have been the biggest counterfeiting operation in history. While the basic story of the film is true–there was a Nazi counterfeiting operation run in the camp by inmates–it is not clear how many of the details in the film are true.

The outline of the story is this: Salomon (Sally) Sorowitsch, reputed to be Germany's best counterfeiter, and Jewish, was arrested and sent to the camp at Mauthausen in 1936. He had been trained as an artist, but preferred counterfeiting because he made much more money at it. At Mauthausen, starving, he sketched one of the guards, and because this picture was so well done, the guards recruited him to draw other portraits–and fed him well for it–and to paint murals on the camp walls. In 1941, he was transferred to Sachsenhausen, where the Nazis had established a full-time counterfeiting operation (Operation Bernhard), using the camp inmates to run it. Sorowitsch was apparently transferred there since he had the reputation of being the best counterfeiter, and the Nazis wanted him to be in charge of 'quality control' as they attempted to counterfeit first the British pound, and then the US dollar.

For over four years (till the liberation of the camps in 1945), they made and printed counterfeit money. The film reports that the Nazis made and fed into the world economy £132 million in fake notes, which was four times the amount the British government then had in reserve. The counterfeiting of the dollar was only accomplished late (early in 1945), because of sabotage by one of the inmate-counterfeiters who did not want to aid the Nazis, even though he knew that if they failed to produce the dollar, all the counterfeiters would be killed. In the chaos at the camps when the Nazis fled, and before the Allies arrived, Sorowitsch collected a huge amount of counterfeit dollars, which he then took with him to Monte Carlo. After using it to win lots of money at the casinos there, he then intentionally gambled it all away–feeding all the counterfeit into the coffers of the gambling casino.

While it may seem strange to examine the massive evil of the Nazi death camps from an SRV perspective, the film actually contained some SRV lessons.

First, obviously, the Jews and the political prisoners who ended up in the camps were so devalued as to be seen and treated as literally subhuman–"dirt," one guard calls them–and to merit only unremitting labor and death. People who in ordinary life had filled positively valued roles nonetheless became deeply devalued because of the negative imagery that was incessantly spread about them, e.g., that they were a danger to the nation, that they were vermin, etc. Thus, they were deprived of many of their valued roles (such as professional worker roles) and were congregated into ghettoes and camps.

However, at the same time, these now severely devalued people possessed the competencies that had been required to carry out their earlier roles, and it was these role-tied competencies that saved

those inmates who participated in Operation Bernhard. For instance, the inmates who were selected to be part of the operation were printers, artists, engravers, and people from banking and finance–and of course the known counterfeiter Sorowitsch. If they had not occupied these roles, and possessed the competencies that enabled them to carry out the roles, they would not have been chosen to make the counterfeit bills–and they would have been subjected to the horrid conditions of the labor camp, or gassed to death.

In fact, one of the workers in the project had not been a printer, but had lied and said he was in order to escape being sent to Sobibor camp. When his incompetence was discovered (because the bills he made were of such low quality), Sorowitsch lied for him to enable him to continue working in the relatively cushy conditions of the counterfeiting operation. Thus, their roles, and the perceived competencies that went with those roles, enabled them to get at least the 'less worse' things of life for a period of a few years, from those who were in a position to give or withhold them. The counterfeiters were given clean and soft beds to sleep in (albeit in a dorm-type barracks), more food than the other inmates, cigarettes, and they even had a doctor to attend to their medical problems. As one man put it, as long as they could produce the bills, they would be kept alive.

Of course, this operation took place during a war, and was carried out at a concentration camp, so the men were always in danger. For instance, if they became too sick to be a useful worker, they could be shot. And in any case, they expected that at the end of either the war or of the operation, the Nazis would kill them all.

Note too that not all their roles which made them val**uable** to the Nazis had been val**ued**. For instance, Sorowitsch was a convicted criminal, and a counterfeiter–roles that are usually not highly valued ones. Engraving, and being able to draw and paint, are ordinarily valued competencies, but putting these skills to use in order to make counterfeit money is usually not valued, but was valued within this unique and temporary subculture. The competencies tied to their previous roles became so desired–so positively valued–as to override their severe devaluation, at least temporarily and to a degree.

At least one of Sorowitsch's fellow workers in Operation Bernhard, a former banker, greatly resented that he had to work with (and under) this convicted criminal. So a person who had once held a valued role did not like being valued for the same reason–namely, possession of a certain set of skills–as a person who had previously held a devalued role. In fact, the one who had previously held a devalued role became even more valued than the others because of his consummate skills, and was given the highest supervisory position over all the other workers.

Susan Thomas is the Training Coordinator for the Training Institute for Human Service Planning, Leadership & Change Agentry, Syracuse University, Syracuse, NY, USA. She is the co-author of PASSING.

The citation for this review is
Thomas, S. (2008). Review of the film *The counterfeiters* by S. Ruzowitzky. *The SRV Journal, 3(2),* 45–46.

• • •

Cold Storage: Super Maximum Security Confinement in Indiana. By Human Rights Watch (www.hrw.org), New York, Washington, London, Brussels, 83 pages, 1997.

Reviewed by Joe Osburn

Human Rights Watch (HRW) is a 30 year-old nongovernmental organization (NGO) that investigates and publishes human rights abuses around the world, believing that such exposure will end, lessen, or prevent them. Its interests range globally from Afghanistan to Zambia, and across an array of imaginable ways to abuse the rights and dignity of human beings, from beating children in schools to selling them into sex-slavery. (One

notable exception to the latter array is the abuse suffered by aborted human babies: to the contrary, HRW considers it to be an abuse of the rights of women that convenient access to abortion is lacking in some parts of the world.) HRW communicates its findings through the popular media, its own regular news reports, and an extensive publications enterprise which prints numerous documents, of anywhere from article to book size, that treat issues in more depth.

HRW has long been interested in instances and conditions of rights abuses that occur in prisons, which are both prime venues and instruments of abuse in many societies. In the US, HRW has issued several reports on human rights violations in what are called "super maximum security facilities," or "supermaxes" for short. The first such report was the above 1997 monograph.[1] It is both well-written and well-documented, with more than 160 footnotes in its 80+ pages. It provides an overview of the development of "supermax" prisons as either stand-alone facilities or self-contained units of larger prisons, and notes that there were 57 such state and federal prisons in the US, including the two in Indiana which are the subject of this booklet. These were the Maximum Control Facility (MCF) in Westville, Indiana and the Secure Housing Unit (SHU) in Carlisle, Indiana. It also describes the physical layouts of these settings, the inmate populations, what a typical day is like for prisoners, the forms of control and abuse of prisoners, and the impact of these conditions on prisoners. It offers 25 recommendations for addressing the abuses it found.

The idea behind super-maximum security prisons is a simple one: "... the segregation of dangerous inmates allows inmates in other facilities to serve their time with less fear of assault; the extreme limitations on inmates' freedom in such facilities protects both staff and inmates; and the harshness of supermax conditions is believed to deter other prisoners from committing acts that might result in their transfer there" (pp. 19-20). The notorious Alcatraz prison established in 1934 to incarcerate "the nation's most desperate criminals and the federal prison system's worst troublemakers" (p. 17) was, in effect, the first US super-maximum security prison. It was closed in 1963, but pro-

A Note on the Word 'Status'

Descriptions of social devaluation, role theory, and Social Role Valorization typically incorporate the phenomenon of social status, both devalued and valued. The concept of status is mentioned throughout Wolfensberger's monograph on SRV. "It is the people who embody the opposite of what a society values who will be cast into devalued status" (Wolfensberger, 1998, p. 7).

The word 'status' means a position of standing in society, in a profession, and so on. It comes from the Latin verb *stare*, which means to stand.

The phenomenon of social status is intertwined with that of social roles. "A social role may be viewed as a combination of behaviors, functions, relationships, privileges, duties, and responsibilities that is socially defined, is widely understood and recognized within a society, and is characteristic or expected of a person who occupies a particular **position** within a social system" (Wolfensberger, 1998, p. 25; emphasis added). Ralph Linton in his book *The Study of Man* (1936) wrote "There are no roles without statuses or statuses without roles."

A related word is 'statusful,' which means something that has or confers higher social status. A related colloquial word is 'statusy,' which refers to possessing, indicating or imparting a high status.

[Source information primarily from the Oxford English Dictionary.]

vided the model for making the Marion (Illinois) federal penitentiary the country's highest security prison in 1978. Following a week-long riot there in 1983, in which two guards and an inmate were killed and many others injured, Marion went on 'lock down,' confining inmates to their cells 23 hours a day. This approach was so successful in reducing violence that it became the prototype for modern super-maximum security prisons: authorities in nearly every other state instituted the Marion model of extreme confinement, control, and surveillance in their own jurisdictions, spurring a super-maximum security prison construction boom in the 1980s and 1990s.

This means that everywhere in the country in both federal and state prison systems, "dangerous or disruptive prisoners are removed from the general population and housed in conditions of extreme social isolation, limited environmental stimulation, reduced privileges and services, scant recreational, vocational or educational opportunities, and extraordinary control over their movement" (p. 18). Some prisoners in super-maximum security facilities have been in this form of solitary confinement–what prisoners call "electronic zoos" and "high-tech cages"–for decades. (For example, see Eligon, 2008.) These terms are horribly apt characterizations of the constant scrutiny and control prisoners experience literally every second of their lives, but they do not capture the virtually total social isolation imposed on them, a degree of segregation more extreme than even that of caged zoo animals.

"The most striking thing about the cells at the MCF is their imposing doors. Made of solid steel, interrupted only by a small, approximately eye-level clear window and waist-level food slot, they effectively cut inmates off from the world outside the cell, muffling sound and severely restricting visual stimulus ... Each rectangular MCF cell measures twelve feet ten inches by five feet eleven inches and has a concrete ceiling, walls and floor. Its main furnishing is a poured concrete bed ... At one end of the bed ... is a rudimentary concrete desk; to use it, the inmate must sit on the bed, where he lacks back support. Above the desk is an extremely narrow window, like those used for cross-bows in medieval castles: impossible for a person to fit through. Next to the bed ... is a stainless steel combination toilet and sink ... MCF cells have fluorescent lighting and stark walls, painted ivory ... inmates may turn off one light and darken the cell somewhat, but a seven-watt fluorescent bulb stays on 24 hours a day" (pp. 24-25).

The indoor and outdoor "recreational areas" are equally void and constricting. Prisoners describe them as "oversized cells" or "dog runs." "Outdoor recreation areas merit their name only to the extent that being outdoors is defined by a narrow view of the sky and a breath of fresh air. Standing in the outdoor area is akin to being at the bottom of a well" (p. 27). Recreation is often cancelled for reasons of punishment or weather. The prisoners' days consist of "unremitting idleness." They are allowed material possessions of only very constricted types and amounts. For example, prisoners in the SHU "were only allowed to keep the flexible inner cartridge of ballpoint pens; their hard plastic shell was confiscated for security reasons" (p. 26).

One big issue with HRW is that a large proportion of prisoners in both the SHU and MCF (and in all other super-maximum security facilities) is seriously mentally ill. SHU personnel estimate that as many as two-thirds of the inmates fall into this category. Diagnoses include schizophrenia, delusional disorders, schizoaffective disorders, bipolar disorders, major depressive disorders, and other unspecified psychotic disorders. "These illnesses are not manifested in subtle symptoms apparent only to the discerning professional: these prisoners rub feces on themselves, stick pencils in their penises, stuff their eyelids with toilet paper, bite chunks of flesh from their bodies, slash themselves, hallucinate, rant and rave or stare fixedly at the walls" (p. 34). Under conditions of such extreme mental duress, even the strongest and healthiest individuals often crack. It is no wonder then that those with already wounded psyches

would be most likely to fall to pieces. Many mentally impaired people end up in prisons, where their symptoms are exacerbated by the regime of life there, which most can neither understand nor tolerate, their mental health further deteriorates, and at some point sooner or later, the most mentally impaired people end up in super-maximum security facilities because of the behaviors they emit in response to the conditions imposed on them. It is a vicious spiral downward. On top of this, these facilities have neither the means nor the will to provide treatment to mentally ill prisoners. When such prisoners act out, guards charged with controlling them have recourse only to force, which quickly ratchets up to violence. "In a statement released to the public, one SHU inmate asserted that another inmate: 'had been beaten repeatedly by the guards here. The man obviously had some psychological problems because he defecates and rubs the feces all over his body. The guards think it is funny and continue to harass him daily' " (p. 35).

What does all this have to do with Social Role Valorization (SRV)?

Well, a good deal actually, far too much to expound here, so I will mention only four major points of relevance. **First** of all it is helpful to keep in mind that SRV is formulated to improve the lives of individuals, groups, and entire classes of people, especially those who are societally devalued. As such, SRV has extensive applicability to prisoners, and perhaps even most especially to "the worst of the worst," as those in super-maximum security prisons are labeled (p. 47).

Even within confinement, much could conceivably be done to valorize the roles (and potential roles) of prisoners, perhaps most especially in the very broad area of competency enhancement: the acquisition and honing of practically all kinds of skills and abilities, the development of vocational interests, the nurturing and increasing of bodily, mental, spiritual, and intellectual capacities, the enhancement of social and relationship competencies, and more, not to mention all conceivable ways to enhance the image of these deeply stigmatized people. (For more detailed explanations of the applicability of SRV to imprisoned people, see Williams, 1999, and Wolfensberger, 1999.)

Second, in SRV training, we teach about human service models, especially the 'developmental model,' with all of its positive assumptions about human beings and their potentials, and about the major implications for nurturing growth and fulfillment in people. We briefly mention as well that there are other human service models besides the developmental model. One of these other models we call 'menace-detentive.' Super-maximum security facilities are perhaps the ultimate manifestation of the menace-detentive model. In fact, the detention and extreme control over the lives of people perceived as being the most menacing in our society is the very reason why these settings exist.

Third, Social Role Valorization incorporates the powerfully important concept of "model coherency" (Wolfensberger, 1993), which briefly says that a service model is coherent to the extent that all four of its major elements blend together harmoniously to address the needs of the service recipients. Thus: (a) the assumptions and beliefs that underlie a service (the first model element), including what is believed about the people served and what ought to be done to, with, or for them; (b) should be consistent with the people it serves (the second model element); (c) the service content (the third model element), i.e., what it provides, should match both its fundamental assumptions and the perceived needs of the people served; and (d) the service should use processes (the fourth model element), i.e., methods and technologies, settings, groupings, service workers, and language, that match the service content.

A service model can be highly coherent or incoherent. Coherent service models are almost always very powerful. And, a highly coherent service model can be powerfully adaptive or powerfully destructive, depending upon whether it is based on positive or negative assumptions. Super-maxi-

mum security prisons are highly destructively coherent: what they do (the third model element) to the people they 'serve' (the second model element) and how they do it (the fourth model element) perfectly match what they think and believe (the first model element). We also teach in SRV that human services reflect their society, particularly its values. Thus, the operational assumptions of super-maximum security prisons mirror those of major sectors or our society. "Some people in the United States believe that prisoners, especially those who have committed acts of violence while in prison, have forfeited their rights and deserve to be treated, as one Texan warden declared bluntly, 'like animals' ... Besides evidencing little respect for human dignity, such views are also unwise. Most inmates in super-maximum security prisons will one day be released back into local communities. If these people have been abused, treated with violence, and confined in dehumanizing conditions that threaten their very mental health, they may well leave prison angry, dangerous, and far less capable of leading law-abiding lives than when they entered" (p. 2).

Fourth, in SRV training and literature, we are careful to point out two key general facts or caveats about SRV. One is that SRV is a social science concept in the empirical realm; it provides excellent guidance to those who want to help people grow and develop, be better thought of by others, and experience the good things in life (Wolfensberger, Thomas, *&* Caruso, 1996). The other is that decisions about whether and how to use SRV are determined by people's higher-order beliefs, which are above or outside of SRV (see, for example, Osburn, 2006). An implication of the latter is that SRV could be used by people for either beneficent or pernicious ends. If someone wanted to further impair, devalue, wound, ruin, or destroy another party, then SRV offers guidance on how to do it systematically and comprehensively; they would simply have to invert all SRV assumptions, principles, and strategies, and employ what might be called 'anti-Social Role Valorization.' In effect, this is what super-maximum security prisons have done. However, it is almost certain that few, if any, of those responsible for these facilities have ever heard of SRV. "The confinement of persons who are mentally ill in these facilities is particularly reprehensible. In Indiana, as throughout the United States, increasing numbers of mentally ill people are ending up in prisons that are not equipped to meet their mental health needs. Mentally ill people often have difficulty complying with rules, especially in prison settings where the rules are very restrictive and the stresses are intense. Many are aggressive or disruptive and, as a result, accumulate disciplinary records that land them in segregated confinement in super-maximum security facilities ... For some mentally ill inmates, confinement in super-maximum security conditions is a horror" (p. 11).

The recommendations proffered by HRW are well-matched to its analysis of the problem. They include both legislative and administrative suggestions, i.e., "The Indiana Legislature should …"; "The Department of Correction should …" The two main recommendations are that mentally ill prisoners should be kept out of such facilities, and that the harsh conditions for other prisoners in them should be lessened. In contrast to some types of service assessments which offer recommendations that are either too general or low-level, HRW's recommendations for addressing the problems it found in these prisons are almost as incisive as its analysis of the problem, with one major exception, which to my mind is the most noticeable weakness of this monograph.

As sensible and necessary as its analysis and recommendations are, HRW does not adequately address the most essential requirement for bringing about change in the situation, which is a reversal of the mentality from which these settings flow. They are a near-perfect actualization of the desire to lock up such people, throw away the key, and cause them to suffer. They express not ambivalence, but vengeance. In SRV, the power of mind-sets and expectancies is a fundamental

concept: what people hold in their minds about others determines how they treat them. Short of a widespread change in the negative attitudes many or most people harbor toward despised criminals, super-maximum security prisons will continue to exist and to be constructed. In fairness, mapping out how such social change might be brought about would have made this monograph much longer, possibly even a book; however, it probably would not be beyond the purview of HRW itself to offer advice about this in some other way. For instance, what, if anything beyond simple exposure of the facts, would incentive the Indiana legislature or administration to do what HRW says they should do? Or, why not recommend that a small 'project' built on positive assumptions about prisoners be undertaken to demonstrate the more humane and socially contributive possibilities? Yet, despite this weakness, this is a worthwhile and informative document which anyone interested in the plight of the imprisoned should read.

As a sort of postscript to this review, I had contacted HRW requesting its assessment of the impact of this and other related documents on practices in super-maximum security prisons, but have not (yet) heard back from it.

Endnote

1. More recent HRW reports on super-maximum security confinement include *Out of Sight: Super-Maximum Security Confinement in the US*, and *U.S.: Red Onion State Prison: Super-Maximum Security Confinement in Virginia*.

References

Eligon, J. (2008). Two decades in solitary. *New York Times*, 23 September 2008.

Osburn, J. (2006). An overview of Social Role Valorization theory. *The SRV Journal, 1(1)*, 4–13.

Williams, P. (1999). An exploration of the application of Social Role Valorization in special hospitals. *Journal of Psychiatric Mental Health Nursing, 6*, 225-232.

Wolfensberger, W. (1993). Model coherency impact rating. (Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry, 800 South Wilbur Avenue, Suite 3B1, Syracuse, New York 13204 USA).

Wolfensberger, W. (1999). The application of Social Role Valorization principles to criminal detention. Paper presented at the *2nd International Conference on Social Role Valorization*, 1-4 June, in Boston, MA, US.

Wolfensberger, W., Thomas, S., & Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux, 2*(2), 12–14.

JOE OSBURN is the director of the Safeguards Initiative in Bardstown, KY, USA, and a member of the North American SRV Council.

The citation for this review is
Osburn, J. (2008). Review of the book *Cold storage: Super maximum security confinement in Indiana* by Human Rights Watch. *The SRV Journal, 3(2),* 46–51.

• • •

little people BIG WORLD. By The Learning Channel. Television series (season 5, aired March 2008).

Reviewed by Susan Dewick

Introduction

Myriad messages from print, visual, and auditory text surround us daily. Some reinforce our stereotypes, expectancies, and negative assumptions of the socially devalued. Others make us reflect on and change our perceptions because of the way the party (an individual or group) is portrayed. These portrayals are created by imagery that influences our perceptions. Images can become a major factor in the formation of social judgments about the roles a devalued party may fill.

In this paper, I examine the portrayal of individuals with dwarfism (achondroplasia and dia-

strophic displasia) as seen on a television series on The Learning Channel (TLC). Are these portrayals different from depictions of people with dwarfism in film and on television in the past? I provide a brief overview of the reality show series, *little people BIG WORLD*, which explores the lives of the Roloff family. Both parents (Matt and Amy) and one of their four children (Zach) have the disproportionate type (achondroplasia) of dwarfism. Matt also has diastrophic displasia, which affects the joints and cartilage and makes it difficult for him to walk. I will present a synopsis of the two specific episodes analyzed.

Other questions I have considered about this particular television show include: Are these portrayals to be considered solely entertainment or can they be watched to help raise awareness and therefore contribute to deviancy unmaking? Is social devaluation occurring despite attempts at valorization? Are attempts at role valorization made because of moral considerations (as the right thing to do) or because of political correctness? Is intent even an issue? (I do not imply that the producers of the show are consciously trying to apply SRV.) If the intent of the program is not connected to the conscious valorization of the social roles of Matt, Amy, and Zach, does it still accomplish this valorization successfully because of the impact on the viewer?

Social Role Valorization Themes

Related to Social Role Valorization, W. Wolfensberger identifies ten themes, empirical realities and scientific evidence that "play a crucial role in helping people to understand wounding, deviancy-making, [and] role degradation" (1998, p. 103). Wolfensberger believes that by learning about these themes the observer will be able to analyze what is happening to a specific party and determine the best course of action to prevent or respond to situations of social devaluation. Social Role Valorization (SRV) is an active system used to "address the plight of people who are devalued by others" (Wolfensberger, 2000, p. 105). SRV can be broken down into specific approaches that incorporate these ten themes.

In the context of this analysis, my focus is on the SRV themes of:

1) unconsciousness and consciousness raising [making people more aware of their thinking and perceptions];

2) role-expectancy and the connection to deviancy-(un)making [the characteristics and abilities assigned to specific individuals in specific roles, including individuals seen in historically deviant roles];

3) interpersonal identification [seeing ourselves in those who are devalued, e.g., by focusing on the things we have in common rather than the differences];

4) compensation for devalued status [by showing the party in the most valued role possible. This is Wolfensberger's conservatism corollary, "the concept of positive compensation for devalued status" (1998, pp.124-127)]; and

5) social imagery [by changing perceptions about a party in areas such as physical setting, groupings with other people, personal imagery, language, and activities and time use, then responses and behaviors towards that person will change].

A Brief Historical Overview of the Portrayal of 'Dwarves' in Film & on Television

This is not a comprehensive review of all the film or television texts that have been created where those with dwarfism have had a role, yet a look at what specific deviancy roles have been reinforced over time will help determine if *little people BIG WORLD* is a positive evolution. Even when a portrayal emphasizes positive charactersistics associated with the valued role of the hero, as in *Willow* (1988, Ron Howard), *Simon Birch* (1998, Mark Steven Johnson) or *The Lord of the Rings* (2001, Peter Jackson), there are often many aspects of social devaluation still evident. The question I want to answer is whether any of these negative roles are evident in *little people BIG WORLD*: Is Matt, or Amy, or Zach, ever presented in this way?

Historical Deviancy-making Roles

The portrayal of people with dwarfism in film is largely divided into a number of limited deviancy roles in specific genres of film. Fantasy, science fiction, horror, and the circus film are the prevalent genres in which people with dwarfism appear. The roles include 'the child,' the 'non-human,' the 'menace,' and the 'object of ridicule.' There also are many 'servant' roles in which status in relationship to the main character is devalued.

The child role. Portrayals include the childhood classics *Snow White and the Seven Dwarfs* (1937, Walt Disney), *The Wizard of Oz* (1939, Victor Fleming) and *Willy Wonka and the Chocolate Factory* (1971, Matt Stuart). Characters are seen in clothing not associated with adults and are given singing parts and comedy roles. They are also subservient to the main character, who is of 'normal' stature. The protagonists are often seen protecting the 'dwarf' character(s) from threat.

The non-human role. Actors with dwarfism are often hired to portray creatures, thereby associating shorter stature with animal or alien characteristics. An example would be the Ewoks in *The Ewok Adventure* (1984, John Korty). This also includes robot roles, as in the Star Wars trilogies (e.g. *Episode IV: A New Hope*, 1977, George Lucas).

The menace. On a recent episode of *The Wizards of Waverley Place* (2008, Disney), the threatening killer in a horror movie, even though purposefully stereotyped, is a person with dwarfism who wears a grotesque mask, carries a weapon (albeit a hair dryer) and hunts down the main characters. The association of the dwarf as someone to fear reinforces our negative responses and justifies any violent behavior as being protective.

The object of ridicule. If you make a circus film, it seems obligatory that a 'dwarf' is included as one of the performers. This may be historically valid, given time periods when there were very limited jobs available for people with dwarfism, yet it illustrates a freak show mentality, where we accept the existence and actions of people with dwarfism as entertainment. The film *Roustabout* (1964, John Rich), in which Elvis joins a carnival, likely had widespread debilitating effects upon the perceptions of the capabilities of people with dwarfism, because of the numbers of people that saw the film.

The servant. The lower social status associated with servants is reinforced when the servant is a devalued person. This often leads to the party becoming an object of ridicule, as in the case of Tattoo in *Fantasy Island* (1978-1984, Aaron Spelling). The actor, Herve Villechaize, became a victim of self-parody with his repetition of the catchphrase, "De plane! De plane!" The Mini Me character in the Austin Powers movies (*International Man of Mystery*, 1997 and *Goldmember*, 2002, Jay Roach), doesn't even warrant his own name or personality.

Overview of the Series & Synopsis of Episodes

The weekly TLC television series *little people BIG WORLD* depicts the everyday lives of the Roloff family–Matt, the father; Amy, the mother; Jeremy and Zach, twin teenage sons; Molly, the younger daughter; and Jake, the youngest son. The focus of the series is on the daily routines and ins and outs of family life. Each episode tends to focuses on an issue that Matt, Amy, or Zach is experiencing. As these three seek to find a way to adjust to the expectations of the typical world about work, play, and family activities, the viewers are witnesses to obstacles they must overcome and the strategies they have used to become successful participants. Of particular interest is how the parents attempt to help Zach find his place in the world, as he looks ahead to his own future. In conjunction with the series is the website at tlc.com that provides personal profiles, Matt's chats, Zach's soccer facts, and games and puzzles.

The subjects of previous episodes have included: family vacations; Matt's establishment of his own business; Matt and Zach attending an annual convention for Little People; Amy coaching Jake's soccer team; the relationship between Jeremy and

Zach as twins; Zach's hospitalization to replace his shunt; and background to Matt's and Amy's lives, including how they met and married. The youngest children, Jake and Molly, are rarely featured as the focus of an episode.

Two episodes (viewed on July 6, 2008) take the viewers into the courtroom as Matt is tried for driving under the influence of alcohol. They detail the family's responses as the trial is conducted over a four-day period. Questions of whether Matt is guilty or innocent are raised and examined. The family's reactions to the proceedings and to the verdict–acquittal by the judge based on lack of evidence beyond a reasonable doubt of guilt–are also explored.

Analysis: What is the Portrayal? Is Social Devaluation Perpetuated?

The potential of the series to enhance the image of people with dwarfism is dependent upon the producers' decisions about what is shown. The issue of social devaluation is addressed by the very existence of the show. On the one hand, the voice-overs and on-screen interviews with the family members are successful overall at portraying the Roloffs in valued roles. As a consultant for the show, Matt Roloff's advocacy role is reinforced; viewers know that he is the former president of Little People of America (tlc.com, 2008) and is still active in the organization. Yet there are problematic issues when some of the actual images shown, in juxtaposition to the words being said and the competencies being highlighted, are confusing or contradictory.

Unconscious Perceptions

The trial episodes raise consciousness of our perceptions and how they are formed. The arresting officer is compelled, through questioning, to examine his reasoning behind the judgment call he made in arresting Matt for driving under the influence. The officer began to realize that his decision may have been made based more on a response to Matt's obvious dwarfism rather than the facts as they presented themselves. When the defending attorney asks why the arresting officer did not use the battery of three standard roadside tests to determine sobriety, he answers that he didn't think that Matt could do it. At this point, the attorney emphasizes that the officer did not ask Matt if he could stand on one leg, even though there was "no body instability, no slurring, no flushed face, and no stumbling" (*little people BIG WORLD*, 2008). The arrest is made based on the smell of alcohol on Matt's breath and failure of the horizontal gaze test in which Matt's eyes 'jerked around' when following the officer's finger. Matt admitted to drinking one beer four hours earlier.

Matt explained during his arrest that the pedal extensions in Amy's vehicle were different from his vehicle and that this was the cause of his swerving across the line. When questioned at the trial, the officer stated that he could not understand why driving Amy's van instead of Matt's own vehicle would have caused Matt to weave across the line. The judge eventually acquitted Matt after calling a mistrial, because the horizontal eye gaze test is only 77% accurate, thus not fulfilling the parameters of reasonable doubt.

As I (and the jury members and the audience) reflect on what I might have done if in the same position as the arresting officer, the SRV theme of consciousness raising is illustrated. Would I also have assumed that Matt would not be able to stand on one leg? Are my perceptions of the abilities of the disabled such that I would not have bothered to determine what he could actually do? By making the viewer think about these questions, the episodes successfully raise awareness of these common negative assumptions.

Role Expectancy

The series does mostly combat the negative perceptions of historical deviancy roles. The Roloffs have many valued roles and are shown as capable of performing the tasks required for these roles. In Amy's case the episodes focus on her role as dedicated mother and supporting wife. In Matt's case

his role as businessman and bread-winner for the family are emphasized. In Zach's case his primary valued role is that of a soccer player.

Amy is never shown in a childlike role. She displays her sound judgment, sense of humour, and a caring demeanor. She is seen planning meals and lunches, driving the kids to school and practices, interceding whenever there is squabbling among the siblings, supporting the children when they have questions or worries, and instructing them with life's lessons. She talks to the children about what their thoughts and feelings are about their father's situation and answers their questions and reassures them.

Matt's breadwinner role is emphasized when he refers more than once to his family's dependence on his ability to earn money to support them. He states that "his life is in the [jury's] hands, his future, and his reputation" (*lpBW*, 2008). His concern over his reputation is related to his work and being able to maintain credibility with his clients in order to sell his products. His business acumen and skills are highlighted. The fact that he has been successful enough in the past to provide the 'good things in life' (Wolfensberger, Thomas, *&* Caruso, 1996) for his family demonstrates his competency in this valued role.

Zach's soccer-playing skills are highlighted throughout the series. In the show opening he is seen completing skill drills, and on the website for the series he has his own section on soccer facts. Since he is still a teenager and has not acquired many other social roles, this one is used almost exclusively. One danger is that this perception can be limiting; its overemphasis takes away recognition of his other qualities. For example, in the trial episodes he is seen as the leader of the family when Amy and Matt are away at court, even though his brother Jeremy is his same age.

Interpersonal Identification

What are we shown about the Roloffs with which we can identify? We see them completing the mundane activities all of us do in our daily lives. They eat breakfast together, go to school or work, and do chores. We see Zach and his siblings worrying about what will happen to their father at the trial and Amy going to court to support him. Before the trial Matt is filmed speaking about his faith in God and the family prays that the truth will prevail. In their valued roles of mother, father, and son, we are able to connect to the expectancies of each of these roles because we ourselves may fill these roles in our own life. This is one of the stronger and more compelling aspects of the portrayals, as the family demonstrates that they are just like any other family. In my roles as mother, breadwinner, and athlete, I can relate to all the members of the family because I am familiar with the skills required and have experience with the commitment, hard work, and patience needed to fill the role effectively.

Compensation for Devalued Status

Are the valued roles emphasized in the series the most valued roles that each individual could fill? Not entirely, but overall, the choices have been positive ones that do work successfully at reinforcing positive characteristics.

In Amy's case, some stereotypical activities associated with being a wife and mother are repeated. For example, we see her making breakfast every morning, taking the kids to school every morning, and watch as she ices a chocolate cake for a celebration after the trial. She talks about having to put Matt to bed (as he needs physical assistance). However, it is when she is acting in her role as confidant and supportive guide to the children that we see the success in emphasizing her nurturing role.

In Matt's case, the fact that he is a successful businessman who owns a 34-acre farm and supports his family does much to compensate for the negative perceptions that people with disabilities need charity or financial support. He is not often portrayed in the father role, perhaps because he tends to be authoritarian in his approach to parenting, so the valued role of self-employed busi-

nessman is the most prominent in the show. He can also be argumentative and confrontational (a characteristic mentioned during the trial), so the producers apparently try to not show him when he is exhibiting these negative traits.

Along with Zach's role as an athlete, it would be valuable for him to be seen considering his career plans and making decisions about how he will become self-sufficient. This is a question that Matt himself often raises. It would also be more helpful for Zach's image to see him more involved in advocacy roles, as a student, as a responsible son and brother, as a friend and boyfriend, and so on.

Social Imagery

Some of the unconscious messages in the television episodes reinforce the devaluation consistent with deviancy roles. I will examine the physical setting, groupings with others, personal imagery, language, and activities and time use that may send devaluing messages to the viewer.

Physical setting. The Roloff home is a newly built large house situated on a hill on a 34-acre farm near Portland, Oregon. Matt talks about wanting to give his children a playground. The landscape reinforces this image and the children are often seen playing and riding around the farm. Unfortunately, the farm is designed as a wonderland–with a castle, tree house, western town, mineshaft, and playground equipment. This could lead to an association with the historic deviancy role of people with dwarfism being childlike and magical creatures.

Another (unconscious) message is that the farm is isolated in a sense from a larger community, just in the nature of being a farm. When Matt says that they are "making their own life" (*lpBW*, 2008) in the opening credits, it could be perceived that he is purposefully separating his family from the real world, perhaps to protect them from wounding experiences.

Groupings with others. Since Matt has lost his license and cannot drive, he has an assistant who drives and who accompanies him to the courtroom. We watch as the assistant Becky walks behind Matt on the steps at home, warning him, "Don't slip. Be careful, man" (*lpBW*, 2008). She helps him into the car and drops him off in front of the courthouse. When waiting in line outside the courthouse she opens up her coat and places it over Matt's head to protect him from the rain. All of these images reinforce his perceived dependence on her. The most telling image is when the camera stays focused on Matt and Becky as they are walking away side by side at the end of the day. The fact that Becky is a tall and large woman further emphasizes Matt's small stature. This unconsciously reinforces child associations and the perceived need for protection.

In the opening credits of the show Zach is shown with Jeremy, his twin. Zach zooms through Jeremy's legs while sitting on a skateboard and then climbs on him. As they walk away, Jeremy holds his arm straight above Zach's head. All of this emphasizes the difference in their size; despite being twins and the same age, these images reinforce the perception that Zach is younger than Jeremy. The children are also lined up at the end of the opening credits by size rather than age, which means that as Molly and Jake have grown, Zach's position has been moved down the line. This is another likely unconscious act of devaluation.

Personal imagery. Much is done to promote the status of Matt and Amy via their personal appearance. Amy usually wears pants and shirts, but is feminized with earrings and a stylish haircut. Matt is seen wearing a suit or in a dress shirt and pants; his hair is always impeccable. Zach is neat and tidy, but could do with some help with typical teenage issues like wearing the same clothes two or three days in a row. He is also often shown with the ubiquitous soccer ball in his hand. The fact that the Roloffs are middle class and own their own farm, home, vehicles, and furniture reinforces their economic status as well as their role as contributing paying members of society.

When Matt appears in the courtroom, his perceived dependency and difficulty in functioning

are highlighted. With camera angles that focus on his feet dangling above the floor when sitting in the defendant's chair, his smallness is overemphasized. By his use of crutches to walk, rather than the motorized chair he often uses, the effect of his physical disability is made more obvious. When he holds up his right hand to take the oath he keeps the crutch on his arm. This is unfortunate as it makes the jury members focus on his physical disabilities.

Another aspect of personal imagery is personal autonomy. Much of the show focuses on the decisions that Matt and Amy make in their lives and for their families. They are usually seen as in control when they solve problems. The trial takes away from that sense of control, but the family is seen as dealing with the situation in a calm and reflective manner and with a sense of their ability to deal with whatever the outcome might be.

Language. The term 'little people' is problematic. Although accepted by those with dwarfism because of the negative connotations attached to the term dwarf or midget, the term can lead to reinforcement of the child-like deviancy role. Hearing the term used could definitely lead to perceptions of not being able to do normative activities because of small size and lack of strength. The dichotomy emphasized in the title of the series (with little people in lower case and BIG WORLD in upper case letters) further reinforces this association.

When Amy talks about the "obstacles and challenges" she, Matt, and Zach face (*lpBW*, 2008), the accompanying images show them doing typically normal activities like operating a caterpillar machine, closing the rear hatch of the van, and riding a bike. The intent is to see these as situations of independence and competence, but the difficulties are also being highlighted. This can be confusing. Am I to feel sorry for them because of these troubles? Or am I to applaud them for confronting and managing them? Or am I to take on an advocacy role myself and press for the need for accommodations, like pedal extensions on vehicles that could enable them to drive?

Activities and time use. The focus on Amy's use of time in the mother role is effective at reinforcing her adult role and the role of nurturer and protector. Matt is often seen traveling for business purposes, whether by car or plane. He is also often seen on the phone or with clients. These activities are used to reinforce his role as a contributing member of society. For Zach, the emphasis on sports activities and other physical deeds such as driving the truck to pick up pumpkins is effective in highlighting his role as active teenager. Work, chores, school, and family responsibilities tend to take up most of his day. These activities reinforce identification with the Roloffs as many of the viewers compare it to their own lives.

An Evaluation of the Show's Success in Promoting Positive Perceptions

The series does a great deal towards promoting positive perceptions about people with dwarfism, as represented by the Roloff family. They are self-sufficient enough to own their own home and support themselves, to work and to manage their own affairs. Matt's previous success as a software salesman and as author of the book *Against Tall Odds* (tlc.com, 2008) enabled him to have the financial security to establish his family in their dream home. Is their experience a typical one for people with this condition? This factor must be considered when thinking about whether the show will help change the perceptions of what people with dwarfism are capable of doing.

The show is adept in compensating for the historical deviancy associations related to our unconscious responses, often due to negative perceptions portrayed in other film and television. The valorization is effective by showing the family members in daily activities and in specific roles with which the viewer can identify. Independence, autonomy, and taking control of their lives are emphasized. Whether it is through starting a business, completing tasks like driving and household chores themselves and without the help of others, or making decisions about their children's future,

Matt and Amy demonstrate how competent they are. This illustrates the power of competency enhancement as a means to change people's perceptions and therefore increase the opportunity for devalued individuals to fill valued roles.

Despite a few problems with filming techniques and images that unconsciously negate some of the positives, overall the series is highly successful at making the viewer realize that the Roloffs are indeed, as Amy states, living " an ordinary life." We are able to understand that they can "pretty much do what everyone else does, but just in a different way" (*little people BIG WORLD*, 2008).

I do not perceive the series just as entertainment, but as a valid attempt to raise consciousness about our preconceived expectancies and stereotypes. It is a positive evolution to the historic portrayal of people with dwarfism on film. We are not shown scenes that would be considered making fun of any of their situations. The family has control over what is shown and what is not filmed and they are never exposed in ways that would demean or ridicule their behaviors.

Conclusion

The producers of film and television portrayals of individuals in historically devalued roles, like those with dwarfism, should consciously attend to the specific ways they can change perceptions by using image enhancement and an emphasis on competency in valued roles. Since these portrayals are visual, it is necessary to ensure that the images used to portray the individuals support and reinforce the role valorization being attempted.

Series such as *little people BIG WORLD* are doing much towards advocating the right for persons with disabilities to gain the 'good things in life' that we all want. The human right to be treated well and with respect, no matter what the disability, is reinforced. If done in an effective and purposeful way, as this series clearly demonstrates, there is no question that film has the power to help change society.

Editor's Note: *Please see Wolfensberger's column for a related item (pp. 67-68) on dwarfism.*

References

Fleming, V. (Director). (1939). *The Wizard of Oz*. USA: MGM.

Greenwald, T.J. (Creator). (2008). *The Wizards of Waverley Place*. USA: It's a Laugh Productions.

Hand, D. (Director). (1937). *Snow White and the Seven Dwarfs*. USA: Walt Disney Productions.

Howard, R. (Director). (1988). *Willow*. USA: Imagine Entertainment.

Jackson, P. (Director). (2001). *The Lord of the Rings.* New Zealand/USA: New Line Cinema.

Johnson, M.S. (Director). (1998). *Simon Birch*. USA: Caravan Pictures.

Korty, J. (Director). (1984). *The Ewok Adventure*. USA: Korty Films.

Little People Big World. TLC website. Accessed on 12 July 2008. http://www.tlc.discovery.com.

Lucas, G. (Producer & Director). (1977). *Star Wars Episode IV: A New Hope*. USA: Lucasfilm.

Rich, J. (Director). (1964). *Roustabout*. USA: Hal Wallis Productions.

Roach, J. (Director). (1997). *International Man of Mystery*. USA/Germany: Capella International.

Roach, J. (Director). (2002). *Goldmember*. USA: New Line Cinema.

Rosenthal, G. (Producer). (2008). *little people BIG WORLD*. USA: Discovery Communications, Inc.

Spelling, A. (Producer) & Levitt, G. (Creator). (1978-1984). *Fantasy Island*. USA: Columbia Pictures Television.

Stuart, M. (Director). (1971). *Willy Wonka and the Chocolate Factory.* USA: David L. Wolper Productions.

Wolfensberger, W. (1998). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (3rd

ed.). Syracuse, NY: Syracuse University Training Institute for Human Service Planning, Leadership & Change Agentry.

Wolfensberger, W. (2000). A brief overview of Social Role Valorization. *Mental Retardation, 38*(2), 105-123.

Wolfensberger, W., Thomas, S., & Caruso, G. (1996). Some of the universal 'good things of life' which the implementation of Social Role Valorization can be expected to make more accessible to devalued people. *SRV/VRS: The International Social Role Valorization Journal/La Revue Internationale de la Valorisation des Rôles Sociaux, 2*(2), 12–14.

SUSAN DEWICK has almost 20 years experience as a teacher. She is currently working towards a 'Special Education Certificate (Post Bachelor's in Education)' at the University of Manitoba.

The citation for this review is

Dewick, S. (2008). Review of the television series *little people BIG WORLD* from The Learning Channel. *The SRV Journal, 3(2),* 51–59.

List of Possible Items to be Reviewed

In each issue of *The SRV Journal*, we publish reviews of items relevant to SRV theory, training, research or implementation. These include reviews of books, movies, articles, etc. We encourage our readers to look for and review such items for this journal. We will be happy to send you our guidelines for writing reviews, or they are available on our website (http://www.srvip.org/journal_submissions.php). We are open to reviews of any items you think would be relevant for people interested in SRV. We also have specific items we are seeking reviews of. (We strive to include items which might have relevance to: SRV theory, one or more SRV themes, and/or social devaluation. If, however, a reviewer finds that a particular item is not so relevant, please let us know.) These items include:

Social Inclusion at Work. By Janis Chadsey. Annapolis, MD: AAIDD, 49 pages, 2008.

Older Adults with Developmental Disabilities. By Claire Lavin & Kenneth Doka. NY: Baywood Publishing Company, 151 pages, 1999.

The Shame of the Nation. By Jonathan kozol. Three Rivers Press, 432 pages, 2006.

Body and Soul: Diana and Kathy. By Alice Elliott (Director). 40 minutes, 2006.

Taylor's Campaign. By Richard Cohen (Director). 75 minutes, 1998.

Rolling. By Gretchen Berland (Director). 71 minutes, 2004.

Waiting for Ronald. By Ellen Gerstein (Director). 2003.

Adams, J. 'Use of specialist occupational therapists within residential learning disabilities: A justified case?' *British Journal of Learning Disabilities, 28*(1), 16-20 (2000).

Ho, A. 'Disability in the bioethics curriculum.' *Teaching Philosophy*, *30*(4), 403-420 (2007).

Who Gets Born? Published by Toi te Taiao: the Bioethics Council. Wellington, New Zealand, 64 pages, 2008.

A Way with Words and Images: Suggestions for the Portrayal of Persons with Disabilities. Published by Social Development Canada, 10 pages, 2002.

Kleinert, H., Miracle, S., & Sheppard-Jones, K. 'Including students with moderate & severe intellectual disabilities in school extracurricular & community recreation activities.' *Intellectual and Developmental Disabilities, 45*(1), 46-55 (2007).

Inclusive Livable Communities for People with Psychiatric Disabilities. Published by the National Council on Disability. Washington, D.C., 84 pages, 2008.

Workshop Calendar

This calendar lists upcoming SRV & PASSING workshops we are aware of, as well as a number of other workshops relevant to SRV. Each event varies in terms of length & depth of coverage of material; contact the person listed to make sure the workshop fits what you are looking for. Additional training calendars may be accessed at *www.srvip.org & www.socialrolevalorization.com.* To notify us of SRV, PASSING & SRV-related workshops for upcoming issues, send information to: *journal@srvip.org*.

An Introduction to SRV: A High-Order Schema for Addressing the Plight of Devalued People (*with an emphasis on developing leaders in SRV*)
January 26-29, 2009
Sandusky, Ohio, US
call Bob Weinhardt ~ 419.626.1110

February 2-5, 2009
Westboro, Massachusetts, US
email register@srvip.org

March 9-11, 2009 (*with two evening sessions)
Syracuse, New York, US
call Susan Thomas ~ 315.473.2978

March 16-19, 2009
Bridgeport, West Virginia, US
email Linda Higgs ~ lindahiggs@wvdhhr.org

March 30-April 2, 2009
Fall River, Massachusetts, US
email Jack Yates ~ yatessns@aol.com

May 11-14, 2009
Toronto, Ontario, CAN
call Jo-Anne Partridge, DAFRS ~ 905.436.1168

An Introduction to Social Role Valorization
May 18-20, 2009
Harrisburg, Pennsylvania, US
email Pam Seetoo ~ pseetoo@keystonehumanservices.org

June 10-12, 2009
Sunbury, Pennsylvania, US
email Pam Seetoo ~ pseetoo@keystonehumanservices.org

Practicum With SRV Using the PASSING Tool
prerequisite: attendance at a leadership level SRV workshop
March 30-April 3, 2009
Rockhampton, Queensland, AUS
email Jenny Smith ~ jags14@bigpond.com

May 3-8, 2009 (tentative)
central Massachusetts, US (venue TBA)
email register@srvip.org

Towards a Better Life:
A Two-Day Basic Introduction to SRV
February 5-6, 2009
Phillip, ACT, AUS
email Veronica Hadfield ~ vhadfield@koomarri.asn.au

February 16-17, 2009
Nambucca Heads, New South Wales, AUS
email Pam Mitchell ~ pammitchell@trvs.org.au

February 18-19, 2009
Nambucca Heads, New South Wales, AUS
email Pam Mitchell ~ pammitchell@trvs.org.au

February 26-27, 2009
Heidelberg, Melbourne, AUS
email Claude Staub ~ cstaub@st.johnofgod.org.au

April 20-21, 2009
Auckland, NZ
email Lorna Sullivan ~ lorna@imaginebetter.co.nz

April 23-24, 2009
venue TBA, NZ
email Lorna Sullivan ~ lorna@imaginebetter.co.nz

Crafting a Coherent Stance on the Sanctity of All Human Life
June 15-19, 2009 in Calgary, Alberta, CAN
email slfrank@interbaun.com

5th International SRV Conference
October 5-7, 2010 in Canberra, ACT, AUS
email reception@koomarri.asn.au

National Citizen Advocacy Conference
February 7-8, 2009 in Kent Town, SA, AUS
email casa@tne.net.au

Social Role Valorization News & Reviews

Wolf Wolfensberger

As in earlier issues of this journal, my intent for this column is four-fold, at least across multiple journal issues if not in each one.

(a) Briefly annotate publications that have relevance to Social Role Valorization (SRV). Conceivably, some of these might be reviewed in greater depth in a later issue of this journal. Many of these annotations should be useful not only as teaching resources, but as pointers to research relevant to SRV theory.

(b) Present brief sketches of media items that illustrate an SRV issue.

(c) Present vignettes from public life that illustrate or teach something about SRV. Aside from being instructive to readers, persons who teach SRV will hopefully find many of the items in this column useful in their teaching.

(d) By all the above, I hope to illustrate and teach the art and craft of spotting, analyzing, and interpreting phenomena that have SRV relevance.

Devaluation, Differentism, Deviancy & Deviancy-Making

*One of the many hypocrisies of the politically correct is that specially designated and protected classes (such as females, homosexuals, foreigners, more recently Muslims, etc.) may say and do things that violate anti-discrimination laws for which they would be prosecuted or persecuted if they did **not** belong to these specially favored groups, while members of the non-protected groups are persecuted or prosecuted if they did or said these things. For instance, one of the worst things a Caucasian could say is the word 'nigger,' but when 'African-Americans' use the word (and many do so freely), nobody is supposed to take umbrage. Some imaginable scenarios are quite humorous, such as a Muslim landlord refusing to rent to homosexuals. If a member of a non-protected class did this, hell would break loose, but a Muslim might get away with it by invoking Islamic religion and religious freedom (5 May 2006 news clipping).

When an Onondaga Indian youth said "I like to be with my own people" about being in an Onondaga Indian school on Onondaga territory near Syracuse, it became a diversity celebration statement worth reporting in the newspaper (*Syracuse Post-Standard*, 13 Nov. 2006). If a Caucasian youth said "I want to be with white people" or "I want to be among Anglo-Saxons," it would have had severe repercussions.

*This is really funny, but teaches a lot about deviancy-making. In Syracuse (and almost certainly elsewhere too), African-American children have been taunting African immigrant children, telling them that they speak poor English (as if the accusers did not), and are darker than they–so they throw bleach at them, which could blind someone. The politically correct media were mortified, but being incorrigible, blamed white America for

instilling its racial stereotypes into these children. The answer: diversity education for the African-American children (*Syracuse Post-Standard*, 26 June 2006).

*Probably influenced by social Darwnistic ideology, between ca. 1930-1960, there flourished a discipline of study called 'social disorganization' that focused on individual, family, community, national and international disorganization. For instance, war fell into the latter category; insanity, mental deficiency, alcoholism, crime, etc., were commonly put into the category of individual disorganization. Then during the 1960s, the field disappeared, and another took its place: deviancy. Now, deviancy is being thrown out in favor of diversity, which is to be 'celebrated.' What was yesterday's deviancy, and the day before disorganization, is now a valued characteristic or status, exemplifying Nietzsche's goal of the "transvaluation of all values."

*When handicapped people in Alaska get sent to another state for treatment or 'treatment,' it is reported in the Alaska idiom that they are being sent 'Outside,' with a capital O, as in the headline, "Children sent to Outside treatment centers" (2004 news clipping). One is reminded of the kind of 'we vs. them' discourse that is so much a part of deviancy-making.

*There is no end to how, in different societies and at different times, people can be deviancy-imaged. In Northern Germany in the early 20th century, to convey that something was driving one crazy, a person might say, 'this could make one Catholic.' In the north German province of Mecklenburg, a man was convicted of insult for calling another person a Catholic. If a child misbehaved in Pomerania, it was said that it "acted Catholic again" (1914 German American book).

*In Northern Ireland during a Protestant parade, a reporter was warned by local people that "he looked like a Catholic," and that therefore, he was in danger (*National Catholic Register*, 18 July 1999). This reveals much about the deviancy-making mentality.

* The caste system in India was created by invading Aryans more than 3500 years ago(!), and is an instructive and striking example of deviancy-making through social stratification, and how it can endure (*Books & Culture*, 1/2006).

According to Hindu belief, there are four major castes, plus a fifth category of a multitude of outcasts. The highest caste (about 5% of India's one billion+ population) consists of the Brahmans, said to have originated from the head of the god Brahma. (The word 'Brahman' also means divine breath or sacred power.) The second highest caste is said to have come from the shoulder of the god, the third from the god's thigh, and the fourth (40-55%) from the god's feet. These four levels of castes are also associated with colors: white, red, yellow, and black respectively. (There is, in fact, a correlation in India between caste level and skin color, and an obsession with it. Hundreds of millions of dollars are being spent to have one's facial skin lightened. No 'darker is more beautiful' campaign in India!) The outcasts (those below the 4th level), or Dalits–about 25-30% (250-300 million) of the population–are considered below the god's feet, of less worth than animals, and traditionally have been considered impure, untouchable, and allowed to perform only the worst jobs in Indian society.

The Brahmans are believed to be genetically suited for the highest levels of intellectual, rational and ritual skills in both religious and secular occupations. The second caste is deemed to be particularly suited as warriors or rulers. The third are in essence the merchants and entrepreneurs that produce wealth. The fourth use their muscles and dexterity, and have been the backbone of the agrarian economy. They are thought to be descended from ancient conquered peoples, and they themselves believe that they were at one time

warriors and rulers in their own domain who had been reduced to lower status.

The Dalits have been told that they had committed terrible sins in previous lives, that God does not love them, that they were born to serve the four other castes, that they have no rights, and could not visit temples, and were to be untouchable to the other castes. They called themselves Dalit, meaning 'crushed' or 'downtrodden.' The post-World War II constitution and laws notwithstanding, they are commonly refused entry to public parks, barber shops, public wells, and often subjected to theft, violence, rapes and forced prostitution, including unpunished violence by police; and sometimes they are murdered with impunity, and massacred. It dwarfs what went on under South African apartheid, but has received little attention.

One reason why the Dalits have recently been converting to Christianity in masses is because Christianity has told them that they are made in the image of God, and that this gives them dignity, value and self-worth. The non-Dalit Hindus are enraged at this conversion, because it turns the caste system upside down, both by depriving the economy of its bottom workers, as well as in light of Christian teaching that the least in this world will be the first in the next. This is one reason why Christian Dalits in particular have been badly persecuted in recent years, and why Hindu persecution has begun to extend to Christianity generally as the source of all this trouble.

However, Hindu opposition to Christians goes back further than this, and already was expressed in the 1930s by Gandhi himself who is believed to have threatened to legislate against conversion (to Christianity) once India became independent. While laws were passed under the title of 'Freedom of Religion Acts,' the Indian Supreme Court ruled in 1977 that the work of evangelists was a threat to 'freedom of conscience.' (This reminds one of Orwell's 'war is peace,' etc.) There is also a mythology among Hindus that almost any conversion is accomplished through deception, seduction, or even compulsion. All this helps explain why Hindu nationalist parties have begun to develop militias of their own, and their own training camps (*Christian History*, Summer 2005, plus several other sources).

The politically correct have been interpreting India as a peaceful 'diverse' country, and as a model of democracy in the Third World. This image may soon fall apart, like virtually all PC fantasies. We may see not only bloody mass persecutions of Christians, but also resumption of internal warfare between Hindus and Muslims, of which we have already seen some outbursts lately.

*Heiderer, T. (1990). Sacred space, sacred time: India's Maha Kumbh Mela draws millions. *National Geographic, 177*(5), 106-117. There were still beggar-masters in India in 1989 who ran begging rings that bought children in order to cripple them and send them out to beg on the owner's behalf.

*Here is an extraordinary event: one of India's low castes has been lobbying to be classified as members of **the** lowest caste. Usually people aspire to be classified upwards, not downwards. The reason in this case is a form of 'affirmative action,' in that the lowest caste qualifies for certain favorable government quotas (*Syracuse Post-Standard*, 31 May 2008, p. A5). It is a bit like Caucasians in the US clamoring to be classified as 'Native Americans' so that they can run casinos which it is only legal for the Indians to operate on their own lands.

*In Yemen, a million people comprise the class of 'Al Akhdam' or servants, who are relegated to cleaning tasks and begging, similar to the untouchables in India (*New York Times*, 27 Feb. 2008, p. A1).

*Miles, M. (2002). Disability in an Eastern religious context: Historical perspectives. *Journal of Religion, Disability & Health, 6,* 53-76. This article explains why deformed, impaired and retarded

people are devalued–often even despised–in cultures that believe in reincarnation: they are believed to have committed sins in their previous lives. Further, their current condition may be a symbol of their sin. For instance, someone who was domineering or over-intellectual in an earlier life may be 'rehabilitated' by reincarnation as mentally impaired, so as to progress toward enlightenment.

The idea that a twisted personality goes with a twisted body is ancient. For instance, one can also find it in early Sanskrit writings.

In some cultures, newborn babies were publicly examined for defects a few months after birth, and the defective ones were put to death. Strabo (ca. 63 BC-ca. 21 AD) documented this practice in the Punjab in India, and other Roman writers observed it elsewhere. This practice is comparable to recent proposals in modernized societies to withhold personhood from infants for up to two years.

In many cultures, punishments for crimes included the infliction of a disabling condition, as via amputation of a limb or ears or nose, blinding, castration, excision of the tongue, burning, or beating of the foot soles so as to disable walking. If such mutilations occurred in incarnation cultures, they were often seen as analogous to being born impaired for sins in earlier lives.

Proponents of SRV need to think deeply how SRV should be taught in an incarnation culture.

In Islam, the giving of alms to those unable to support themselves is interpreted as an act of justice, not of charity. In other words, the poor are entitled to it. Modernists would interpret this as a right, though in this case it would be by the Islamic Sharia law that combines religious and secular law.

Already in the early Indo-Aryan languages, there were thousands of 'defect words,' and among the almost 15,000 'head words,' about 225 referred to an impairment, comparable to our words 'bonehead,' 'bird head,' etc. In fact, many of the words referring to impairments in European languages of Indo-European origin are derived from the ancient mother tongue, including the English words blind, small, thick, short, lame, crooked, deaf, dumb, dull, and stupid. This is one reason why such words cannot be easily expunged from the language.

*Obviously, there are interesting books in all kinds of languages that never get translated, and often are not even reviewed in other languages. One such book written by a German Protestant missionary (Ernst Christoffel) about his work in the Orient between 1904 and 1955 is of interest to human service workers because it provides a rare description of handicapped people in the Middle East and in Islam generally, and especially describes what the author claims to be pioneer work with blind people of mostly Turkish, Armenian and Persian background. One passage in the book was so poignant that I decided to translate it, and it is presented below. The scene played out at the border of Turkey and the present Iraq.

Christoffel: "What is your name, my boy?"

The Orphan Rasul: "Rasul Oemer oghlu."

C: "Are you the Kurdish boy who hangs out at Mahmud, the coffee shop operator?"

OR: "Yes, master."

C: "Where are your parents?"

OR: "Dead; I never knew them."

C: "Have you no relatives?"

OR: "No, Master."

C: "How long have you been blind?"

OR: "I do not know. I have never seen light."

C: "How do you make a living?"

OR: "I gather, master" (meaning he begs).

C: "Do you get enough to eat your fill?"

OR: "No, master; I often go to sleep hungry."

C: "What do you do then?"

OR: "Nothing, master. I only cry."

C: "Does the coffee shop-owner give you nothing?"

OR: "Rarely; he curses and curses when I cry."

C: "Where is your bed?"

OR: "I have no bed."

C: "Where do you sleep?"

OR: "On the ground, master."

C: "Isn't that cold?"

OR: "I freeze much in the winter, but it is not so bad in the summer."

C: "Are you unmolested when you beg in the city?"

OR: "Some people curse and cuss. Children often throw stones at me."

C: "What do you do then?"

OR: "I cry. Sometimes I throw the stone back, or anything I can grab. The children then laugh. When I get really mad, I curse them."

C: "Does nobody love you?"

OR: "I do not understand your question."

C: "Does no one ever say, 'my dear boy' to you?"

OR: "No, master; to me, they speak very differently."

C: "Like what, Rasul?"

OR: "You dog, you blind dog, you son of a dog."

C: "Is there no one who ever puts arms around you, strokes your cheek, or kisses your forehead?"

OR: "No, master. No one has ever done that."

C: "Why did you come to me?"

OR: "Are you not the Aleman Effendi who came here on behalf of the blind?"

C: "Yes, my boy."

OR: "I wanted to come to you, master."

C: "What do you want from me?"

OR: "I do not know, master."

C: "An alms, maybe?"

OR: "I would be grateful for one, but that is not why I came."

C: "Why then, my boy?"

OR: "Everyone talks of you in town."

C: "What do people say about me?"

OR: "It is said that you devote much patience to the blind, and enable them to see the light."

C: "Anything else?"

OR: "It is said that you take in blind children

and become their father. Is this true, master?"

C: "Yes, my boy. Do you also want to come to me?"

OR: "Yes, master."

C: "But my children are not allowed to beg."

OR: "If you give me food, I will not beg."

C: "My children are also not allowed to curse."

OR: "I only curse when people harm me."

Christoffel told the boy that when he returned from Germany, he planned to take the boy in, and in the meantime gave him an alms. Tragically, World War I broke out, and Christoffel was unable to return.

*In the Pyrenees area of France and Spain, there lived for hundreds of years a people called Cagots who were indistinguishable from other people, but were treated as outcasts, much like the Burakumin in Japan. They lived in segregated areas, could not sit where other people might sit, had to use separate water sources, had to enter churches by special doors, received communion after everyone else, and could not seek shelter from the rain under the eaves of houses of Catholics. Even though they were well-behaved, they had a reputation for being decadent, depraved, diseased and criminal. They were skilled craftspeople in wood, but their skill was attributed to the devil. The French revolution of 1789 released them from their estate, and within two to three generations, they assimilated. Perhaps their descendants no longer even know that their ancestors were Cagots.

There are several theories about who the Cagot really were. One is that they started out as outcast lepers. Another is that they were an amalgam of all outcast groups of medieval society. Strangely enough, a disproportionate number of them were fair, blond and blue-eyed, suggesting a Visigothic element.

This is a good example of being relegated to a devalued class entirely by attribution, in the absence of any distinguishing characteristics.

*The freak show is back, namely in the form of the TV 'reality show.' Names of these shows may include, *I'm Obese, The 627-Pound Woman, Half-Ton Man*, and *Little People, Big World*. There is also a show about a girl with two heads (or two girls with one body below the neck), called *Joined for Life*. Wanting to see freaks, and wanting to exhibit them, seems to be a true universal.

*Of all kinds of what one might loosely call freakery, it is dwarves who have most persistently been able to hold on to niches in the entertainment world. For hundreds or even thousands of years, they were a common sight in the courts of nobility, though not always for entertainment purposes. There once was probably not a circus without a number of them. In freak shows, giants were more common than dwarves, but with the decline of sideshows in circuses and fairs, giants have disappeared (maybe gone into basketball-playing) while dwarves have maintained a toehold in theater, movies and TV, virtually alone of all the former denizens of the freak show and sideshow.

In the last few decades, there have been dwarves in rock performances, on the Howard Stern Show, in the 'sport' of dwarf-tossing, and in a number of sometimes highly acclaimed films and plays. In 2004, there was a new TV comedy series with a dwarfery theme, entitled *Scrubs*. Also, there were dwarves in single episodes of *The Station Agent, Live From Lincoln Center,* and even *American Idol*. More than a dozen dwarves appeared on a dating reality show entitled, *The Littlest Groom*.

In 1936, there was a singing Western movie entitled, *The Terror of Tiny Town*, in which everybody and everything was dwarfed, which had its more recent equivalent in an all-dwarf production of Ibsen's play, *A Doll's House*.

A very big image blow to dwarves was the 1939 film *The Wizard of Oz*, because of all its weird and initially threatening dwarf Munchkins. The Munchkin image has kept hovering over dwarfery and show business ever since.

In German, there is a 'Dwarf Song,' or 'Song of the Dwarves.' It goes like this.

One, two, three, four,
five, six, seven;
room-peddypoom-poompoompoom-poom-poom.
Schnick-schnack-schnuck,
schnick-schnack-schnuck,
schnick-schnack-schnuck,
schnick-schnack-schnuck.
La-ha-ha-ha!

Dwarves have long had a reputation for not being very smart, in consequence of many conditions that stunt growth also stunting mental development. The above song seems to play into this stereotype.

In Sierra Leone, there had been intense advance publicity about the appearance of two Nigerian midgets (Aki and Paw Paw) in the national stadium, and a huge crowd bought tickets. When the midgets failed to show up, the authorities substituted two local dwarves instead, but the public was enraged, and thousands started rioting (*Syracuse Post-Standard*, 7 Dec. 2003). Obviously, this public knows the difference between dwarves and midgets.

The practice and 'entertainment' of dwarf-tossing originated in Switzerland. Near its eastern border with Austria, there is a very remote valley that is difficult to reach even today, in which there has been mining of various ores for several hundred years. In the olden days, a large proportion of miners were very short people who were selected or self-selected for this occupation because it was often economic to make mine shafts very low so that short but stout stature was a great advantage.

Miners in Austria heard of the bountifulness of this mine and decided to take it away by force from its owners. Perhaps their own mines were giving out, as often happened in the Alps. At any rate, they banded together in a small army of several hundred and marched over the mountains to conquer the Swiss mine. The Swiss miners (who may also have been short), plus other taller people in the valley, seem not to have been taken entirely by surprise, and managed to put up strong resistance and to vanquish the army of invading dwarves, perhaps because some of their fighters were tall. Now comes the awful part: the victors grabbed all the vanquished dwarves and tossed them off cliffs down into the deep valley so that they suffered the fate that the Austrian dwarves had apparently planned to inflict had they won. Depravity is not only ubiquitous but amazingly ingenious.

This list by no means exhausts instances of dwarf roles in the entertainment world of the last several decades.

*A 19 January 2000 cartoon shows a computer correspondence that goes: "Dear Valued Customer: Our records show that you have repeatedly ignored our previous requests for payment. Therefore, you leave us no other alternative. Dear Devalued Customer:"

*As part of emergency preparedness planning, some localities have established registers for people with temporary or permanent 'disabilities.' The merits of this have to be considered in light of the historical fact that registration has never ended up being to the benefit of devalued groups, but is often initiated early on in a slippery slope that ends in persecution or genocide.

*Jagendorf, M.A. (1957). *Noodlehead stories: From around the world.* New York: Vanguard Press. (American Folklore Series.) Noodlehead stories were reportedly very popular in the British army, except that they were called 'knucklehead' stories.

All over Latin America and the Caribbean, a stock mythological stupid person is called Juan Bobo. Stories and jokes about him could fill

books. His equivalent in Cajun Louisiana was Jean Sot (John Fool). In Turkey, noodlehead stories were called hodja stories. The Danish story of Peter the Fool relates that he did all sorts of stupid things that by sheer luck end to his advantage. As his mother said, 'fortune often favors fools.' In the end, he got to marry the dour princess because he made her laugh twice in one morning, 'and for a noodlehead he made a good king. He was not much worse than a smart one.'

*When Governor Eliot Spitzer of New York had to resign in disgrace in March 2008, he was replaced by the nearly-blind African-American Lieutenant Governor David Paterson. After a relatively normal upbringing, when he was 14, Paterson's parents sent him to a mobility course for blind children–and he abhorred it. "I fought going to that course, because there I was, in with the blind kids from the special schools, and they were almost helpless. And I hate to say this, but I had the same anger I think some successful black people who were raised in white neighborhoods have against poorer blacks. They think, 'These people are bringing me down.' "

"When they called me 'blind' in that course, I thought, they're not talking about me, they are talking about themselves; these are the people who are causing me the problem; they're helpless; they can't do anything. I thought of myself as different" (*Syracuse Post-Standard*, 20 March 2008, p. A9).

Issues of Segregation, Congregation, Integration &'Inclusion'

*The segregation to which lepers were at one time subjected was about as sad as sadness comes. Also, prior to bacteriological tests, it was often based on erroneous diagnostics. For instance, in 1908, the Philippines established a leper colony on the small island of Culion, and collected a large number of 'lepers' there, but upon microscopic examination, it was found that only about half of the 'lepers' were leprous (*Scientific American*, June 2008, p. 16).

*In 1955, an omnibus institution for 1000 handicapped people was built on Chongming Island in the Yangtze River, just north of Shanghai. Even by 1995, when it held at least 650 retarded persons, it could only be reached by boat or Hovercraft (*Hartford Courant*, June 1995).

*A theater group in New York City puts on plays by blind, sighted, and partially blind actors, and said that the audience cannot tell which is which. But the group that developed this is named Theatre by the Blind. Even more role-valorizing would have been theater by a generic group in which only one or two persons were blind, and indistinguishable from the other actors.

*For many years, blind chess players have held their own tournaments, which is perfectly understandable insofar as they play by special rules that make sense, such as being able to touch all the pieces on the board while thinking. However, one is dumbfounded (pardon the expression) to learn that for the first time, deaf chess players were getting together for a world championship tournament in 1984. If anything, being deaf is an advantage in playing chess, since one will be less distracted by noise, which chess players detest while playing. One is even more distressed to learn that it is the National Association of the Deaf which sponsored the event, and that the event took place at Gallaudet College (for the deaf) in Washington, DC. The event shows how insensitive people are to the meaning of separatism and division. It would make just about as much sense to have a chess world championship tournament for midgets.

*There actually exists a Disabled (stamp) Collectors Correspondence Club with its own website.

*Gambling casinos certainly want to get as many people as possible to come and gamble there, and they will not discriminate against anyone with money. Therefore, gambling casinos have an interest in being 'accessible' to the handicapped. In

April 1996, the Upstate New York Chapter of the Multiple Sclerosis Society presented its accessibility award to the Oneida Indian Nation's Turning Stone Casino Resort.

*The Syracuse Automobile Dealer Association sponsored a special segregated auto show for retarded participants in the Special Olympics, and other handicapped people and their families. Aside from the absurd segregation element, events like this continue to underline the low consciousness among the leaders of the Special Olympics movement, and how it is contributing not merely to unnecessary segregation in sports but also in other life domains of retarded people.

*A class of college students was shown a slide presentation depicting a woman engaged in Special Olympic activities. Another class saw a slide presentation of the same woman engaged in activities with non-handicapped persons in community settings. In the Special Olympics presentation, the students judged the woman to be younger, and as needing segregated school and recreation (Storey, Stern, & Parker, in *Education & Training in Mental Retardation*, March 1990).

*Little League baseball in one Massachusetts locality has been trying to keep handicapped children out with the argument that since the Special Olympics is available for them, that is where they should go and play. In fact, the National Little League Organization is trying to get the Special Olympics Committee to add baseball to its program. This sort of thing underlines how the very availability of a segregated program can be an obstacle to integration.

*A man who has a very large family owns a small van so that they can all go places together. To his surprise, he noted that whenever he drove somewhere, handicapped people on the street would stop and wave. It turned out that the handicapped people automatically assumed that a van full of people ranging from adults down to little children must be from an institution or group home, or must belong to some service that transports handicapped people.

*A handicapped woman is very active and goes to all sorts of activity groups, meetings and associations. But despite it all, she said, "I'm so lonely." In all likelihood, a lot of people will see this amount of activity and assume automatically that a great deal of meaningful interactions and relationships are being transacted. But this is not necessarily so. Service programs can involve their clients in all sorts of community 'activities' that are not very integrative, or even social. Examples are going to movies, banks, parks, or going shopping as a group.

*This is a follow-up to items in the SRV News & Reviews columns of December 2007, pp. 78-79, and June 2008, pp. 87-90, on integration. 'Real integration'–that is, valued presence and participation in society–for many kinds of competency-impaired people is difficult to achieve even under good conditions, and even more difficult if conditions are not positive, including when the person at issue lacks social graces.

In recent decades, one strategy for integration has been to cultivate friendships from early childhood on for a competency-impaired child with non-impaired children, in the hope that at least some of these friendships would last. There have been positive results where this was done, but it has also turned out that the friends grew apart as they grew older, leaving the impaired person fairly isolated. An example is found in the story of Catherine Schaefer, as documented in her mother's (Nichola Schaefer) 1997 book *Yes, She Knows She's Here*.

One reason for the failure of such efforts seems to have been that the interests and activities of the two parties grew apart over time, subtracting a viable foundation for continued joint engagements. Another way of putting this is that these friend-

ship efforts did not sufficiently involve continuing roles centered on shared interests and activities.

As at least one alternative, we propose that families concentrate on developing a person's interests, activities, skills and hobbies that are not–or are only somewhat–negated by the person's impairments (i.e., which are realistic given the person's impairments), **and** that are likely to be shared by enough people in many locales so that one is always likely to find an organization or interest group that a person with that interest can join. Examples might be singing, raising a particular kind of plant or animal, collecting items that other people also collect (maybe stamps or model cars, pottery, glassware), perhaps hiking or nature study, bird watching, etc. Most hobby and interest groups have open enrollments, and periodic official get-togethers that can sometimes be a springboard to less formal smaller meetings and joint activities.

Some interests are less likely to result in shared activities. For instance, being a fan of a particular sport may entail not much more than attending large-crowd events where one is not likely to become acquainted with new people, or to engage in enduring joint activities with those people one may get to know personally.

There are all sorts of examples of impaired people having found enduring associations in an activity that was not impeded by their impairment. In our SRV teaching, we give the example of one man who, for his health, started to play the saxophone, as well as of someone who started playing chess in his youth, both of which were converted into many relationships and lifelong roles. President Franklin D. Roosevelt, who was non-ambulatory, collected stamps, and in at least urban areas, there is likely to be a stamp collectors club that meets regularly, and has periodic exhibitions. Swimming, running, etc., can be an avenue to integrative contact with fellow swimmers or runners. And so on.

Ballet lessons are typically given to groups of children, thereby affording much opportunity to meet other children. Many people who have taken ballet lessons continue to practice, which might be an opportunity to have ongoing social contacts around a common interest and activity.

*The good news is that the field of communications can provide many employment opportunities to handicapped people, for instance as radio announcers, data processors, etc. The bad news is that one handicapped man started a radio station in Connecticut, to be run **by** handicapped people **for** handicapped listeners. We can easily imagine handicapped people who may live either in segregated settings or alone, who may work only with other handicapped people, if at all, and who recreate only with handicapped people, if with anyone, and who possibly ride on transportation conveyances shared only by other handicapped people–and who now turn on their radio and listen to nothing but handicapped people talking about handicaps and handicapped people.

Also, the radio station apparently heavily emphasizes programs about sex, cults, and drugs (*Syracuse University Alumni News*, Fall 1981). This enterprise has been receiving much favorable publicity, but how much preferable it would have been for programs about handicapped people to be part of the regular radio station program, or for a national group to produce high-quality programs about handicap and handicapped people which local stations in general could use on a selective basis.

*The supported employment sector has emphasized receiving payment–at least minimum wage–as being just about the sole criterion for whether a particular job for handicapped persons should be pursued. How destructive this can be was exemplified by the practice of one so-called supported employment program: the agency received government monies to pay the handicapped person for up to six months, but at the end of that time, if the employer did not hire the person at full wages, the person would lose the

job and often end up back in either idleness or the sheltered workshop.

There was no reason why the agency could not simply place the person in jobs even on an unpaid basis, since most handicapped people receive government pensions and therefore have at least some income. This way, the person could learn, be active, and be integrated. Then, if after six months the employer still did not want to hire the person, at least the person could continue to be present, contributive, and benefiting in a voluntary capacity. This would also mean no loss in income since such persons would still be receiving their government pension. Further, chances are high that at least over time, many employers would eventually hire the person, or at least slip the person some recompense under the table.

*In the 1970s, there began an explosion of 'special need' children's camps, mostly for summer camping. There are now such camps for people with every conceivable condition: cerebral palsy, epilepsy, mental retardation, muscular dystrophy, diabetes, hemophilia, sickle cell anemia, heart disease, Tourette's syndrome, etc., etc. There are 130 asthma camps alone! (AP, in *Syracuse Post-Standard*, 22 April 2008, p. D3).

Camp About Face in Indiana is for children with all sorts of facial and head deformities, supposedly to help them overcome their hurt at being different. One of the activities for the children there is to design and make all sorts of fantastic–even hideous–facemasks out of paper sacks (*Indianapolis Star*, 25 June 1989). Also, considering the camp's clientele, its name is almost grotesque.

A social worker at the Children's National Medical Center in Washington, D.C. who co-founded one summer camp claimed that epileptic children camping together 'normalizes the experience.'

There is undoubtedly a benefit in such specialty camps, but also a paradox in that in almost all other respects, so many families seek or even demand 'inclusion.'

*Adams, B. *&* Adams, R. (2008). Inclusion: One family's perspective. *TASH Connections, 34,* 24-25. Here is a startling assertion made by this article: "... in 1987, the concept of full inclusion was not familiar; in fact, most people were using the term integration. Inclusion was a new concept with emerging research and legal support established by the Rachael Holland case in California." The article also spoke to a point we have made, namely that integration into a decadent culture may not be good for devalued people: "Because he was with his peers he had the opportunity to pick up the mannerisms of the students around him. He even picked up a couple of swear words as a high school senior, which was so very age-appropriate even though it was not appreciated by the school! Everyone did it and so did Caleb."

*We have encountered yet another definition of 'inclusion,' namely that, "True inclusion brings together people who differ from one another by race, religion, gender, class, ethnicity, and sexual orientation" (*Education Exchange* (Syracuse University), Spring 2008). Thus, we see once more that inclusion is not necessarily 'real integration' as SRV defines it, but can be a juxtaposition of deviant people to warm the heart of a political correctionist.

*Here is an almost worst-case scenario of how not to do integration, or how to do it in a way that is practically guaranteed to turn teachers, parents and possibly students against it. In one middle school in 1994, a teacher of 4th and 5th graders went from having no handicapped students one year, to having, in the next year, 3 children with limited mobility, 4 with so-called 'attention deficit disorder,' and 5 with emotional problems, in a class of 27! That is almost half the class comprised of handicapped students of undoubtedly tremendously divergent need–all this under the banner of 'inclusion.' (Personal communication from that teacher.)

*Five Tennessee public school teaching assistants who were willing to do all sorts of good things for handicapped children were fired in 1993 because the one thing they refused to do was to catheterize the children who needed this, in part because they were afraid that they might do something wrong. Amazingly, the US Supreme Court had ruled in 1984 that catheterization was not a 'medical procedure,' and that is why the schools could require that teachers' aides would do this (*Newsweek*, 20 February 1993).

*A recent (May 2008) news item reported that an elementary school teacher in Florida led her class of 17 kindergartners (5-year olds) to vote a classmate "who is in the process of being diagnosed with autism" out of the class; the vote was 14 to 2. (Perhaps she had watched the 'reality' show in which a group of people 'stranded' on an island successively vote off one of their members after the other until there is only one 'survivor.') The boy is said to have 'disciplinary issues' (note the code language), and to have spent much of his time in the principal's office for that reason ever since he arrived at the school four months earlier. He also made a scene when his mother dropped off a sibling at the same school each day. As usual, the mother threatened to sue (*Scripps Treasure Coast Newspaper*). Allegations are flying back and forth between the family and the teacher and school, but however the issue is resolved, the incident underlines that integration will not

Learning to Teach Social Role Valorization (SRV)

Social Role Valorization, when well applied, has potential to help societally devalued people to gain greater access to the good things of life and to be spared at least some of the negative effects of social devaluation. This is one of the reasons why it is important for people to learn to teach SRV, so that its ideas and strategies are known and available to the right people in the right places who can apply it well. Unless people continue to learn to be SRV trainers, the teaching and dissemination of SRV will cease. Many SRV trainers for example could teach lots of people how to **implement** SRV, but not how to **teach** it to others. At a certain point there might be implementation of aspects of SRV, but the knowledge of SRV itself might not be passed on to others, such as the next generation of human service workers. Teaching about SRV, and learning to teach SRV, can be done in many ways, depending in part on one's abilities, interests, resources, and so on.

The North American SRV Safeguarding, Training & Development Council has developed a specific model for teaching people to competently do two things: (a) teach Social Role Valorization; and (b) teach other people to teach SRV. People who can do the former, the Council calls "SRV trainers." Those who can do the latter, the Council calls "trainers-of-trainers" of SRV. The Council named this a "Trainer Formation Model," i.e., a model for forming or developing SRV trainers and trainers-of-SRV trainers. A description of the Trainer Formation Model is available if you are interested (http://www.srvip.org/about_mission.php); also see the article referenced below.

To find out more about studying SRV and learning to teach it, please contact Jo Massarelli at *The SRV Implementation Project*, 74 Elm Street, Worcester, MA 01609 USA; 508.752.3670; jo@srvip.org. She will be able to help you or to put you in touch with someone more local to your geographic area who can be of help.

Resource

SRV Development, Training & Safeguarding Council (2006). A Brief Overview of the North American SRV Council's Trainer Formation Model (November 2005). *The SRV Journal 1(1)*, 58-62.

be real, or successful, unless the person's presence and participation is valued by the integrators; and adaptive behaviors and social graces (cooperativeness, obedience, etc.) are among the most important things that parents and families should inculcate into their impaired children–not to mention into their non-impaired children.

*Kauffman, J.M. (1993). How we might achieve the radical reform of special education. *Exceptional Children, 60*(1), 6-16. James Kauffman has long been a prominent special educator. In 1993, he said the following.

"Place has varied literal and metaphorical meanings, including location, perspective, status, and power. The issue of where students are taught has been at the center of efforts to restructure special education. Physical place has been the hub of controversy because it clearly defines proximity to age peers with certain characteristics. A student's being in the same location as others had been assumed to be a necessary if not sufficient condition for receiving equal educational opportunity. Physical place can be measured easily, can be reduced to simple images, and has immediate and deep emotional overtones; thus it is fertile ground for fanaticism.

"A sense of physical place–location in space, where things are, and where things happen–is basic to human thought. Place, as a set of coordinates in the physical world, is a central issue in identity or belonging. It is the basis for many ethnic, tribal, national, and religious conflicts. Every society is structured by assumptions and rules about what is appropriate behavior in certain locations and by the observation that some events or outcomes are probable or possible in some places but improbable or impossible in others (cf. Goffman, 1973). What is assumed to be possible, probable, desirable, or permissible in certain places may change, either because of empirical findings or because social values change, or both. Small wonder that physical place is a pervasive and highly emotional topic in education" (p. 7).

Kauffman also said that the quality of thinking and discourse in special education has not been any better than that in general education. Many special education reformers appear to have an "aversion … to careful scrutiny of their rhetoric and interpretation of data." "Reform proponents have failed to address even the most obvious questions regarding the effects of their proposals on students with learning disabilities." He said that what he called "debasement of language" plays a large role in this discourse. It is "an effective way of oversimplifying complex ideas, eliminating ambiguity, and constructing powerful images." "As in many other aspects of our lives, image is replacing idea: image is becoming the measure of truth" (p. 9).

As one alternative to either mindless 'inclusion' or traditional patterns of segregation, Kauffman suggests "disaggregation" of special education populations (which is similar to the concept of dispersal that first normalization promoted since the late 1960s, and then SRV has done), at the same time as there would be a better grouping of handicapped youths.

Kauffman also noted that the business management concept of 'total quality' has in turn spawned a construct of 'total quality education' which is supposed to cure all of the ills of special education.

*Fuchs, D. & Fuchs, L.S. (1994). Inclusive schools movement and the radicalization of special education reform. *Exceptional Children, 60*(4), 294-302. This article should be mandatory reading for people concerned with educational integration and the so-called 'school inclusion movement.' It is one of the most credible and well-reasoned critiques of contemporary inclusion radicalism which has become increasingly strident, and has in effect cut itself off from the mainstream of education and concern from the welfare of children in general. The article makes the point that general education is doing so poorly the way it is that it seems unreasonable to expect that it would be capable of meeting the grand expectations that

the full inclusionists place upon it. The authors conclude that the full inclusionists simply do not understand general education or they would not expect from it what they do. Inclusionists are also accused of in essence virtually wanting to get rid of legitimate educational goals of the schools for the sake of inclusion as its own end. (I would add that political correctness prefers diversity to competency acquisition.)

Indeed, it is becoming more and more apparent that the inclusion radicals in education have put the attainment of inclusion above the learning and growth of children. Whatever pedagogies that enhance competency, learning and growth stand in the way of 'inclusion' are being made war against. In the lower grades, having handicapped children in the classroom is viewed as more important than anybody learning the 3Rs. On a more advanced level, the inclusion dynamics might be given preference over–let us say–non-handicapped students learning calculus. This idolatry also expresses itself in all sorts of ideological restructuring of the classroom process. For instance, students are forced to learn as teams and to become peer teachers, despite the fact that some students simply do not work well in teams and would work much better alone, as has always been the case in history. This is very reminded of the way the communists forced everybody to work only in groups. And of course, such a strategy is profoundly deindividualizing, potential rhetoric to the contrary notwithstanding.

Another expression of this religion is warfare against special provisions for highly gifted pupils, who historically had been notorious for often working much better on their own, or with other gifted pupils. Their talents will now be sacrificed to the moloch of the group and the team, equality, inclusion, etc. In fact, one recent book has interpreted special programs for the gifted as "a disruption of community."

*In Summer 2008, the Syracuse, New York, public schools got the bright idea that in order to teach English to children of immigrants, children with other first languages should all be gathered from around the entire US into a 4-week summer science program in a local urban school (deceptively called a 'camp'). All this was enthusiastically endorsed by the local newspaper in an editorial (*Syracuse Post-Standard*, 9 July 2008, p. B3 *&* 11 July 2008, p. A12). In the past, such children used to learn English almost overnight by being integrated with native English-speaking children. Now the children are supposed to learn English by being around children who all do not speak it! This is a good example of ideology overriding scientific empiricism.

*Skinner, C.E. (Ed.). (1936; 1937 printing). *Educational psychology.* New York: Prentice-Hall. (Prentice-Hall Psychology Series.) About 16 illustrious writers contributed to this book, including some leading authorities in their fields. In Chapter 16 (of 25) on "Intelligence: Its nature, development and measurement" by Paul Witty (the authority on giftedness in those days), there is a section on "The feebleminded and the dull" (pp. 464-469) which reported on a little-remembered 1932 study of 540 special segregated classes, with almost 12,000 children! Essentially, what these children got was the so-called 'watered-down curriculum.' Play in special classes was said to have been of the kind that had little value. The author said that since almost all teachers will deal with 'retarded' children, they need to be better prepared for it.

*NBC TV *Nightly News* of 30 January 2000 carried a story about a 7-year old boy in an elementary school in Lincolnshire, northern England, who is profoundly deaf. (He also obviously had cerebral palsy, though this was not mentioned.) The school district wanted to place him in a special school for the handicapped, but neither his schoolmates, the teachers nor his family wanted that to happen. So a large proportion of his fellow pupils learned sign language, and the vast majority of his class became fluent in it; they present school assemblies, plays, etc., both in spoken and

sign language. He has an aide who works with him almost full-time, and he is now going to stay in the regular school system.

*A very scientific article (with many statistical tests and 5 charts) in *Child Development* in December 1989 announced that the integration of handicapped children in wheelchairs is facilitated if they are accompanied by a dog, because the dog will elicit interactions from other people. One conclusion reached was that "service dogs may assist in normalizing the social interactions for children with disabilities."

*Some handicapped children taught non-handicapped children to play basketball in wheelchairs. In consequence, a number of non-handicapped children acquired wheelchairs so that they could play wheelchair basketball. One child cried bitterly when he discovered that contrary to his hopes, his parent had not given him a wheelchair for Christmas (source information from Dr. Jimmy Calloway).

*A large headline in the *Syracuse Herald-Journal* (26 Nov. 1998) proclaimed, "Girl Conquers Albinism to Become Cheerleader." Did she turn some other color? No; the cheering team gradually accepted her.

*A star baseball player of the late 1800s was deaf, and asked an umpire to signal strikes with his right arm. He did, and others adopted the same custom which has persisted to this day. The fans also accommodated the deaf player by standing and waving their arms and hats whenever they wanted to applaud him (Significa column, *Parade Magazine*, 31 July 1983, submitted by Dr. Bernard Graney).

*In 17th century England, nonconformist religious groups (Baptists, etc.) developed a custom of treating their insane or unhappy members by jointly fasting with them, and meeting with them for prayers, often in the houses of these afflicted persons. While some of this was interpreted as a form of exorcism, it really was also a way of socializing together, and affirming group membership. This seems to have been a very effective approach, as SRV would have predicted (MacDonald, M. (1981). *Mystical bedlam: Madness, anxiety, and healing in seventeenth-century England.* Cambridge, England: Cambridge University Press).

*Persons with mental disorders have not fared well when they show up in US hospital emergency rooms. In response, in 2008, the American College of Emergency Physicians released a study of emergency room directors, 80% of whom recommended the establishment of "dedicated emergency psychiatric facilities." However, where that had been done, it was found that such patients were treated even worse, often with utmost callousness, neglect and abuse (Interlandi, J. (21 July 2008). The woman who died in the waiting room. *Newsweek*, 48-49). SRV could have warned of this. After all, such 'dedicated' units are segregated, and totally under psychiatric control, which has not been good for people for about 130 years. At least in generic emergency services, they are treated more 'like everyone else,' problematic as that may be. There is more public scrutiny, more valued people are among the clientele, the staff is 'generic,' etc. Many more protective elements are in place.

Normalization & Social Role Valorization Forerunners

*Parry-Jones, W.L. (1972). *The trade in lunacy: A study of private madhouses in England in the eighteenth and nineteenth centuries.* Toronto, Ontario, Canada: University of Toronto Press. From this book, we learn the following items of relevance to SRV.

A practice that became very common in England in the 18th and 19th centuries was for private institutions to cluster in certain locales. This was either because the locale was a popular vacation spot, such as around Bath and Bristol, or because employees of an asylum believed that they

had learned enough to now open their own asylum, and they would do it in the area where they had worked and with which they were familiar. For this reason, the Oxford area also had a cluster of asylums, despite the small population there.

A Quaker physician, Edward Long Fox, started a small private madhouse at Cleeve Hill, Downend, near Bristol, England, in 1794. He was among the first private proprietors to practice humane treatment without restraints. He continued this practice when he built a new palatial facility in the same area in 1806, called Brislington House, which he ran until 1829, to be succeeded by two sons. Family members continued to run the establishment until 1951. Brislington was long considered the best private asylum. There was excellent food, greyhounds were kept for the residents' amusement, and some inmates had fancy pets such as pheasants and doves. In some moral treatment asylums, residents could have their own personal servants, and some kept carriages and horses, or exotic pets such as eagles. Some had entire aviaries.

Many moral treatment facilities emphasized bodily activity, which we now know to be a universally beneficial strategy for almost anything that ails one. Also, many such facilities held joint morning and evening prayer sessions with the director's family, which was said to have very beneficial effects, perhaps because it motivated self-reflection, or what is now called 'mindfulness.'

Writers of the moral treatment era often commented on what we would now call the expectancy effect, namely that inmates tended to respond the way they were expected to, as communicated to them by the attire they were given, the tasks and roles, the physical environment, and of course, verbal means (p. 183). In some establishments, inmates were dressed like ladies and gentlemen in fashionable and high-quality clothes, and had their hair done up accordingly ("**bien poudré, fries, et arrangé**").

There were other harbingers of the normalization principle. It was commented on by an English asylum proprietor in 1864 that the smaller private asylums "rendered life as much like home as possible and enabled those who are mentally afflicted to conduct themselves as much as they can like other members of society. The more this is done, the more successful generally will be the treatment" (p. 184).

In many asylums, the moral treatment movement resulted in a recovery of an inmate's former societal work and occupational role, much as had been the case in many early Christian and medieval hospices. For instance, a former craftsman might be enabled to set up a shop at the facility, to enable him to practice his occupation as a tailor, cobbler, candle-maker or whatever (p. 183).

Wealthy families sometimes employed special attendants for their idiotic children, the same as they employed governors and governesses for their other children (p. 188).

More on the History of Normalization

*Overholser, W. & Richmond, W.V. (1947). *Handbook of psychiatry.* Philadelphia: J.B. Lippincott. Surprisingly, this book is not written for psychiatrists, but for the public. Interestingly, on p. 55, the question is posed, "Can't training in a special school or under a psychologist normalize a child?" and the reply is "The answer can only be no."

*Jancar, J. (1986, June). The history of mental handicap in Bristol and Bath. Part 1. *Bristol Medico-Chirurgical Journal, 51,* 53-56; Jancar, J. (1986, August). The history of mental handicap in Bristol and Bath. Part 2. *Bristol Medico-Chirurgical Journal, 51,* 79-81. This series of two articles briefly reviewed the history of several residential institutions for people with mental retardation in the area around Bath and Bristol in the west of England. The oldest of these, Holy Cross Hospital in Bath (later called St. Mary Margaret Hospital), had once been a leprasorium. The second article concluded with the following acerbic comment (p. 81) about community services and normaliza-

tion that was quite out of character with the rest of the matter-of-fact scholarly text.

> *A recent wave of the 'magic' solutions for Mental Handicap, that everybody should be cared for in the community, thus resolving all the problems, is spreading through America, Scandinavia and Italy to this country–spearheaded by an Alliance with monetarists and so called 'normalisers.' Unfortunately the Alliance got the sums wrong. Community services, if run properly, are not cheap and 'normalisers' are not resolving the variety of mental and physical problems facing patients and families, but sometimes causing new ones. There is a gradual admission of failure by this Alliance and they are bringing a new idea of 'Advocacy' to cover the shortcomings of the philosophies they created.*
>
> *In a recent report by the Social Services Committee–Community Care–to the House of Commons, the statement was made 'Any fool can close a hospital' and may I add to it that 'Not any fool can look after the Mentally Handicapped.'*
>
> *I wish to conclude this address with the dictum from Cicero 'DUM TACENT, CLAMANT'–'While silent they cry aloud'–while the Mentally Handicapped are suffering their disability in silence, they are crying aloud for your help and mine.*

The author was a psychiatrist working at Stoke Park, a mental retardation institution in Bristol, and had junior-authored (with R. Eastham), a text on *Clinical Pathology in Mental Retardation* (with many autopsied brain pictures) in 1968. By the term 'mental handicap,' he meant mental retardation. He was totally oblivious to the fact that the idiot asylum in Bath that evolved out of the Holy Cross Hospital had been a small community group home.

Dr. Wolf Wolfensberger is Professor at Syracuse University & directs the Training Institute for Human Service Planning, Leadership & Change Agentry, Syracuse, NY, USA.

The citation for this article is
Wolfensberger, W. (2008). Social Role Valorization news & reviews. *The SRV Journal, 3(2),* 62–78.

The SRV JOURNAL

ISSN 1932 - 6963 www.srvip.org

A journal for those interested in applying Social Role Valorization with the goal of making positive change for societally devalued people

* **The purposes of publishing this journal include:** 1) disseminating information about SRV; 2) informing readers of the relevance of SRV in addressing devaluation in society & in human services; 3) fostering, extending, & deepening dialogue about & understanding of SRV; & 4) encouraging the application of SRV as well as SRV-related research.

*** Two year subscription rates in USD ~ two issues per year:**

		North America	International
Family/Student			
	Print	65	85
	PDF	*50*	*50*
Individual			
	Print	85	105
	PDF	*65*	*65*
	Print & Pdf	105	125
Organization			
	Print	150	170
	PDF	*125*	*125*
	Print & Pdf	180	200
Library			
	Print & Pdf	*275*	*295*
	& Back Issues in Pdf	400	420

*** To subscribe online, with a credit card, please access:**
http://www.srvip.org/journal_pay_online_choose.php

*** To pay by check, please send your name, street address, phone number, & email address, plus a check or money order in USD made payable to *The SRV Journal*, to:**
The SRV Journal, Subscription Manager
74 Elm Street, Worcester, MA 01609 USA

*** For more information, please contact:**
Marc Tumeinski, Editor
Phone: 508.752.3670 ~ journal@srvip.org ~ http://www.srvip.org