The SRV JOURNAL

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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.[†]

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, by studying relevant resources (see page 4 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.

A Brief Description of Social Role Valorization

From the Editor

In every issue we print a few brief descriptions of SRV. 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 from: Wolfensberger, W. (2013). *A brief introduction to Social Role Valorization: A high-order concept for addressing the plight of societally devalued people, and for structuring human services* (4th ed.). Plantagenet, ON: Valor Press, p. 81.

> *... 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 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 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.*

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.

Resources to Learn about Social Role Valorization

From the Editor

• **A brief introduction to Social Role Valorization**, 4th expanded ed. Wolf Wolfensberger. (2013). (Available from the Valor Institute at 613.673.3583)

• **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 315.443.5257)

• **A quarter-century of normalization and Social Role Valorization: Evolution and impact.** Ed. by R. Flynn *&* R. Lemay. (1999). Ottawa: University of Ottawa Press. (Available from the Training Institute at 315.443.5257)

• **A brief overview of Social Role Valorization**. Wolf Wolfensberger. (2000). *Mental Retardation, 38*(2), 105-123. (Available from the Training Institute at 315.443.5257)

• **An overview of Social Role Valorization theory.** Joe Osburn. (2006). *The SRV Journal, 1*(1), 4-13. (Available at http://srvip.org/about_articles.php)

• **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. (Available at http://srvip.org/about_articles.php)

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

• **The SRV Implementation Project website, including a training calendar** www.srvip.org

• **SRVIP Google calendar** http://www.srvip.org/workshops_schedule.php#

• **Blog of The SRV Implementation Project** blog.srvip.org

• **Twitter feed** @srvtraining

• **Abstracts of major articles published in *The SRV Journal*** https://srvjournalabstracts.wordpress.com/

• **Social Role Valorization web page (Australia)** http://www.socialrolevalorization.com/

• **SRV in Action newsletter (published by Values in Action Association) (Australia)** viaainc@gmail.com

• **Southern Ontario Training Group (Canada)** http://www.srv-sotg.ca/

• **Alberta Safeguards Foundation (Canada)** http://absafeguards.org/

• **Values Education and Research Association (UK)** http://vera-training.webs.com/

• **A 'History of Human Services' course taught by W. Wolfensberger *&* S. Thomas (DVD set)** http://wolf-wolfensberger.com/

• **Video of Dr. Wolfensberger teaching on the dilemmas of serving for pay** http://disabilities.temple.edu/media/ds/

FROM THE EDITOR

Most of the articles in this issue of *The SRV Journal* are directly or indirectly related to the implementation of Social Role Valorization (SRV) *&* the application of PASSING. Wolfensberger did not envision SRV solely within a theoretical or academic context, but rather with a focus of protecting societally devalued people from wounding *&* of increasing the likelihood of vulnerable people having access to the 'good things of life.' In this issue, you will read implementation-related articles on the following topics:
• an application of PASSING for program evaluation
• some positive fruits coming out of PASSING training in the UK
• strategies for helping a societally devalued person to get out of (or exit) devalued roles
• an application of the SRV theme of interpersonal identification by a teacher in a classroom
• an exploration of the 'role goals' as laid out in the SRV monograph *&* SRV-10 leadership workshops
• an analysis of helpful competencies when applying SRV

  We can see the focus on implementation played out in so many of the training *&* leadership structures which have developed around SRV, from the local to the national *&* international levels. Clearly, even more can be done, but there is much to build on. I share a few examples below that I am familiar with, *&* I am confident that there are many more which could be added from all over the world where SRV is taught. I encourage our readers to share such examples with the *Journal*.

  Leadership-level SRV workshops with the '10 themes' include solid *&* practical teaching material on implementation, *&* this unsurprisingly is often the topic of Q*&*A periods during workshops. Introductory PASSING workshops give participants multiple opportunites to practice applying SRV concepts within a team context. The most recent versions of the SRV monograph authored by Wolfensberger contain various practical heuristics for implementation, and implementation is also the particular focus of several chapters in the recently published *Advanced Issues in SRV Theory* book.

  The mission of the North American SRV Training, Safeguarding *&* Development Council connects directly to the relationship of teaching, training *&* implementation, *&* ways that the theory can be implemented. This is in part because the Council wants SRV knowledge to be used so as to combat devaluation *&* its resultant wounding, *&* to help devalued parties to become more positively valued in society. The model of training people to teach SRV which is used by the North American Council emphasizes: implementation, efforts to help teach *&* actualize the content of SRV theory, personal engagements with wounded people, *&* experience in or with human service. The majority of the members of the North American Council are themselves implementers of SRV. The publisher of this *Journal*–the SRVIP–has a mission of fostering implementation of SRV theory.

  We have seen development of workshops focused on particular implementation points (e.g., on topics such as protecting vulnerable people in the hospital, putting the 'stepwise regimen' described in SRV material into practice, fostering personal social integration *&* valued social/societal participation, etc.). We have seen the building up of local groups, in various geographic areas, which are committed to SRV training *&* implementation. Often, members of these local groups are staff *&*/or family of human service agencies. Recently, in the US, two different agencies invited SRV-based evaluation (one via PASSING; the second through a roles-based assessment) of their programs, carried out by team members well trained in SRV *&* PASSING. Again, these are only some examples that I am familiar with. I encourage our readers to send us other examples of SRV implementation *&* application of PASSING.

Announcing the availability of
APPEAR:
OBSERVING, RECORDING & ADDRESSING
PERSONAL PHYSICAL APPEARANCE
BY MEANS OF THE APPEAR TOOL
a publication by Wolf Wolfensberger[†]

PERSONAL APPEARANCE (INCLUDING SO-CALLED 'SELF-PRESENTATION') is certainly one of the most immediate, and often also one of the most powerful, influences on how a person will be perceived and interpreted by others, and in turn, on how others will respond to and treat the person. Personal appearance is also one of the domains of social imagery, which is a big component of Social Role Valorization (SRV): the more observers positively value a person's appearance, the more likely they are to afford that person opportunities to fill valued roles, and thereby access to the good things in life. Unfortunately, the appearance of many members of societally marginal or devalued classes is far from enhancing, or is even outright repellent to many people, and increases the risk that bad things get done to them, or that good things are withheld from them.

This 2009 book explains all this. APPEAR is an acronym for **A P**ersonal **P**hysical Appearance **E**valuation **A**nd **R**ecord. It documents the powerful influence of personal appearance on attitudes, social valuation and social interactions. The book explains the many components of personal appearance and the ways in which these features can be changed for better or worse. It also includes a very detailed checklist, called the APPEAR tool, which identifies over **200 separate elements** of personal physical appearance, so that one can review a person's appearance features from head to toe, noting which are positive, which are neutral, which are negative–all this with a view to perhaps trying to improve selected aspects of a person's appearance about which something can actually be done. The book also explains how such an appearance review, or appearance 'audit,' would be done.

The book contains a sample APPEAR checklist at the back, and comes with three separate checklist booklets ready for use in conducting an individual appearance audit. Additional checklists may be ordered separately (see order form on next page).

Reading the book, and especially using the APPEAR tool, can be useful as a consciousness-raiser about the importance of appearance, and in pointing out areas for possible appearance improvement. An appearance audit using APPEAR can be conducted by a person's service workers, advocates, family members and even by some people for themselves. It could be very useful in individual service and futures-planning sessions, and in getting a person ready for a new activity, role or engagement (for instance, before entering school or going on a job interview).

Studying and applying the APPEAR tool can also be a very useful follow-up to Introductory SRV training, as it deepens one's understanding of image and appearance issues.

ORDER FORM ~ APPEAR

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	Indicate Quantity	**Price (see below for prices)**
APPEAR book	_____	$ _____
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Some Belated Thoughts on Life-Saving from the October 2000 World Citizen Advocacy Congress in Omaha, Nebraska (US)

Wolf Wolfensberger[†]

EDITOR'S NOTE: *Our practice has been to publish any previously unpublished material authored by Dr. Wolf Wolfensberger of which we were in possession, even if the text is not directly connected to Social Role Valorization. This article falls into that category, although readers will find it easy to make connections from this article to SRV.*

Readers will also be interested to know that a world Citizen Advocacy gathering has been scheduled for September 2014 in Omaha, Nebraska (US).

THE FIRST WORLD CONGRESS on Citizen Advocacy took place in Lincoln, Nebraska, in October 1990. Upon returning from the second world congress in Omaha, Nebraska, October 2000, I made some notes about the thoughts that had occurred to me at, or after, that congress, some of which might be of interest to others.

A number of the presentations dealt with the risks to life of impaired people, and how Citizen Advocacy becomes life-saving in so many instances. In fact, the challenge of saving the very lives of protégés came up so often during the conference that one could almost have called it a sub-theme thereof. Many advocates have been successful in saving their protégés' lives, and some advocates keep saving the same protégé from death over and over. I was somewhat amusedly impressed by John Murphy's comment that a Citizen Advocacy coordinator had not yet become a "real" coordinator until he or she had recruited an advocate to save a protégé's life.

Among other things, we learned from the many stories told by advocates and advocacy office coordinators that the institution of "do not resuscitate" (DNR) orders is now almost routine for vulnerable people everywhere in the health system, in part as a result of subtle and insidious pushing by medical personnel to get people to agree to this. Many Citizen Advocacy vignettes also inform one that one of the motives that is persistently behind an advocate's resistance to DNR orders for a protégé is a valuing of the protégé at issue.

Particularly instructive were vignettes where one might have thought that further medical efforts on behalf of a debilitated protégé would indeed not be helpful, or even outright torturous, as the medical culture commonly claims, and/or that a DNR order would be justified–but then it turned out that through the aggressive defense of life by advocates, such judgments were shown to have been invalid, or at least premature; and that with a vigorous stance of defense of life, not only were lives saved, but even some recoveries were made. What this underlines is the validity of the principles we have been teaching that should govern life supports, namely, that when one functions as an advocate for another party, and particularly a very vulnerable party, one needs to be much more conservative (i.e., forward) on the side of life than one would be for oneself.

It was also pointed out at the congress that even when people can be validly characterized as "dy-

ing," they can nonetheless be wrongly "hastened to death," as A.J. Hildebrand put it. ✌

WOLF WOLFENSBERGER, PHD, developed both Social Role Valorizaton & Citizen Advocacy, & authored over 40 books & 250 chapters & articles. He was Emeritus Professor at Syracuse University & directed the Training Institute for Human Service Planning, Leadership & Change Agentry, Syracuse, NY (US).

Save the Date~Save the Date~Save the Date~Save the Date

The 6th Annual International Social Role Valorization Conference

June 10-12, 2015
Biltmore Hotel, Providence, Rhode Island (US)

http://srvconference.com/

This exciting conference runs from Wednesday to Friday, with pre-conference workshops on the Monday & Tuesday prior. If you are considering other visits before or after the conference, we encourage you to think about these two possibilities:

- Local conference organizers are pleased & ready to help arrange local study tours relevant to human services, art, architecture &/or history.
- Visits to nearby Boston, Newport, Cape Cod or New York City.

The registration fee for the conference, including meals, is $500 USD. The conference rate for rooms at the Providence Biltmore is $170 USD per night. Each room has two king-sized beds & kitchenette; the cost is **per room**, not per person. Consider sharing a room with colleagues to split the cost. Register for hotel rooms directly with the Biltmore Providence, & be sure to tell them you are with the 2015 SRV Conference: http://providencebiltmore.com/ or call 401-421-0700.

While the conference is over a year away, we understand that some of you might have financial allocation & timing reasons to register early. Registration options:

- Send a check made out to "Keystone Institute" to Betsy Neuville at Keystone Institute, Suite 200, 940 East Park Drive, Harrisburg PA 17111 (US).
- To pay by credit card or electronic fund transfer, email Betsy at eneuvill@keystonehumanservices.org.

Scholarship assistance may be available. Contact Jack Yates to get your name on a list for possible scholarships: jyates@peopleinc-fr.org or 508-468-8923.

Save the Date~Save the Date~Save the Date~Save the Date

PASSING~A Workshop that Works: Using the PASSING Instrument Collaboratively to Assess the Quality of a Human Service

Elizabeth Neuville *with* **Paul Snyder** *&* **Emily Robinson**

Background

IN JANUARY OF 2013, the PASSING instrument was used in a small human service in Pennsylvania as a means for service evaluation and assessment. This was the first time in close to two decades that PASSING was used within this organization in this fashion, although it has been consistently taught as a part of a workshop for many years. Both the evaluation team and the service workers learned a great deal through this, and we hope to communicate some of this learning to others who may serve on an evaluation team, request one, or host one.

PASSING as an Evaluation Instrument

FOR THE PAST 30 YEARS, PASSING, and its predecessor instrument, PASS, has served dual purposes. It is a 42-item assessment tool that, when used by experienced evaluators, provides an in-depth assessment of the quality of a human service based on the framework of Social Role Valorization. Assessed services receive a numerical score based on the assessment scale, and the accompanying sub-scores and recommendations can yield a multitude of ways to improve service quality.

It can also be used as a foundational tool for a workshop, in which participants who have attended an in-depth theory workshop in Social Role Valorization can deepen their learning. In this situation, the tool is used by a small team of SRV-trained participants, under the leadership of an experienced team leader and a senior workshop supervisor. Team members evaluate several human services (usually two), by conducting extensive interviews, observing the service in operation, and spending time with the people who are served by the program(s).

Many PASSING course graduates find participation in a PASSING workshop a clarifying and illuminating experience, as they observe the principles they learned in the theory course "come alive" and be evidenced in a human service. In fact, many participants who go on to take on leadership roles as educators and implementers of SRV report that attendance at a PASSING workshop was one of the most impactful professional and personal learning experiences they have ever had. Although first-time attendees at an SRV theory course often report the experience to be extremely valuable and helpful, experienced SRV teachers have noted that the specifics of SRV–such as the use of the conservatism corollary or the use of role expectancies, for example–seem to fade quickly and become "fuzzy" to SRV course graduates. PASSING graduates, however, become much clearer about SRV theory itself, and the specifics of it seem to "take hold" in their minds.

It is this latter purpose that has become the primary use of PASSING in recent years. The organizations which teach PASSING tend to do so for the purposes of staff training, and rarely are

the recommendations and results of the evaluation provided to the assessed service. Of course, this makes sense, since the purpose of the PASSING workshop is staff training and development, not to improve the assessed service, which in this circumstance is referred to as a practicum site. It must also be assumed that the team members are generally new to the tool and are just learning how to use it, and so are not conducting a true assessment, and are not in a position to offer feedback and recommendations. The vast majority of PASSING events conducted throughout North America, and perhaps in Australia as well, fall into this category.

Pennsylvania, where this use of the PASSING instrument for service evaluation recently took place, has a history of using PASS (the predecessor tool to PASSING) as an evaluation tool, and it was used systematically to gauge service quality from the 1970's through the 1980's. The ending of this project signaled the end of the use of PASS/PASSING systematically in this state, and this seems to be mirrored in national and international practice as well. PASSING as an evaluation tool is rarely used in its full form to assess service quality. In fact, within Keystone Human Services, the organization which operates the assessed service, it should be noted that the last "official" PASSING evaluation was conducted in 1995, although since that time, over 100 employees have been trained in PASSING via on-going PASSING training workshops held within this organization.

There are many reasons why PASSING as an evaluation tool has become virtually unused. It is a lengthy instrument to implement, with its accompanying processes of analysis and team consensus, requiring multiple days and the use of a team of raters to conduct. Often, the results of the evaluation signal that major changes are needed to improve the structure of the service and the practices within it, and these improvements may be difficult and perhaps impossible for the assessed service to implement. After all, PASSING requires team members to look at what is happening within the service, not why it is happening. This "what, not why" formulation means that often there are non-programmatic issues which drive what is done within the service. These issues are often unrelated to the actual needs of the people served, but are difficult for service providers to change or manage. For example, a service may have little control over who actually moves into a small community home, thus making problems in the grouping of the service recipients exceedingly hard to change. The reality that the grouping may be causing big problems in both the image and the competency of the people living there is one that many service workers may prefer not to tackle, or a reality that they may not be fully conscious of, as there is no easy solution to "fixing" the problem. Recipients of recommendations from PASSING evaluations have not always appreciated the feedback, nor felt it was "fair," as it did not take into account the realities of working within a highly regulated, controlling, bureaucratic system of funding, governance, oversight and management, or the hard work that many people may put into trying to make changes, but not succeeding.

In the fall of 2012, the director of a number of small community homes within Keystone Human Services, Paul Snyder, attended a PASSING workshop as a participant. At the conclusion of the workshop, he requested that a PASSING assessment be conducted by the Keystone Institute on a small community home that he supervises. Initially, my colleagues and I advised him to have a series of program visits conducted by our internal SRV leaders with informal feedback based on PASSING. We also suggested the possibility of using one of the abbreviated PASSING tools that have been developed, for example by Flynn et al (1999). He responded that he wanted a full PASSING evaluation, including the full interview and observation process, holding the foundation discussion, assigning each and every rating, and providing verbal recommendations resulting from the evaluation available to the entire team of service staff. This would be the very first

evaluation at Keystone since 1995. It was interesting that I found myself trying to talk him out of doing the very thing I had been recommending for years across Keystone Human Services. Paul's determination convinced me, and my colleagues and I set about planning for the very best experience for all. We had important discussions about which of the homes that Paul supervised would be the most fertile ground for both accepting and using the evaluation results. A community home where three people with disabilities lived was selected, based on the significant amount of SRV training the support staff had been exposed to and their response to it, as well as the situation in the home itself, where the team felt unsure about what was needed in the lives of the three people they served, but also had a strong sense that things could be better.

Preparation & Groundwork: Setting the Stage for a Fruitful Evaluation

WE MET WITH the direct service and management team of the home as a group ahead of time, in partnership with Paul as the senior leader of the work group. This was very important, as we were able to be clear: about the purpose of the evaluation, what to expect during it, and our availability to work with them over time to coach them on any changes that would be made as a result of the process. We explained the PASSING process itself, what to expect during the program visits, and who the team members likely would be. They had many questions, many of which came from a valid concern that we would be interrupting the home lives of the three people living there, and that they would be uncomfortable. We had very good discussions and brainstorming with them about ways to minimize the team presence. After all, there would be five of us in a small ranch home where three people live, and there were often three service workers on duty at any given time. Rotating our presence so that some people were reviewing records in another area of the house, having single team

members accompany people when they left the home for activities, and simply being aware not to crowd together, were all strategies we decided to use. At the request of the service staff, we agreed not to take notes in front of the people living in the home, and made it clear to the service workers that we would be friendly and focused, with an eye to disrupting as little as possible and being respectful guests to the people living in the home. In general, they expressed some weariness, and wariness, of so many "outside" groups and people sending policies, procedures and new initiatives their way, without being fully aware of the people they serve and their specific needs, and how these policies and directives impacted the work they are doing. By the close of our meeting, they were willing and accepting, but also not certain that they would be able to make changes because of the scarce funding, rigid rules and policies, and other non-programmatic constraints they felt they were burdened with.

We also made sure that privacy concerns and confidentiality agreements were settled ahead of time, and had each team member sign confidentiality pledges, in addition to the service staff gaining releases and permissions from the people served, families, and higher level service leaders within the organization.

Team members were recruited carefully, with potential team members discussed with Paul ahead of time. We knew it was very important to have some team members familiar with formal services of the type we were evaluating, but felt as strongly that we wanted team members who worked outside the more formal systems. We were fortunate to recruit an experienced team member who works in protection and advocacy services in another state, and another team member from another country who works primarily with families, in a less formal and highly individualized fashion. One team member was a supervisor in a service very similar to the one we were to evaluate, who had just recently attended PASSING himself, and "took to" the process. My role was as

team leader, and my colleague at the Keystone Institute, Pam Seetoo, completed our team. Three of the five members had significant experience as team leaders, but none of us had served on a team with the sole purpose of assessment. We had initially planned for six team members, but were glad in the end that there were only five of us, given the physical size and layout of the home, as well as the impact on the people served and the service workers.

Content & Process of the PASSING Evaluation

THE PASSING EVALUATION itself was scheduled over five consecutive days. The first two days were spent in a lengthy interview with the program management (about 4.5 hours over two days), and the remainder spent with the people who lived in the home. The remainder of the time on these two days was spent immersed in observation, conversation, records reviews, informal discussion, and accompaniment as the three people who live in the home experienced life. Team members accompanied the people as they participated in any activities outside the home, went to a day program or ran errands. Some team members arrived early in the morning to see how things happened within the home at that time of day, others stayed into the evening. As much as possible, team members were asked to reserve judgment, and simply collect as much information as possible that would pertain to each of the rating areas, and to get to know the people who live in the home as well as possible in such a short time, both directly and indirectly through the eyes of the service workers.

The third day and evening was spent assigning individual ratings and holding the foundation discussion, which is an in-depth examination and exploration of the life experiences and characteristics of the people who use the service, the team perspectives on what the needs of the people are, what needs are most pressing, and what we might propose would ideally meet those needs. We also discussed what people are receiving through the service, what responsibility or "purview" the service might have in meeting those particular needs, and what the people are receiving from the service. As a preparatory exercise, we also had a brief but important discussion of the "culturally valued analogue" for the service, in other words, what exists in society which valued people have or do in the area this service operates. In the case of the service we saw, that analogue was "good home," and we were able to deepen this discussion by fleshing out what the attributes of "good, valued home" might be in the lives of people of widely variant ages.

The end of the third day and evening, as well as much of the fourth day, was spent conciliating the ratings among team members. At the conclusion of this process, we identified the over-riding themes, and prepared for our verbal feedback to Paul and the program managers on the next morning. We began the final day with this meeting, where recommendations were made, and all PASSING team members were present for this.

Reflections & Learning from the Process

AS WE CONDUCTED THIS ASSESSMENT, it became clear that this was a much different experience than any of us had previously had with using PASSING as a part of a practicum workshop. It did provide an excellent learning and leadership development experience for each of us, but, first and foremost, assisting the program to identify major strengths and areas for improvement, and giving them strong recommendations that they could use, were the prominent focus areas of conducting the assessment.

One area that was very different from a PASSING training workshop was the tone and conduct of the assignment of team ratings. Anyone who has been on a practicum team recalls that the process of helping each team member understand the rating itself, differentiate it from other ratings, collect the relevant evidence and data, and assist all team members to come to agreement on

each of 42 ratings can be a lengthy process, and one marked by the learning curve of the team. As experienced raters on this team, we spent far less time on the actual rating/conciliation portion of the process than had been our experience in PASSING training workshops. In contrast, we spent a great deal more time discussing and agreeing upon recommendations that emerged from our conciliation process. As a team leader, this conciliation process was extremely different in terms of focus, as I did not have to concentrate firstly on the learning of individual team members and the team as a whole. Instead, we were able to focus on what should be, as well as what could be. As we worked our way through the ratings one by one, themes began to emerge that we wanted to address, as well as long and short-term recommendations based on these themes.

The Feedback Process to the Program

BECAUSE SO MANY STRONG THEMES and recommendations came out of this process, by the time we began to focus on what feedback to give to the service workers and how to deliver this, we realized our work was all but done. We organized the verbal report to them by covering the strengths of the service, and outlined in brief the findings from the foundation discussion. This set the context for describing the four major themes we felt required focused attention, and within each of those themes gave concrete recommendations, both short and long-term, which we felt were important to address and move towards. We were very careful to avoid recommendations that might make only a cosmetic difference, and when there was a danger of this, we made sure to connect that recommendation back to the larger themes, so service workers could see the mindset and rationale behind the recommendation.

On the final day of the assessment, we prepared our feedback carefully and thoughtfully, with an eye to the tone and the setting. We asked Paul to decide who he would like to have present at the feedback meeting, and he selected both the on-

site manager, Emily Robinson, as well as the assistant manager. He asked if we could meet directly with the service workers who are in direct support positions as a follow-up. We found the discussion with Paul and the two management staff to be open, honest and sensitive to the sometimes hard issues to reckon with and face. At the same time, the open, two-way discussion about the recommendations helped all of us to see that the way to move forward was possible, plausible, and that some real difference could be made in the lives of the three people with existing resources. Some of the recommendations were more daunting and harder to put into place, but they were ones that all could see as true and real, and we agreed that knowing that those issues existed within the service left possibilities for change more likely to be taken advantage of, even if not immediately.

We followed up in less than a week with a written summary of the recommendations. This was simply a record of the process and recommendations that we had orally given, and was not a full-fledged PASSING report. We knew it was essential that the service workers have a clear and written set of recommendations which can be shared as the service team saw fit. We did not share this report with anyone else, and left it up to Paul, as the person who requested the evaluation, to share it with more senior management. He did share it widely, which is also an indicator of the earnestness of the people driving this process.

We did not share the scores or sub-scores, and found it helpful to talk about the findings and recommendations without what might have been a difficult distraction at best, and a source of rancor at worst. It is interesting to us that we have never been asked for the scores.

One of the team members met with the direct service staff just a short while later, and found this one of the most rewarding parts of the evaluation. The staff had read the written recommendations, had discussed them, and many of them felt compelled to take on specific issues around the program. One woman, talented at cooking

and hospitality, decided to "take on" the issue of creating mealtimes which would be looked forward to as a time of gracious hospitality, fellowship and even warmth, where the kitchen table becomes a center of household relations rather than a place where log books are filled out and service processes are centered. Others took on issues of assisting a woman to explore and find her own church community, and yet others assisting a young man to take on the role of a vital young man at the cusp of his adult life–exploring and developing his unique personal identity. The enthusiasm and willingness of the staff to see the issues and begin to project the possibilities in people's lives was very promising, the collaborative spirit was more than we could have hoped for, and their ability to "see" creative extensions of the major themes into actions on their part was excellent.

They also gave us helpful feedback about the assessment itself, confirming that team composition matters a great deal, open communication about what to expect is essential, and our availability to continue to work with them over time and provide assistance and coaching gave a sense that we are in this work together, and all working for the same thing. The suspicion and perhaps even the expectation that the information gathered would be "used against them" in some fashion was one that needed to be managed and handled carefully, and we have to ensure that the future PASSING evaluations are conducted with a high degree of care and sensitivity to these issues remains before us.

Personal Narratives

B OTH Paul Snyder and Emily Robinson, program leadership, were asked to write an overview of their general experience with the PASSING assessment, and these narratives follow.

Leadership Response to a PASSING Assessment

Paul Snyder, Service Director, Keystone Human Services

MY INTEREST in a PASSING evaluation occurred after I attended an introductory PASSING course. I found the process truly enlightening and thought–provoking. I thought PASSING would be a wonderful tool to assess where my program was in terms of meeting the principles of Social Role Valorization. There are a lot of barriers to implementing SRV and in order for us to be successful; it has to be a way of life. It has to permeate all that we say and do.

I found that the process is more than the evaluation tool. Great thought had to be given to the team, their receptiveness and understanding, the impact the evaluation would have on day-to-day events, the make-up of the team of evaluators, and of course the findings and recommendations. We took great care to keep the focus on the recommendations and away from the actual score. Only members of the PASSING team know the score. All parties found PASSING to be a great learning experience.

The findings and recommendations were honest and fair. They gave us a lot to think about. It was surprising to learn that most could be easily implemented. We also realized that we have to be very conscious of the findings and recommendations in order to keep us moving forward. We face several challenges now. How do we keep it going? How do we get others involved? And when can I do the next one?

Program Response to a PASSING Assessment

Emily Robinson, Program Director, Keystone Human Services

When Paul approached me with another one of his "grand ideas" to have a PASSING evaluation done at Robin Road, I was a bit hesitant at first. I had never been through PASSING and was a bit nervous about the "grade" we would get. We try so hard to do the best we can for the people we support, but I also know how short we fall in pursuit of the vision and mission we strive to uphold. Once my nervousness and hesitations were addressed by the PASSING team, I was fully on board and excited for the opportunity to help enrich the lives of the people living at Robin Road.

For me, the 4.5 hour interview process was by far the most eye-opening and challenging part of the process. The questions that were asked were very straight-forward and focused a lot on what we thought the most important needs were for the people we support. Whereas I knew that the most important things in life are having people that love and care about them in their lives, the follow up question of "what are you doing to support that?" was hard for me to swallow. With all the rules and regulations, combined with the pressing medical needs of those living in the house, it makes it very difficult to focus on what really matters. The way our system is set up, we are constantly looking whether we are "compliant" in the eyes of the state, but there is not much focus on the principles of SRV and ensuring that we are doing all we can to promote fuller, richer lives. The interview process helped to show me in a raw and somewhat painful way, that there is so much more we can do to make this happen!

The recommendations given to us at the end of the PASSING evaluation have been such a wonderful and useful tool for us at the community home program. There were so many things that could be improved immediately that have already had a positive impact on the lives of the people we support. These ranged from small things, like storing medical and personal care items that are medically-imaged out of sight, to larger things, such as considering options to replace the huge van sitting in the driveway signaling that some-

one with a disability lives here. We have been able to find many small ways to enhance people's images that will go a long way in paving the path towards establishing the freely-given relationships that are so needed by the people living in the home.

When beginning the process, I was hesitant because I did not want to feel judged or looked at negatively because of all the shortcomings they were sure to find. What I found was just the opposite–the team members were clearly people who cared deeply, whose role was to help open our eyes to the vast array of ways that we are wonderful at our jobs, as well as helping us to reach new heights for the people we work for. By keeping us aware that everything we do really does have an impact on the people we support, it helps us to be more thoughtful and to continue to make efforts in the right direction.

Future Considerations

We held a final meeting, not about the specific PASSING evaluation, but about the lessons learned and the experienced of the assessed agency and the PASSING team members. In attendance were the agency Executive Director, Regional Director, Residential Director, and Paul. All agreed that this was a very useful and helpful process, and has direct benefit to the people served as well as the staff. The difficulties and dangers of implementing a wider scale use of PASSING were discussed. Factors that we must take into consideration are the relatively few experienced PASSING team leaders available, the costs and necessity of bringing in those who are from "outside" the service agency, and the need to avoid, in general, the use of direct colleagues as evaluators of similar programs in the same agency. There is also a tendency to "ramp up" initiatives that prove promising, but we know that careful planning and individualized work before and after are part of what made this assessment so positive and successful. Future efforts should preserve this level of care and forethought. Noth-

ing will end the positive momentum more than systematizing the use of the PASSING assessment tool without proper planning, leadership development, capacity building, and follow-up. We look forward to assisting with the selection of promising ground for a future PASSING evaluation within 12 months, and of having the opportunity to serve and support programs interested in providing high quality services to people in a human service system which often makes it difficult to do so. ❧

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ELIZABETH   NEUVILLE,   PAUL   SNYDER   & EMILY ROBINSON work for Keystone Human Services.

PASSING Returns

Rob Henstock, Paul McWade, David Race & Deb Race

Introduction

I**N THE** 1980's **AND** 90's, CMHERA (The Campaign for the Mentally Handicapped Education and Research Association) led the way in bringing the ideas and work of Wolf Wolfensberger to this country. They ran numerous PASS and PASSING workshops around the country and introduced a generation of people to the ideas originally called normalization, and then developed and expanded into the theory of Social Role Valorization (SRV). The ideas were enthusiastically taken up by families and service workers to help vulnerable people, and particularly those with learning disabilities, get better lives. They were also taken up at higher levels in Local Authorities and the National Health Service (NHS) to help fuel the move away from institutions and large scale services.

The ideas of SRV and normalization also underpin the policy document "Valuing People" and the follow-up publication "Valuing People Now" but, as the language has changed to concentrate on "choice, independence, inclusion and rights," the teaching of the underpinning ideas has faded. In fact, until recently, the last PASS or PASSING workshop based on the theory of SRV was run in 2001. Around the country, there are a number of people who see this as an issue, because the detailed understanding that SRV offers about how societal devaluation happens and what might be effective strategies to combat it

can be lacking in the commissioning and delivery of services.

In addition, it is evident that devaluation continues. Discrimination against older people, people with mental health needs, or physical or learning disabilities is well documented (Winterbourne View Hospital being a recent example).

As a result, one concerned group of people got together to form the Values Education and Research Association (VERA) and to offer training courses covering these ideas. Since June 2009, VERA has organised five one-day courses on SRV, and five PASSING courses, which use the practice evaluation of a service to offer a more detailed understanding of the implications of SRV and for the way in which support and services are provided. These workshops have all been run in the North West of England, and four of each have been run with sponsorship from Halton Borough Council, although all have also been open to people other than their employees.

What the Workshops Offer

S**RV AND** PASSING **WORKSHOPS** offer a comprehensive analysis of the way in which societies devalue different groups of people who are perceived as of less worth to society. This can be vulnerable people, such as those who need care and support from others due to impairment, people who are in poverty, criminals, asylum seekers or any other minority group. The analysis

looks at the way provision of support to people who are devalued in society, often unconsciously, add further layers of disability and stigma, extending far beyond the original reason that led to the group initially being devalued. Often such inflicting of further "wounds" is done totally unawares by people aiming to help the vulnerable group. In particular, SRV and PASSING encourage people to look at the images surrounding individuals and the extent to which they are encouraged to develop and display their competence, and how these factors impact on the likelihood of devaluation occurring.

An example of this wounding is the way in the UK that we have a segregated education system for many people with disabilities. This is designed to be an efficient way of using educational resources with additional support offered to children with "special needs," but leads to a number of dis-benefits such as:

• The majority of young people lack a basic understanding and awareness of how to interact with disabled people because they rarely meet them.

• Many disabled people struggle to learn how to interact effectively with non-disabled people.

• Fear engendered by ignorance enters into relationships, and encourages bullying and hate crime.

• Expectations of disabled children are often low so that they do not achieve anywhere near their potential.

• Many disabled children lack more capable role models from whom to learn.

• Disabled adults having to be re-connected with their local communities because they lost natural contacts as children.

SRV does not say that segregation is wrong per se but it does highlight its disadvantages. It also encourages people to be much more conscious or aware of the advantages and disadvantages of any course of action, so that actions can come about as a result of the knowledge of likely outcomes.

Impact

THE OUTCOME OF THESE WORKSHOPS on the way services are commissioned and organised in Halton is written up in more detail below, but a few quotations from the feedback of participants from all over the country (and given to VERA) offers a flavour of the impact the workshops have on participants.

• "it will be so useful having this new awareness of how people can be put at risk of being devalued by the physical and social environment around them"

• "It's 'what it's like' that impacts on people's lives irrespective of the why"

• "I have learnt a new way of reflecting on the work undertaken by my teams that I will be sharing and hopefully using to improve the services we commission"

In order to study the impact of running the workshops done for Halton Borough Council, a survey of participants was undertaken in conjunction with VERA. In the survey people were asked for information in four areas. These areas were:

1. Examples of issues identified in service after attending PASSING and SRV

2. Examples of changes made as a result to service for an individual and outcome

3. Examples of changes made as a result to service generally (e.g., policies, general working practices)

4. Examples of changes made as a result that will benefit the wider community, not just people receiving services

Thirty-five people responded to the survey, and only one person indicated that they could give no examples as the training had not impacted on their practice. In relation to the rest, the main findings are set out below.

1. Issues Identified as a Result of Attending SRV & PASSING

THESE CAN BE GROUPED in three main areas. The most common response to this question was that

staff in Halton have become much more aware of the imagery of the service settings, and the importance of imagery in affecting the perceptions the public have of people who use the services. Out of 35 responses, ten people made specific mention of this issue. This was predominantly in relation to the quality of housing used for supported living services and the venues used for day services.

The second most common issue identified was in relation to what activities are provided by support services. Respondents expressed an increased awareness of the importance of having meaningful activities that provide employment for those of working age, not just leisure, and that services should teach new skills that build on existing skills. Overall, the lesson learnt was that staff should have higher expectations of the people supported.

Finally, about one third of the respondents had been struck by how they noticed more "some lack of sensitivity and awareness by colleagues," when they returned to their workplace after PASSING. This was particularly noticeable in the interactions between members of staff and people using the services. It is encouraging that when people have looked at their own service, they have been able to admit that "… although we did well in some areas, there was still room for improvement."

2. Examples of Changes Made for an Individual & the Outcome

THE RESPONSES MAINLY REPORTED an increase in promoting independence for people who have previously been "cared for." Other general comments concerning outcomes for individuals were "more people are travelling independently," "people are taking more pride in things they are involved with," and "people are feeling a sense of ownership of new ventures." As one person summarised it, "Lots of little things for lots of people." All of these things have contributed to raising expectations for everyone.

Individual examples can be divided into those that are concerned with image, and those that in-

volve developing competence. The change made for one man in his own house was to move the wheelie bins away from the front of his house. This led people to also make sure the lawns are kept tidy, and the man is taking a lead role with neighbours to do more recycling of rubbish. Other examples that had a positive outcome for individuals covered a range of activities including: asking one nursing home to change the radio station as it was suitable for young staff but no one who lived there wanted to listen to it, putting curtains up at bathroom windows, and taking down food hygiene ratings from the front windows of residential services.

Examples that involved developing competence were very different, covering people with a wide range of disabilities. One involved changing expectations of the person's parent, which resulted in that person becoming more independent in different ways that included "being fully dressed the majority of the time, accessing different rooms in the house, and eating using plates and cutlery." Overall this led to a total improvement to her daily life. A second example concerned a person who had attended a day centre for over twenty years who has found a voluntary job as a companion in a nursing home one day per week. It is hoped that the number of days will increase and that it will become paid work.

One final example concerned a woman who used to spend her days "trawling through catalogues." She was described as "difficult to engage and motivate." Although she had no experience of work, the staff recognised her potential. They arranged 'taster' sessions in three business areas: trainee stylist in hair salon; customer care assistant in Shop Mobility; clerical assistant in a Council office. This woman took to the different roles "like a natural" and agreed to take part in the making of a promotional DVD for the Council. Overall, the outcome for individuals is best summarised by one of the respondents who wrote, "give previously disadvantaged people a valued social role and they will respond to the challenge with such positivity and enthusiasm.'

3. Examples of Changes Made to the Service Generally, Including Policies & General Working Practices

STAFF WHO ATTENDED THE SRV and PASSING training were mainly managers, with some senior support workers, and support workers. Most responses focussed on day services and supported living services, with some managers referring to other services and staff training.

Halton Borough Council had already made significant changes to services, involving the closure of all day centres and the move to all day services being focussed on 'small business areas.' This involvement in small businesses has changed how people are perceived. Whereas previously they were service users, they are now in different roles, like trainee stylist in the salon or Customer Care in Shop Mobility. As one respondent wrote, "the whole approach is based on an employee style development," with job descriptions and appraisals. Another respondent reported that for her the change was epitomised by a conversation she overheard when visiting Shop Mobility: a paid member of staff referred a customer to her colleague, who was someone being supported in the role. Now, what PASSING adds to these service developments is an increased awareness of the ways in which such 'new' services can potentially ossify, leading to the initial gains for service users slowly being eroded. This happens, not because staff deliberately act that way, but rather because the creation of community based-alternatives to traditional services can be seen as an end in itself, rather than as a necessary, but not sufficient condition, of improved outcomes. This is why, for example, PASSING requires participants to focus on the intensity of time use for service users.

One of the senior managers in day services reported that they are "now supported in raising expectations and improving outcomes by more formal recordings to evidence opportunity, plans and progression." A senior support worker described this more graphically as "more recording/ paperwork, which is not always popular, but most acknowledge it as evidence of service success." She added that staff are "generally more amenable to changes . . . when previously some needed to be dragged kicking and screaming."

In supported living services, a Principal Manager wrote that they are in the process of "dispensing with 'void-filling culture' that puts financial consideration above need to minimise physical or social distances." Other managers gave specific examples of changes to working practices, including abolishing 24-hour shifts, advocating healthy eating, weight reduction, and accessing medical treatment. There has been an increased awareness of the link between behaviours that challenge services and the state of someone's health, as well as an awareness of the subsequent cost savings that will be made over future years.

There were two examples from Commissioning Managers who work with independent providers of services. The first one described the re-tendering of an established respite service to move to a short breaks model, in order to "underline the valued customer/guest role."

The second example from Commissioners was in relation to the shortage of accessible accommodation, made more noticeable by the increase of young adults with profound and multiple learning disabilities, as well as an aging population encountering more health problems. Halton Borough Council identified capital funding to assist housing providers to meet the additional costs of single storey accommodation. The important point here is that the Council has now rejected large scale 'units' in favour of more dispersed accommodation.

As well as examples from direct and indirect service provision, the impact on staff training was also recognised. Staff are given more support to facilitate engaging in "… positive interactions, thereby reducing devaluing practices."

The overall impact on services provided is summed up in the following response: "Effects for staff and managers include higher job satis-

faction, stable staff teams with low turnover, personal growth and development leading to better practices and higher skill levels."

4. Examples of Changes that will Benefit the Wider Community, Not Just People Receiving Support Services

THIS WAS THE MOST DIFFICULT area for respondents to identify, possibly because they are more focussed on improving the services they provide, rather than on how they benefit others. Most of the responses focussed on the benefits of disabled people being accepted more and changing negative attitudes.

However, some staff did recognise that the new day service model provides services specifically for the benefit of the wider community. These include Shop Mobility, community cafés, hair and beauty salon, market gardeners, micro brewery, and craft products.

Two specific examples are especially encouraging. Some members of staff and people they supported in a music group have formed a band. They now use a public area called The Studio for rehearsals, rather than the day service base, and as a result of being seen here, they have received two bookings, and a café has opened to cater for more people coming in to see the band. Secondly, the services have opened a café in a community centre, and set up a meal deal for local people, offering three courses for £3, using local produce. Not surprisingly, it is proving to be a successful venture.

Summary

SRV AND PASSING WORKSHOPS help people develop a deeper understanding of the different ways in which services can, often unconsciously, contribute to the way in which society devalues people who make use of those services. By developing that deeper understanding, staff can challenge existing practice and formulate options for improving both practice and outcomes. ❧

ROB HENSTOCK, DAVID RACE & DEB RACE are members of VERA (Values Education & Research Association) in the UK, & PAUL MCWADE is from the Halton Metropolitan Borough Council.

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More than Just a Tourist: Interpersonal Identification & the Elementary School Teacher

Stephen Tiffany

Introduction

THROUGHOUT THIS PAPER I will relate my experiences as a grade four teacher to the Social Role Valorization (SRV) theme of Interpersonal Identification, and explain why I believe it is a necessary element of teaching practice. As well, I will make the argument that fostering Interpersonal Identification plays an integral role in helping teachers to establish themselves as a role model for their students.

For the duration of this paper, I will use the definition of Interpersonal Identification as described by Wolfensberger (1998) in his introductory Social Role Valorization text:

> *Interpersonal Identification means that one person sees another like him or herself, as having things in common; perhaps the person even sees him or herself in the other. The more people identify with each other, the more they are likely to want good things to happen to each other, and the more they are likely to do or provide good things to each other. The less people identify with each other, the less likely they are to want and do good things for and to each other, and they are certainly less likely to go out of their way to be and do good to others. (118-119)*

Aside from being a useful tool in strengthening relationships in the classroom, Interpersonal Identification can also facilitate greater social integration for those involved (in this case, elementary school students), especially through the approach of having devalued people look to those with more adaptive identities as role models.

Why is Interpersonal Identification Important for Teachers?

INTERPERSONAL IDENTIFICATION IS AN IMPORTANT concept for elementary teachers working in today's schools. Contrary to practices of the past, teachers today do not always work in the same neighborhood in which they live, or even in the same locale. Instead, teachers may find themselves working in schools where they are largely ignorant of the cultural backgrounds, family dynamics, and community histories of the students who attend. Under such conditions, teachers may find themselves in the role of what Lundy and Swartz (2011) refer to as tourist: "We need to stop and gain information so that we are not seen as tourists in the school community but as people who are part of the wider community and who have an interest and a stake in what is happening there and in our classrooms" (9). Given the nature of how public school systems are organized today in North America, how does one avoid playing the tourist role in communities where they are outsiders? I believe that part of the solution lies in the concept of Interpersonal Identification. For teachers to be effective in the classroom, they

must forge a connection with their students, identifying the commonalities they share. Strategies offered in the Interpersonal Identification theme of SRV can help teachers to achieve this.

Thomas and Wolfensberger (1999) outline some of the ways in which Interpersonal Identification can be facilitated: "... helping people to be more 'approachable,' trying to ensure that the contact between people is positively experienced by each party, and helping each party to see the world through the other's eyes, to experience the world the way the other party does, and to empathize and sympathize with each other" (153). Before I outline the ways in which I used some of the methods listed above in an attempt to facilitate Interpersonal Identification amongst myself and my students, I will provide a description of who the students were in terms of the challenges and vulnerabilities they faced in their lives.

A Brief Description of the People Involved

THE SCHOOL that I refer to in this paper was located in a mid-sized city in southeastern Ontario. The school was situated in the north-end of the city, a geographic distinction in this city similar to "the wrong side of the tracks." Several low-income housing units were located across the street from the school (referred to as "the units") and a large minority of the student body lived there. The majority of the students came from an impoverished background, with many families relying on social assistance to make ends meet. The residents of this community, and thus the students at the school, were subject to several of the wounds outlined by Wolfensberger (1998, 13-14) in SRV, including the wound of being "... considered second-class citizens ..." as well as being systematically rejected by most others in their community. As a result of the above wounds, the students in my class were at risk of being cast into several different devalued roles (Wolfensberger, 1998, 14-16) including menace, object of dread, object of ridicule, object of pity, and burden of charity. Teaching in an environ-

ment where all or some of these devalued roles are present arguably changes the nature of the teacher role, or at least makes it difficult to perform the teacher role in its traditional manner.

The above description of the students at the school where I was teaching highlights what was to become a major challenge for me in my attempt to foster Interpersonal Identification; namely, how can one convince members of a devalued class to identify with people from valued society. Wolfensberger (n.d.) recognized this issue and listed it as one of the two practical challenges of Interpersonal Identification relevant to SRV: "... how to get certain devalued people to identify with persons who live adaptively and to look to them as models" (14). As an outsider in the community, it proved to be an initially difficult task to prove to my students that I was someone who deserved their respect.

It was into this milieu that I entered a grade four teaching assignment as a brand-new teacher, taking over from the previous teacher after the Christmas break. The students were immediately skeptical of me and justifiably so; they had gotten along well with their previous teacher and their life experiences thus far had taught them to be wary of adults, who might make grand promises and then leave without a moment's notice. Needless to say, it was an intimidating environment in which I found myself. I had large shoes to fill and these students were suspicious of adults in general. I was an outsider in their community, a community which is traditionally hostile to outsiders. Therefore, how did I convince the students that I was worth listening to?

Strategies for Fostering Interpersonal Identification

IN THE FOLLOWING SECTION, I will refer to the six strategies outlined by Wolfensberger (n.d.) in the SRV 10 workshop (i.e., the leadership level workshop which teaches SRV through 10 themes), in order to illustrate some of the strategies I used in an attempt to foster Interpersonal

Identification between myself and the students I was assigned to teach.

The first strategy listed by Wolfensberger (n.d.) is "Improving the approachability of each party by the other, e.g., via less segregation & congregation" (16). As a neighborhood outsider, I was conscious of the fact that it was I who was most likely to be the devaluer, while my students would be on the receiving end of my devaluation. While there was little I could do to lessen the congregation of impoverished students, I could work towards ensuring that the initial contact I had with my students was of a positive nature, which would be beneficial to both myself and my students.

The second strategy listed by Wolfensberger (n.d.) is: "Improving the likelihood that when contact occurs, it is experienced as positive" (19). During the first few weeks of teaching, I arranged several ice breaker games that were of a more casual nature, allowing both the students and I to converse about the things that we held in common, such as family, hobbies, sporting activities, etc. As well, although I had to establish myself as the source of authority in the classroom, I attempted to establish the new routines, rules, etc., in as gentle a manner as possible, limiting conflict while avoiding the temptation to "rule with an iron fist."

The third strategy suggested by Wolfensberger (n.d.) for fostering Interpersonal Identification is the approach of "Finding and emphasizing commonalities shared by the parties, e.g., by having devalued people participate in typical lifestyles and activities, such as community residences, public education, full-day productive work" (23). In an attempt to foster Interpersonal Identification, I made a conscious effort from the beginning of my teaching assignment to speak about my family life, including my wife and son. Family roles were one of the few things that the students and I shared in common at the beginning of my assignment, so I made an effort to speak about these at length. I mentioned my wife and son in conversation, told stories about them and shared pictures of them with the class. After a few weeks, we planned an afternoon in which they could come meet the students. This strategy highlighted the power of social roles in fostering Interpersonal Identification. Regardless of the class differences between us, we all shared the experiences of family life and the roles that come with it: (big) brother, (little) sister, son, daughter, cousin, etc. By emphasizing these roles in my life, I was helping the students to identify with me and in turn to comprehend the similarities we shared.

Another effort to foster Interpersonal Identification came through further communication of my social roles, for example, that of athlete. Many of the students, especially male students, looked up to and idolized athletes. They placed a high value on athletic skills in general and would brag to other students about their athletic achievements. As someone who has generally been a fair-weather sports fan, this required some effort on my part to better fit the "athlete" role, both in terms of image and competencies. One obvious way that I emphasized my role of athlete was by ensuring that my students saw me in this role on a regular basis; playing catch at recess, volunteering for intramural sports and playing soccer after school. As well, I donned the trappings of the role: running shoes, sports jacket, whistle, etc. In order that my students took me seriously as an athlete, I made sure that I looked like one in front of them, at least on occasion. It was my hope that by emphasizing the athlete role, the students were more likely to identify with me and see us as having common interests.

Of course, when assuming certain roles for the purposes of Interpersonal Identification, one wants to ensure they do so in a believable and honest manner. While I communicated to the students through various channels that I was interested in sports and an active person in general, I did not pretend to be a star athlete, as such a role would be entirely unconvincing in my case.

The fourth suggestion by Wolfensberger (n.d.) as a strategy for fostering Interpersonal Identification is "Engaging each party in experiences

that help them see the world through the other's eyes" (29). Relevant here is how I fostered empathy between myself and my students, particularly as I took the life experiences of my students into account.

While the previous sections of this paper considered the ways in which I attempted to help my students identify with me, the next section details methods used as a means for me to identify with my students. As I became aware of some of the negative roles that people in that community were at risk of being placed in, I felt it was important for me to see my students in the student role. While this was not necessarily difficult in the context of the classroom, it was important that my students took the student role seriously and identified strongly with many or most of its characteristics. One way in which I tried to achieve this was by taking on certain aspects of the student role myself, as I felt that it was important for my students to see the student role legitimized through my actions. I did this by speaking frequently about things that I had learned, by modelling different learning techniques for my students, and by showing enthusiasm for research and investigation.

As well, I needed to ensure that my students had all the trappings of the student role in their possession, including desks, chairs, pencils, exercise books, text books, and easy access to computers and computer technology. There were also certain aspects of dress that were not permitted in the classroom, such as hats or offensive shirts, which would potentially take away from the student role.

Reinforcing the student role for these children was especially important as many people in the wider community held stereotypes about the ability of these children to learn well in a classroom setting. This view was even held by co-workers of mine, including fellow teachers at the school. In turn, many of the children in the school had appeared to internalize the stereotypes that others held of them and therefore did not take the student role very seriously. Ultimately, ensuring that my students were imaged as students had two advantages. Firstly, it reinforced to themselves and outside observers that they were indeed students engaged in learning, and secondly, it allowed me to identify with them through our shared role reciprocity, in terms of the student/teacher role interactions. According to Thomas and Wolfensberger (1999), "... people relate to each other largely on the basis of the social roles they may fill" (140). In a sense, as I perceived that my students were in the student role, I was able to respond accordingly as a teacher.

Wolfensberger (n.d.) also suggested, as a means for fostering Interpersonal Identification, that parties "... share the same intensive experiences with each other" (44). In a classroom, the teacher and his/her students spend several hours a day with the same people, day in, day out: a long-term intensive experience. Many of the collective activities were experienced in a manner that brought the class closer together and strengthened the identification between myself and the students. Some of these shared activities included ice-breaker games, e.g., Rose & Thorn; a shared reading text, e.g., we read several Roald Dahl books together as a class, including "The Witches" and "Charlie and the Chocolate Factory;" a shared song, e.g., for the annual "Music Monday" event, we learned the words and the melody of the chosen song as a class and performed the song together on the day of the event; class parties, e.g., events such as Valentine's Day or Easter; and finally, learning together as a class, which occurred on a daily basis. While not as obvious perhaps as the other shared activities, shared learning experiences brought me and the students together through our shared curiosity for topics such as animal welfare, geology and medieval times.

Finally, Wolfensberger (n.d.) suggests that "... there are things that can be done to convey to people a sense that they are mutually responsible for each other" (46). Hopefully, in any elementary classroom, this idea is ingrained in both teacher

and students, and plays out accordingly. This is not always the case, however, and the teacher may need to consciously arrange activities in the classroom in a manner that cultivates this sense of responsibility amongst his/her students. One method in which I attempted to promote a feeling of mutual responsibility amongst my students was through our caretaking of the school garden. As spring approached, I volunteered our class to take responsibility for upkeep of the garden, which proved to be a considerable amount of work. A core group of students rose to the occasion and took the task quite seriously, working together to ensure that the garden was well groomed, representing their school spirit to the wider community. In turn, the garden also helped the students to build a sense of mutual responsibility with the wider community. The garden in years past had been vandalized during after-school hours and the students felt that it was up to them, and the adults in their community, to ensure that such actions were not repeated.

Shortcomings

WHILE MUCH OF THIS PAPER reads like a laundry list of things that I did, there would be an even longer list of my shortcomings if I attempted to write it. I will outline several of them, however, in the following section.

Firstly, I did not contradict co-workers of mine when they occasionally spoke negatively about students in school, including some of the students in my class. While this would have come with some cost to me personally and perhaps professionally, the benefit that my students may have gained from my speaking out would have outweighed the potential hurt to my reputation. While this does not relate directly to Interpersonal Identification, it does point to an opportunity to raise awareness amongst my co-workers of the realities of social devaluation, an opportunity that I missed. Interpersonal Identification can be the jumping off point or the intermediate goal for

those looking to achieve positive social roles for devalued people. Although I did several things inside my classroom in an attempt to foster Interpersonal Identification between myself and my students, these events happened essentially behind closed doors, and did not offer many opportunities for others to observe some of the positive benefits accrued from it.

As well, I did not make a sustained effort to get to know the families of students in my class, which would have potentially improved Interpersonal Identification in both directions. As I stated above, there is a deep skepticism of school in the wider community, and it was this skepticism that I encountered when I attempted to introduce myself to the families of the students in my class. In retrospect, I should have persisted in courting the families of my students, but I instead retreated to brief communication on official matters, only making contact occasionally, usually when I felt that a student was struggling. Establishing positive, working relationships with the parents of my students would have sent a strong message to my students that I recognized the importance of the family relationship, and that I was willing to work with them and their families to ensure success in the classroom. I believe that teacher engagement with families is an important step towards fostering Interpersonal Identification with their students, as it demonstrates to them an understanding by the teacher of the importance of family relationship roles in their lives.

Unfortunately, like many teachers before me, I left my job at the end of the school year in June. Although I had built a great rapport with the students in my class and others in the school community in general, there is a strong possibility that many of my efforts to promote greater social integration through Interpersonal Identification would be nullified by my departure. Therefore, while Interpersonal Identification strategies had great utility as a means for strengthening the student/teacher relationship in my classroom, it is impossible to know if it had any lasting suc-

cess in terms of promoting valued social roles for students and thusly improving their chances for social integration.

Conclusion

THROUGH MY WORK as a classroom teacher, amongst both valued students and those at risk of falling into or currently occupying devalued roles, I have found Interpersonal Identification strategies to be useful tools in strengthening both the teacher and student roles, leading to a strengthening of the relationship in general, between myself and my students. As a student and practitioner of SRV theory and strategies, I found an explicit reading of available materials on Interpersonal Identification to be quite useful to my efforts in this regard. The examples provided in the literature, however, at least in the SRV Monograph and the SRV-10 workshop, are quite brief. It is my hope that through the examples listed in this paper, I have provided others with a sense of some of the benefits of enacting Interpersonal Identification strategies, as part of the effort of promoting valued social roles for devalued people. ✌

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Journeying into the Everyday: Fostering the Application of Social Role Valorisation

Jane Sherwin

EDITOR'S NOTE: *This article takes up the question of implementing SRV, with an eye towards helping devalued people to have greater access to the good things of life, by exploring the guidelines for applying SRV measures (e.g., Wolfensberger, 1998, 82-95). I encourage our readers to reflect on this article in terms of their local area as well as their own experiences, & to submit examples of implementation to the Journal.*

Introduction

THIS PAPER CONCERNS ITSELF with the application of the theory of Social Role Valorisation (SRV), and will be of relevance to those people who have attended an introductory workshop and the PASSING practicum. It describes the elements of a 'thinking framework' to assist someone to take the many concepts that they were exposed to during these workshops and to use them with and for a devalued person towards achieving a better life.[1] While there is a considerable amount of theoretical material available, there is little published material on applying SRV. This paper seeks to make a contribution to application in a small way by utilising key SRV themes and the 'if this, then that' way of understanding SRV (Wolfensberger, 1995).

Many participants report being better informed, inspired, and challenged after attending a Social Role Valorisation (SRV) theory workshop. Participants also report participation at the PASSING practicum as a transformational experience. Shev-

ellar et al (2012), however, note four patterns. Despite the richness and helpfulness of SRV as a theory, the majority of participants in theory workshops neither go on to do the practicum, nor do they join local networks. It could be speculated that few have the important learning conversations that are necessary after a workshop to embed the theory in practice. Secondly, those in organisational leadership roles rank few in workshops. A low consciousness of matters that would be facilitative of the implementation of SRV is therefore more likely. Examples include coherent organisational values and attention to non-programmatic matters, such as the use of buildings or recruitment practices. The authors also note that, despite good intent, there has been little progress in engaging implementers of SRV by national safeguarding groups, like the Australian and New Zealand SRV Group. Finally, the authors note that the broader societal context sees a return to policies and practices that deeply devalue people who have negatively valued characteristics.

Let us turn to the article title. The word 'fostering' indicates that this paper will explore habits of thinking that will assist in the application of SRV.

The 'everyday' in the title refers to two contexts. First of all, 'everyday' refers to a vision of people with a devalued status experiencing the everyday lifestyles that people with a valued status take for granted. It refers to what is commonly referred to as a typical life, a life of richness and meaning

or 'a good life.'[1] Secondly, 'everyday' refers to a practical application of the theory each and every day. This requires an integration of personal values with each of the concepts within SRV theory. It requires translating these values and ideas into a thinking framework that guides conscious competence in application.

Thus 'journeying into the everyday' is both a reference to the types of lifestyles that SRV implementers are trying to create with and for devalued people, as well as a reference to the necessary habits of thinking and practice in those who are applying SRV.

Journeying into the everyday also requires the un-learning of thinking and practice. Of particular detriment is thinking that has been shaped by negative historical ways of responding to the needs of devalued people and/or which is shaped by non-programmatic matters, such as what the funder says is possible, what the staff are willing to do, having a building to fill, etc.

What is the Journey?

THE PAPER USES THE METAPHOR of SRV implementers as travellers in order to explore a key question: what habits of thinking are necessary to apply the many SRV ideas in order to make a difference in the lives of an individual and to journey into the 'everyday'? It answers the question by describing: the probable needs of those who are trying to implement SRV, a thinking framework, pitfalls, and additional helpful endeavours.

The journey is one of consciously and thoughtfully assisting devalued people to be their authentic selves beyond their negatively valued characteristics and the low expectations that are tied like weights to their souls.

The journey also assumes that implementers can be helped to move from a theoretical understanding of SRV to applying the theory. There are only a few publications (such as by Better Practice Project, 2011; Kendrick, 2009; Ramsey, 2007; O'Brien, 2006; Sherwin, 2011) and a few workshops that assist people to apply SRV around, to and with individuals. This paper seeks to add to these 'travellers' aids.'

Who are the Travellers who Journey into the Everyday?

THOSE WHO ARE ON THE JOURNEY to apply SRV might be family members or devalued people themselves. They are more likely to be those with some sort of vocational certification who have participated in SRV workshops as a form of work-related training and who are working in technocratic environments. This means that an application of SRV has to compete in environments that are bureaucratised, with a heavy emphasis on standardisation, accountability requirements, paperwork, and an aversion to risk. The traveller themselves might be seen as a mere cog in a large human service wheel. It is also possible that the managers of the service might view service recipients as customers or commodities. They might have very little consciousness of the historical treatment of devalued people, including the patterns of rejection, segregation, and congregation as the dominant features of traditional service responses. It is also true that a minority of the travellers could be operating in smaller environments where there is a leaning towards individualised arrangements.

Within this context, the likely needs of a traveller trying to apply SRV everyday include:

i. a 'thinking framework' with regard to SRV application. This refers to a mental model and rhythm of thinking about how to enable someone to get a better life[1]

ii. fortitude, courage and passion in applying the theory

iii. an expanding and deepening knowledge of the theory and its nuances

iv. a cultural environment that is permissive and nurturing of the application of SRV, including facilitative processes used in planning, recruitment, supervision of staff; an absence of risk aversion; acknowledgement of work that builds valued roles; etc.

Ultimately, the intention is for the traveller to be able to construct a set of responses to the needs of a devalued person that are coherent with the individual having a better life and a positive future. It is also the intention, within an SRV framework, to shape the perceptions of others such that they will have positive expectations of the individual with the devalued status.

Key Ideas for the Journey: A Thinking Framework

A KEY VEHICLE for the journey will be to use a mental model that is different from the traditional ways of thinking. Those ways of thinking are founded on perceiving people largely through the narrow lens of their negatively valued characteristics. For example, if people are perceived largely as menaces, then the responses are largely about containment. If the perception is that adults are eternal children or in their second childhood, then responses are likely to include minding people and doing 'for' them.

An alternative thinking framework consists of a series of 'decision points,' like road markers or sign posts. Each decision point can be either consistent with SRV or 'detours' that lead the traveller away from an application of SRV. Decision points typically require consciously thinking through the issues. Sometimes issues need to be weighed carefully, depending on what is to be achieved. The application of SRV can be likened to conscious, cautiously confident steps towards a better life for and with an individual.

The kind of thinking needed to apply theory to practice starts with an appreciation of the identity of each individual and understanding the needs that must be met in order for them to have a typical life. Decision points are with regard to role goals, the use of typical ways and means, the role communicators, how best to enhance skills, and in what way someone is regarded (Wolfensberger, 1998, 82-102).

1. The Journey Begins
A SPIRIT of discovery is adopted.

(i) Who is the person?
The starting point is actually a fork in the road. The fork that is not consistent with SRV is this one: identifying which program with which (devalued) group and in which building the person should attend.

The fork that is consistent with SRV is one that leads to a deeper understanding of who the person is and an appreciation of the identity of the person beyond their deficits. This involves an appreciation of the person's key life-shaping experiences, the impact of the impairment on them, their past and current roles, the people in their lives, their strengths and talents, interests and passions.

(ii) Imagining a positive future
If the human identity of a person can be appreciated in all of its lights and shades, it becomes possible to imagine a more positive future.

The SRV notion of culturally valued analogue (CVA) is helpful here (Wolfensberger & Thomas, 2007, 30-31). To use the CVA, 'Think typical.' The CVA question of 'what would be a typical life for anyone else without an impairment of a similar age, gender and culture?' is asked. It can be seen that in asking a question like this, the focus is on what is considered to be ordinary, representative, respected and experienced by people with a valued status.

Questions in a similar vein refine the imagined better life. For example, 'what does a good home life look like?' for someone who has never had their own home or is at risk of losing theirs. For someone who is unemployed or attending day programs, the refined CVA question could be 'what does a meaningful week look like for someone who is of that age and unemployed?'

A focus on the identity of the person in the absence of the impairment or whatever it is that

leads them to be devalued is required. Magical thinking is not utilised. Rather, at this stage of the process, a form of short-term 'parking' of the impairment is adopted. Deficit thinking leads to lower expectations. Without a sidelining of the devaluing characteristic in our minds, the traditional habits of thinking can get in the way by limiting our perception of the person and our expectations of what might be possible.

(iii) Who is the person (part 2)

After a sense of a positive future is explored and described, the person's needs can be identified. These are the human and specific needs that should be met so that the person can move towards their positive future. This is not to say that needs like food, warmth, shelter and health aren't important; they are obviously necessary for people to continue to live. However, simply meeting the needs at the base of Maslow's hierarchy leads to people existing, not necessarily thriving. An SRV thinking framework requires attention to those more important or fundamental needs that, if met, would allow the person to thrive and also to have less important needs met.

This phase also involves identifying the vulnerabilities of the person. Appreciating heightened vulnerability allows an exploration of the sorts of things that might go wrong, such as poorer health or an increased chance of rejection.

The 'base camp' for the journey is an appreciation of two things: the person, their needs and vulnerabilities; and a sense of a positive future. Like a base camp, these are both the starting point and the return-to point. On any journey when travellers return to a base camp, they return not exactly as they left. They have been changed somewhat through their interactions with people, places and past-times. So too the SRV traveller, as they reflect on their new discoveries about the person and the sense of possibilities. So too for the devalued individual as they live life. Hopefully Albert Einstein's quote takes on intriguing relevance for the devalued person: 'There are only two ways to live your

life. One is as though nothing is a miracle. The other is as though everything is a miracle.'

The next section continues with ideas in the thinking framework to help make an individual's life a miracle that is, at the same time, not miraculous. It is an ordinary life, good ordinary and not extraordinary, even though it might take extraordinary efforts.

2. The SRV Implementation Trek

Another quote is helpful to the journey at this point. George Bernard Shaw said 'Life isn't about finding yourself. Life is about creating yourself.' The four ideas of role goals, culturally valued analogue (CVA), role communicators, and enhancement of competency and image are essential SRV road markers which help people create themselves.

The thinking framework has been influenced by Wolfensberger's 'If this, then that' way of understanding SRV as well as by the ten themes of SRV (1995, 1998).

(i) Role goals

The identification of role goals is critical. The types of goals relate to whatever it is in the imagined future that is to be pursued. The role goals could be a combination of any of the following (Wolfensberger, 1998, 84-95):

a. strengthening existing roles, for example, to learn additional administration tasks for someone with a disability employed as a part-time administration worker

b. maintaining existing roles, for example, to maintain the role of homemaker for an older person with arthritic hands

c. finding new roles, for example, to become a school band member as well as a school student

d. reducing the negativity of any roles, for example, the role of prisoner is likely to be reduced in its negativity if someone learns employment skills

e. removing negative roles by, for example, to lose the roles of animal and menace for a person incarcerated in an animalistic environment and to move into a real home and the role of tenant

In short, if someone wants a better life,[1] then 'think roles.' While this sounds relatively straightforward, there are two further forks in the road:

a. Having role goals and finding activities are very different. For example, going to the football game is different from being in the role of avid fan. The former is a way of filling in time, even if the person is interested in football. The latter is about assisting the person to craft part of their identity. It therefore has implications for more than just attending matches. It also affects how the person dresses, who they spend time with during and between games, mementoes in their possession, what they might read, and so on.

b. If the intention is for the person to belong to a community of interest and to develop friendships, then it is essential that there is a distinction between roles that bring community presence, such as café goer, and roles that bring community participation, such as choir member and volunteer (Sherwin, 2011).

(ii) Culturally Valued Analogue (CVA)

The culturally valued analogue ('Think typical') is pertinent here as well. When considering how to meet needs, the traveller can consider how it is that people with a valued status get similar needs met. For example, questions like 'how does anyone else make a friend?', 'how does anyone else find a housemate?' and 'how does anyone else get to pursue an interest in football?' are illustrations of questions that are grounded in 'the typical.'

Following the road marker of the CVA makes it more likely that what happens around and with the individual is typical and valued. They are the ways and means of getting needs met that are familiar happenings through the journey of life for someone with a valued status.

(iii) Role communicators

A further set of decision points relates to how someone can be socialised into a particular role by the physical and social environment. This socialisation can be so strong as to result in the person's identity being moulded through their internalising of the messages about the role they are in.

Therefore conscious decision-making is required with regard to the following role communicators:

a. where the person will spend their time in the role

b. who the person will be alongside while they are in that role, and who will be in either similar roles (e.g., a group of students who learn from each other) or roles that are reciprocal, e.g., a teacher is in a reciprocal role to the student role

c. what they'll be doing while they are actually in the role

d. their appearance, e.g., it is difficult for a person to internalise a belief that they are in the role of exerciser without being in gym clothes

An understanding of role communicators as decision points leads to a guiding set of actions. The intention should be to systematically consider each of the role communicators and for the person to be in the most valued options that are feasible in each of these role communicator areas.

There are two benefits. Firstly, systematically thinking about each of the role communicators will help with socialization into the role (Sherwin & Sweeney, 2012).

Secondly, choosing as valued an option as possible is likely to help others see the person with positive regard. An essential benefit is that this unconsciously challenges any preconceived negative perceptions of the person. There is a continuum of value for each of the role communicators. For example, in terms of a role communicator about the physical setting, a detention centre is at the negatively valued end; people with a valued status would never say something like 'Oh, I can't wait to live in the detention centre.' Having a comfortable and secure home is at the positively valued end of the continuum.

If someone is already in a role, then shaping the role communicators to be at the more positive end of the continuum is also important. This is especially germane in situations where the individual is in a role that is culturally familiar but

is not at the positively valued end of the continuum. The following two scenarios illustrate how superficially someone can be in a role. In each case, the role is 'sort of' valued, but once scrutinised, is clearly not. Sometimes the role of a person working in a sheltered workshop is described as employee. It is true that there are many communicators of an employee role: for example, there is a factory-like work setting, repetitive tasks like one would find in a factory, and even uniforms befitting a factory worker. However, if all of the other people are there primarily because of a shared impairment, if the hours of work are more akin to school hours, and if those who are providing support are more like minders than supervisors, then the other role communicators diminish the value of the role of employee.

Another example would be to consider the role of tenant and homemaker in the home of an individual in the following scenario. The home looks like any others in the street, and the person has their own room, but the other five tenants entered as strangers who also have an impairment. The extent of the homemaking tasks are peeling carrots for dinner and carrying the dishes to the sink. The roles of host, billpayer, hobbyist and active neighbour are absent. The tenant has no authority over who enters the home or over the identity of the paid workers. Further, the paid actors might act like cooks, cleaners and minders. If workers act in these roles, then an understanding of role complementarity predicts that the individual will act like a guest or even prisoner in his or her own home.

These two examples demonstrate that roles exist on a continuum of value, and that if the goal is to support the person into a valued role, then ideally all of the role communicators would be at the more valued ends of the continua.

It could be possible to progress each of the role communicators towards the valued end. For example, it is possible to change the physical setting to be more socially valued. It could also be possible to have the right number of people in the group for the task at hand, for example, two

to four people for cards, and eleven for hockey. Relatedly, having the right 'sort' of people in the group will be fruitful, so that there are good role models and so that the group organiser can provide timely assistance and manage the group well. This includes recomposing the group membership from being one of having a shared devalued characteristic to one of a shared age or a shared interest depending on what the role and tasks are.

(iv) 'Acting the part and looking the part'
The person will be more fully in the role and treated well if they have the skills to be in the role and if others are helped to make up their mind positively about the person. Therefore, thinking needs to be done to identify the skills that will be necessary for the person to have, either before they enter the role or while they are in the role. SRV has much to offer in terms of the range of strategies (besides commonly used instructional strategies) that are fruitful in helping people build their competencies. Similarly, SRV has much to offer in terms of how to best convey positive imagery messages such that others around the person are likely to regard the person positively.

In summary, this paper suggests that helpful habits of thinking assist in the implementation of SRV concepts. A rhythm of thinking begins with an appreciation of the individual and a desirable future. The SRV decision points include role goals, the culturally valued analogues, competency development and image enhancement. Equally critical is the conscious use of role communicators as decision points in crafting any socially valued role.

Common Potholes, Detours & U-turns in the Journey

After participating in workshops, there are not un-common deviations in the SRV implementation trek. These can be imagined as potholes, detours and U-turns in the journey. Five such challenges are outlined below.

There is a crucial SRV signpost: if devalued people are in valued roles, then they are more likely to have a lifestyle that includes purpose, respect and relationships. If someone wants a better life, then being in valued roles will help. Travellers sometimes miss this significance of valued roles. Without the intentional crafting of valued roles, there is a reduced chance of a person having a full life with freely given relationships, or of changing how devalued people are typically perceived. Further, without community participation roles, there is likely to be a pattern where the person is present in community life, but not 'of' community. Missing the signpost leads to a detour that could be a worthy deviation, but not necessarily lead to an ordinary and valued lifestyle. An example of a worthy deviation could be an avoidance of grouping people and never using age-demeaning activities. There could also be positive attention paid to appearance and the use of culturally valued places and activities. The resulting bypass could look like the following example: individuals who live alone but don't know their neighbours, who look good when they go out but are largely on 'outings' which keep them occupied.

A big pothole is fallen into when there is a focus on imagery and a corresponding minimisation of the importance of the other themes. This can lead to an overemphasis on, say, the names of programs or the look of a building. These are pertinent but less vital matters than the extent to which a program actually meets the fundamental needs of the person, using effective strategies that lead the person to have a decent and meaningful life.

An overemphasis on the imagery theme can also lead to overlooking role communicators. The image channels are about perception; role communicators are about expectations and socialisation into a role. Therefore a related challenge exists when the signpost that says 'Shape the role communicators' is missed. It is easy, for example, to focus on the person being in an activity and how that looks, without considering the impact of the physical or social environment in shaping the person's experience of the role.

To continue the journey metaphor, alerts are also issued regarding road-washouts. It is a road washout when SRV is said to be implemented but with low consciousness of the vulnerabilities of the devalued person. This can lead to a lack of compensation for someone's heightened vulnerabilities, for example, a susceptibility to rejection by others.

Similarly, it is a road-washout when there is a lack of sophistication about how to increase competencies for valued roles. Even though competence is highly valued in our society, it is not uncommon for there to be gaps in the knowledge and skill base of many paid service workers in terms of knowing how to develop skills through such things as effective instructional design, the use of role modelling and adaptive equipment. As a consequence, opportunities to acquire knowledge and skills through consciously constructed learning experiences are missed.

Travellers' Aids for the Everyday Journey

I T IS LIKELY that the journey into the everyday never ends. There are many more things to be mindful of that are beyond the scope of this article. It is also rare to find ideal circumstances for applying SRV (Shevellar, 2008) so the journey continues to be one of thoughtful monitoring of efforts and a gathering of insights.

It is also nearly impossible to apply SRV as a lone implementer. Anecdotally, those who are considered skillful at applying SRV report having had hundreds, possibly thousands of hours of conversations with others about SRV and its complexities and nuances. They also report having been exposed to people more experienced than them, sometimes as mentors, sometimes as sounding boards.

Exposure to stories and examples of where SRV has informed what has happened is strengthening of not just the will to use SRV or of the mind in understanding SRV. It is also a bolstering of the

heart, because applying SRV is an act of rebellion. It is a series of actions that stand against the forces of social devaluation and the dominant ways of responding to devaluation.

It is also important to 'know oneself' when working with SRV. This relates to the theme of consciousness where it is important to reflect on one's own set of assumptions and beliefs about devaluation and human potential, to name just two areas.

Ernest Hemingway said, 'It is good to have an end to journey toward; but it is the journey that matters, in the end.' The SRV workshops are an essential first step. Like going on any journey, one must also have a sense of where one is heading and a way to get there. An SRV thinking framework, self-knowing and relationships with like-minded people are essential traveller's aids when journeying into the everyday. ☙

1. EDITOR'S *NOTE: To read more about the SRV concept that valued social roles are likely to open the door to greater access to the 'good things of life,' see Wolfensberger, Thomas & Caruso, 1996.*

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The Need for Competence in Things Other Than SRV in Order to Teach & Implement SRV

Susan Thomas *with* the southern Ontario SRV study group

NOTE FROM THE SENIOR AUTHOR: *In a paper entitled "Some Major Challenges & Dilemmas in SRV Training, Dissemination, & Implementation," I addressed the fact that competence in SRV was not sufficient to disseminate or implement SRV, but other competencies were needed in addition (see the July 2013 issue of this Journal). I had originally prepared a much less advanced version of the paper for a presentation at the end of the Fifth International SRV Conference in Canberra, Australia in September 2011, & then greatly revised & expanded it for publication. At the November 2012 meeting of the southern Ontario (Canada) SRV study group, I presented on that fact, & in our discussion the study group participants gave helpful points of clarification & addition. Their contributions led to yet further elaboration of the issue, & thus they are listed as co-authors of this paper.*

Introduction

THE PREMISE OF THIS PAPER is the recognition that competence in Social Role Valorization (SRV)–that is, knowledge of SRV in all its nuances and complexities–is necessary but not sufficient for either the dissemination or implementation of SRV. As regards dissemination, someone can have a very good understanding of SRV, but simply not be very good at communicating it to others, either in teaching or writing, which require a whole range of skills of communication, having to do with delivery of content, un-derstanding and relating to one's listeners or readers, developing ways of teaching a particular element or idea of SRV, etc. And vice versa, someone may be good at teaching or writing, but not have a very good understanding of SRV as the content for their teaching or writing. Where written dissemination, rather than oral dissemination, of SRV is at issue, there are competencies of writing that must be mastered. At least elements of these teaching and writing competencies are among the things that the North American SRV Council's Trainer Formation Model (TFM)[1] aspires to inculcate in trainer-candidates, through such things as the modeling provided to trainer-candidates from more experienced trainers, the encouragement or even requirement of writing articles and reports, and especially the feedback that a trainer-candidate receives (on both presenting and writing) from more senior people, etc. But of course, people might learn the skills of teaching and writing via courses and involvements that have nothing to do with SRV and its dissemination, or with human services; they might naturally be good teachers, or good writers; etc.

An additional complication is that ever since the principle of normalization was formulated and began to be taught (in the late 1960s and early 1970s), and then later when SRV was formulated, there have been dilemmas as to how to teach it, how to conceptualize its implications for oneself once one has understood it, and how

to evaluate its implementation in human services, since there are many conceivable ways of doing all of these things. This dilemma is shared with many other complex phenomena, which may have to be taught in a manner that is different from the way in which the phenomena are applied, or even different from the way in which they eventually get embedded in a person's conceptual framework. Thus, for instance, SRV might be taught according to the 10 themes that underlie its many implications (Wolfensberger, 1998, 103-127); or it could be taught according to image versus competency; or it could be taught one specific implication at a time, such as according to the 42 ratings of PASSING (Wolfensberger & Thomas, 1983, 2007) and their seven clusters, four of which (setting features, social associations, activities, and miscellaneous features) have to do with image, and three of which (setting features, social associations, and activities) have to do with competency.

But regardless how SRV is taught, a person might internalize it in a different way. For instance, someone who learns SRV according to the themes might internalize and think about it largely in terms of image and competency; or in terms of wounds and role-valorizing responses to specific wounds; or in yet other terms altogether. Obviously, this raises the issue of model coherency (Wolfensberger, 1998, 111-118): who is the person, or who are the people, one is intending to convey SRV to, and what are the best processes for conveying the content of SRV to them, as opposed to some other people who might be learning SRV? And even if one designs and actually carries out a model-coherent teaching of SRV, that is not necessarily the internal "model" of SRV that people who learned SRV will carry with them.

In addition, there is a whole range of competencies in implementing SRV for a party–be that party a specific individual, a group (such as the students in a classroom, the residents of an assisted living facility), or an entire class, such as poor immigrants, or the blind, or adolescents with au-

tism–that go beyond competence in SRV itself, and an examination of these will take up most of the rest of this paper.

Distinctions & Competencies Related to Implementation

THERE ARE ALSO POSSIBLE DIFFERENCES between how SRV is taught, learned and internally conceptualized, and how it is implemented, and even how it is conceptualized for implementation; and these differences lead to additional competencies required for implementation.

We will examine eight issues of SRV implementation that bear on the competencies needed to advance implementation, and sometimes to teach people how to implement it.

Who is the Envisioned Implementer

SRV IMPLEMENTATION COULD BE CONCEPTUALIZED according to who is the envisioned implementer; for example, certain devalued or marginal parties themselves; parents and other family members of an impaired person; managers and administrators; direct service workers for a person or group, and whether those direct servers are clinically trained and sophisticated or not; etc. For example, in a classroom, a teacher may be clinically sophisticated, a teacher's aide may not be, but both are involved in direct service upon the students.

For each such envisioned implementer or "type" of implementer of SRV, one could conceptualize certain elements of SRV that are within that party's purview to affect or even control, and one could therefore emphasize those elements. For instance, take the issue of personal appearance (Wolfensberger, 2009). Some devalued or marginal people may be able to address at least elements of their personal appearance that otherwise are not image-enhancing, and might only need consciousness-raising on the issue and certain material supports to do so; other people may not be able to do this for themselves. People who live with a devalued

person are likely to have greatest influence, or even control, over the person's appearance, and it would thus make sense to teach them specific how-to elements, or what-to-do role-valorizing appearance-enhancing strategies. Managers who supervise the places where people live may have less direct influence over the appearance of the residents, but may have much indirect influence, as via what training they offer to or even mandate for direct servers; what expectations they set for direct servers in terms of the servers' own appearance at work and what activities servers must do with residents; what demands they make on direct servers' time (e.g., are servers allowed the time that is needed to make sure residents look good, or is servers' time eaten up with other responsibilities and activities); what supports they offer to servers (e.g., money to spend on cosmetics, discretion to purchase items on their own, etc.). And service administrators, including board members, also have indirect influence on the issue via the policies they set for the agency as a whole, what they incorporate into mission statements and similar documents for the agency, etc.

Again, this raises the model coherency question of "who are the people" doing the implementation, or being taught to do the implementation, and what is relevant for them. Some parties who are very knowledgeable about SRV, and even good at teaching it, may nonetheless not be suited to guide and teach all conceivable implementers, at least one possible reason being that they cannot know all the situations that all implementers deal with.

On What Level, & Vis-à-vis What Party, is SRV Implementation Envisioned

ONE MIGHT CONCEPTUALIZE and think about SRV implementation in terms of different levels, and for different parties. For instance, one can think of a two-by-four grid of image and competency implications, on the four possible levels of a specific person, of primary social systems, of secondary social systems, and of a

society as a whole (Wolfensberger, 1998, 78-80). (This was the way that normalization was long taught, specifically with an eye towards its implementation.) Thus, for a specific known individual, implementers could focus on areas of image enhancement, and on areas of competency inculcation, for that person. On the level of a secondary social system, such as a school, an implementer could look at how to enhance the image of the students in that school, and how to enhance their competencies. Obviously, there is an interaction among (a) the intended level of implementation, (b) for whom implementation of SRV is being pursued, and (c) the party doing the implementing, as covered above.

Familiarity with the Wounds & Risks of the Party for Whom SRV Implementation is Envisioned

AT THE END OF THE standard introductory three- and four-day SRV workshop, as well as near the end of the SRV monograph (Wolfensberger, 1998, 82-102), a template is offered of seven steps (in the workshop) or five steps (in the book) for pursuing the implementation of SRV in a specific instance, whether for a person, group or class. In both presentations of this template, the first step is becoming familiar with a party's "wounds," especially if that party is societally devalued: wounds such as being rejected, put at a distance, subjected to deviancy imaging and deindividualization, etc. (Wolfensberger, 1998, 12-24). Most people learn the common recurring wounds that tend to be almost automatic concomitants of being societally devalued via learning SRV, but some people may be familiar with at least many of these through an empathetic and positively ideologized experience with devalued people. The second step, identifying a party's risk factors, requires both SRV knowledge and additional knowledge. For instance, it may be largely through exposure to SRV that an implementer becomes familiar with the concept of heightened vulnerability, and of the fact that many people are

just a short step away from something awful happening even when things seem to be going well. But there may be specific risks that accompany specific impairments (e.g., AIDS, or one of the forms of muscular dystrophy); or that accompany specific devalued conditions even if they are not impairments (e.g., old age, not knowing the majority language); or that accompany treatments that a party receives (e.g., being on a feeding tube, receiving a certain drug)–and knowledge of these risks is not gained by knowledge of SRV.

Yet further, these risks may differ depending whether the party around whom implementation of SRV is being planned is an individual, group or class, such that even people who are familiar with a particular person and that person's immediate risks may not be familiar with risks for a group or class, and vice versa. For instance, a class as a whole may be at risk of being the object of dead-talking and death-imaging in the larger society. But implementers concerned with a particular member of that class, such as family members concerned about an impaired relative, may not be aware of this risk because their family member has managed to escape it so far. The opposite could also be the case, that implementers are aware of risks for a group or class, but not of risks for a specific member of that class.

Implementation of Competency-Contingent Roles

ANOTHER STEP of the suggested implementation schema where non-SRV knowledge is also needed is in how to insert a person into certain new roles where these roles are tied to competency. Not all roles require competency to carry out; for example, some roles are honorary, and persons who hold such roles do not have to "do" anything, but the roles are valued nonetheless. But other roles do require competency from the role incumbent. For instance, implementers may envision for a person a work role that entails learning how to operate certain machinery, or obtaining abstract knowledge. But the imple-

menters themselves may know neither of these things–and further, they may not know where or how the person would obtain such competency. Obviously, this lack of knowledge on their part would put a crimp in their plans to obtain that competency-contingent role for the person.

Clinical Knowledge, Including about Certain Devalued Conditions

THERE IS ALSO a very wide range of additional skills in the domain that is sometimes called "clinical." For instance, there is knowledge of child development, of the neuromuscular system, of the endocrine system–the latter two both related to some physical impairments, including ones associated with mental retardation; there is knowledge about deafness, about blindness, about autism, about dementia; there is knowledge about what certain lesions may indicate; and so on. Obviously, the knowledge in any one of these domains that is relevant to SRV implementation can be vast, and just as obviously, SRV does not teach such knowledges. In fact, at least the SRV training workshop materials say very explicitly that people need to obtain that knowledge elsewhere, even though it is essential to the competency enhancement of many devalued parties. For instance, in order to enhance the competencies of people with dementia, so that they can maintain certain valued roles and perhaps attain certain new roles, one needs to learn about dementias.

Sadly, even where such clinical knowledge is very relevant, it may not be taught anymore. There may be many reasons, but among them are that–rightly or wrongly–it is not considered as important as other things that get taught instead. For instance, at Syracuse University, there used to be a Division of Special Education and Rehabilitation, and students in that division in the disciplines of mental retardation or emotional disturbance (as they were called) would learn about the nature of mental retardation and of different emotional disturbances, in preparation for their envisioned future as teachers of children with these condi-

tions. Then, it was deemed no longer politically correct to have a separate division of special education, but instead that all education should be "inclusive," and that educators-in-training should be taught how to run inclusive classrooms. So the kind of clinical knowledge that was once taught to students at Syracuse University is no longer taught to them, including students who would have mentally retarded and emotionally disturbed students in their inclusive classrooms.

Even worse is when such important clinical knowledge is displaced by the teaching of non-programmatic content, such as staff in-service training being devoted to agency regulations and how to maximize funding streams, or how to cast expenses into funder-approved categories. (In SRV language, programmatic issues have to do with what recipients need and how to address those needs in role-valorizing fashion; non-programmatic issues are everything else, including what servers like to do, what the available funding will support, what the law requires and forbids. Such non-programmatic issues could theoretically act as facilitators of addressing recipients' needs, but so often they act as constraints or obstacles instead.) In many contemporary human services, it is virtually only non-programmatic content that service workers receive.

One can see how these clinical knowledges, or lack thereof, could be very relevant to SRV implementation. For instance, suppose the service recipients are very severely physically or mentally impaired. Servers may want to craft valued roles for such recipients, but may be ignorant of how to work for competency-enhancement for such severely impaired persons. Or the servers may have very unrealistic notions about what competency progress is feasible for such persons, or what the feasible next step in competency development for them is, etc. In such cases, servers are apt to make mistakes in the roles that they envision and pursue for the recipients, or they may only be able to craft attributive or ascribed roles, rather than any competency-contingent ones, for the recipients.

Unfortunately, people who possess clinical skills may also bring with them unhelpful, even devaluing, attitudes. For instance, families have often found that the skills are only obtainable by surrendering their impaired family member to a service system that does more harm than the good it does via clinical knowledge.

Miscellaneous "How-to" Knowledge, Including the How-to of Attitude Change

IN ADDITION to these clinical knowledges, there are yet other areas of relevant knowledge and skill that go beyond SRV. For instance, depending on the service type and purview, and the needs of the recipients, relevant needed skills may include such things as how to set and stay within a household budget; how to cook a nutritious meal, and do so economically; how to clean a house, and how to keep it clean; how to manage a classroom; how to teach reading; how to turn an invalid in bed; how to operate a table saw; how to operate particular computer programs; how to recruit work contracts; how to anticipate the market and plan income-producing work; how to persuade potential opponents or supporters, for example, in regard to locating services–usually residences–in neighborhoods. This latter is included in the general corpus of knowledge of persuasion and attitude change. Any of these knowledges, and more, would be relevant to the implementation of SRV in at least certain contexts, but these types of knowledge are not taught by SRV.

Knowledge of (Other) Change Agentry

CHANGING PEOPLE'S ATTITUDES, and knowing how to do so, is one kind of change agentry, but the term "change agentry" actually encompasses much more. Knowledge of change agentry is particularly relevant at the level of implementation of SRV that goes beyond a specific person or the person's primary social grouping, but addresses either secondary social groupings or society as a whole or a large sector of society. Dr. Wolfensberger addressed this issue of needed compe-

tency in change agentry in a speech at the June 2003 SRV conference in Calgary, and in chapter six of the *Advanced Issues in SRV* book (Wolfensberger, 2012, 340-342). There are tools and skills that are useful for change agents in general, such as an orientation to the future, and to systems; knowledge of group and organizational dynamics; skills of leadership, and of persuasion; and skills of communication, as noted in an earlier section of this paper. There are additional knowledges that are especially needed by change agents in the domain of human service, including planning skills, understanding of the limitations of the law in human services, and knowledge of community leadership.

Here, we should note that some of the specific action measures that Dr. Wolfensberger recommended, in both the aforementioned speech and chapter, to promote SRV would not be adopted unless one knew their validity. For example, the strategy of jumping into crisis situations and exploiting their opportunities (Wolfensberger, 2012, 332-333) would hardly be adopted if one did not know (and believe) that crises are in fact opportunities when one is prepared in advance to take advantage of them, e.g., by riding in to the rescue with an idea–such as SRV–that seems to address the crisis, and because in crises people are more open to options than they are when everything appears to be going smoothly.

Similarly, Dr. Wolfensberger noted (Wolfensberger, 2012, 319) that the SRV movement, at least as a movement, has not done so well in attending to the implementation and dissemination of masterful demonstration models. And yet having such models, teaching about them, and having people observe such models, is one of the most powerful change strategies. For instance, such models could be written up in and for *The SRV Journal*, or described and discussed in the SRV blog, or the people who run them could post videos on their web sites, etc.

The training culture around SRV, though not SRV training itself, once did attempt to convey knowledge of many of these change agentry skills, as in the six-day workshop on Planning of Comprehensive Community-Based Service Systems that the Training Institute founded and directed by Wolfensberger at Syracuse University used to conduct. However, around 1980, Dr. Wolfensberger and some of his close colleagues came to the conclusion that although all this knowledge was valid, people would hardly be permitted to implement it any more when it came to trying to develop and sustain service systems that were simultaneously adaptive, comprehensive, normalizing (and later role-valorizing), but also very complex. And having reached this conclusion, he then almost entirely (but not quite) dropped teaching of these topics in favor of teaching people the content of the workshop on 'How to Function With Personal Moral Coherency,' which would prepare them for what they would encounter, and for enduring, if they tried to do the right thing in human services. The Training Institute still might conduct some limited training in some change agentry, for example, there might a follow-up event for people who had already had SRV and PASSING training, in which elements of change agentry related to implementation might be taught.

It is of course possible that people could learn change agentry and change agent skills from other sources. However, when these used to be taught in connection with normalization, it prepared people to use these skills to try to get normalization embraced and implemented. That would be less likely to happen if these skills were taught either free-standing, so to speak, or in connection with change towards other ends.

Knowledge of, & Related to, Non-Empirical ("Values"-Related) Issues

In Chapter five of the *Advanced Issues in SRV* book (Wolfensberger, 2012, 241-273), Dr. Wolfensberger addresses another area of knowledge that goes beyond SRV, but that impinges very directly on SRV implementation. That is the

area broadly referred to as "values issues," that are so very prominent in all decisions that humans make, and especially in decisions that have to do with human beings. These are, of course, the very type of decisions involved in SRV implementation. The issues of competence here are, first of all, whether teachers and implementers of SRV are even aware that SRV is in the empirical realm, but that values decisions are in the non-empirical realm. Second, are SRV teachers and disseminators aware that decisions whether, and how far, to implement SRV with a specific party will be determined by values, though these values will so often be unconscious. Third, are SRV teachers and disseminators sophisticated about the fact that even though values are in the non-empirical realm, that empirical evidence can be adduced to buttress or refute them–for example, in regard to whether the value, if implemented, is likely to bring more good or harm to humanity. (One can look at the record of history for empirical evidence as to what the embrace of different supra-empirical values has led to.) Fourth, are SRV teachers and implementers aware what are the contemporary but often undeclared religions in human service, or in a particular field of service or impairment. Fifth, are SRV teachers and implementers aware how at least some measures that would be role-valorizing for a party might clash with that party's religion, or with the religion of an implementer or supporter. If they lack knowledge of any of these, then they lack a competence needed for SRV dissemination and implementation.

Competence in Critical Analysis

THERE ARE ALSO two specific and very important skills that are not SRV, but that at least at one time had been part and parcel of the SRV training culture, and that at least the SRV Council's Trainer Formation Model mentioned earlier still aspires to teach. The first of these skills is critical analysis. The major way in which the SRV culture has aspired to teach this is via the application of PASSING. In the conduct of a PASSING assessment,

team members parse what is being analyzed–an existing service or a service proposal, they look both for what is role-valorizing and not role-valorizing about it for recipients, and then make an overall judgment. Of course, the SRV culture also has hoped that this skill of critical analysis would be generalized and applied to other things both within and beyond specific human services. For example, it would be applied to suggestions or campaigns made for new directions in society, to schemes that are advanced as virtual service salvation or even social salvation, etc.

Competence in the Practice of Openness, Non-Defensiveness, & (Mutual) Critique

THE SECOND SKILL that is not skill in SRV, but that used to be taught within the SRV teaching culture, is the practice of openness, self-evaluation, low defensiveness, and (mutual) critique. There are two ways in which the SRV teaching culture taught these things. One was in connection with service evaluation, as via PASSING, and PASS (Wolfensberger & Glenn, 1973, 1975) before it. Services would be invited to open themselves up to a PASSING (or PASS) assessment, and to receive an evaluative report which might contain–indeed, typically did contain–criticism of the service operation. But it was also part of each PASSING (or PASS) assessment for team members to evaluate their own performance, and to offer critique to other members of the team. And the person or persons who wrote the assessment report would receive editing of their report from more senior persons. This type of openness, self-evaluation, and mutual critique was taught as one of the safeguards to service quality, which went under the broad term self-renewal (Gardner, 1963, 1964, 1981), and which could help stave off service rigidification and bureaucratization.

Another way in which the SRV training culture would try to teach the practice of openness, non-defensiveness, and mutual critique was via the debriefing that is usually done at the end of any SRV teaching event (and of many related teaching events

as well), which includes a self-evaluation by each presenter at the event, as well as the providing of mutual critique by all presenters to each other. Even the solicitation of feedback from participants at a training event, as via their filling out a written evaluation form, was an effort to be open and non-defensive. The training culture around SRV also taught the practice of submitting one's projects–be they writings, early-stage teaching events, etc.,–to other people with a request for critical feedback on them.

The international SRV conferences could also offer a sanctioned forum for such feedback and critique. For example, at least some presentations could be followed by panel discussions, or one presentation might be followed by another that constitutes a rebuttal of the first, etc.

It is only when such evaluation and mutual critique is practiced regularly and habitually that sensitivity to being critiqued can be overcome. Yet most people are reluctant to make it a regularized practice. Also, our society seems to be moving away from openness, and to the widespread practice of defensiveness. For instance, people are increasingly litigious, and are wary of others also possibly being litigious, and thus there may be even less openness now to evaluation and critique. Further, because people so highly value what feels good, they are not likely to subject themselves to the pain that does come with openness to evaluation and critique.

Good Sense, Judgment, Foresight, & Wisdom

Finally (at least for now), another area of skill and competency that is required for SRV implementation, but that SRV does not teach, is common sense, good judgment, foresight, and even wisdom, all of which are necessary for making good decisions, including the trade-offs that are so normative in implementation. For instance, where the ideal or optimally role-valorizing arrangement is not presently attainable, what is there that is beneficial that can be achieved? What is at least defensible even if far from ideal? What

can one live with? Judgments such as these are so typically required because of the non-programmatic constraints, mentioned earlier, that may limit the freedom of a specific SRV implementer to improve the plight of a party. Experience with PASSING can help in making some such decisions, in that PASSING assigns weights to different SRV implications, with the weights representing the relative importance and impact of the issue. Thus, where two implications of SRV cannot both be achieved, an SRV implementer could decide to pursue the more heavily weighted, and therefore usually more important, implications and to sacrifice the less important one. But PASSING is only a tool for helping to make programmatic decisions. It does not provide the skill to make good decisions in a conflict between programmatic and non-programmatic criteria, nor does it supply good sense, let alone wisdom.

Foresight is needed to contemplate conditions that may become outright normative in services in the future; for example, there may be lack of resources, outright shortages, perhaps severe declines in standards of living brought about by climate change or a devastating pestilence. (An orientation to the future was also mentioned as one of the skills of change agentry.)

Conclusion

WHILE SRV is an overarching meta-theory, applicable to any human interactions, especially those of a service nature, and especially vis-à-vis people who are devalued or at least marginalized in their society, it is not enough to bring about the end of procuring "the good things of life" for a party. This paper has been an effort to elaborate at least some of the other competencies that are needed in addition. The numbers and complexity of additional knowledges may seem overwhelming, but we hope that readers will be stirred to some thinking, and even more to the pursuit of some of these other competencies by people who do want to see SRV disseminated and implemented. ☙

ENDNOTE

1. The North American SRV Development, Training & Safeguarding Council is a voluntary body of people who are committed to the development and safeguarding of SRV, as well as training in it. The Council has been in existence since 1992. The Council has developed a model for developing SRV trainers who will be capable of not only teaching SRV, but also teaching others to teach SRV, so that SRV dissemination will continue. For more information on the Council, and/or its Trainer Formation Model, contact the Council's corresponding secretary Jack Yates at: People Inc., 4 South Main Street, Fall River, Massachusetts 02721 USA; phone (774) 627-7441; email: jyates@peopleinc-fr.org

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On a Role

Marc Tumeinski

THE PRIMARY PURPOSE of this ongoing column continues to be to explore the key concept of social roles: in regard to learning and teaching about roles, as well as in light of working to help societally devalued people to acquire and maintain socially valued roles, with an eye towards greater access to the 'good things of life' (Wolfensberger, Thomas & Caruso, 1996). In this column, I examine the sociological concept of role exit.

Voluntarily leaving roles is a part of the natural social processes of human maturation, and of the typical rhythms of our social life. For example, when we graduate from school or university, move to another neighborhood, get a new job or promotion, and so on, we are leaving behind social roles, including ones that may have been an important part of our lives for a long time. However, leaving roles may also occur involuntarily or perhaps unexpectedly, due to unanticipated occurrences (e.g., such as illness or accident) or to various disruptions (e.g., losing a job, the death of a spouse or other family member). Sociologists categorize all of the above, whether voluntary or involuntary, as role exit. Since we know that society abhors a role vacuum, we can also predict that role exit is often linked with, or followed by, entering into a new social role.

Developing a deep(er) understanding of the normative social processes of role exit and its typical dynamics can be quite helpful in teaching and applying Social Role Valorization (Wolfensberger, 2013). For example, the potential role goals identified by Wolfensberger as part of implementing Social Role Valorization (SRV) include a) intentionally extricating a societally devalued person or group from a devalued role, as well as b) exchanging a societally devalued role for one that is potentially less devalued (Wolfensberger, 2013, 109-121). Both of these goals can be understood as involving role exit. Note that the concept of role exit is applicable to societally valued as well as devalued roles.

The goals of this column are to lay out some of the basic dynamics of role exit as described in sociological texts, and to relate these dynamics to SRV. This paper is an invitation to those who are teaching and implementing SRV to (begin to) think about and learn from the social process of role exit. I invite our readers to share their comments, additions, clarifications, relevant examples, questions and challenges.

Two Key Dynamics of Role Exit

WHAT ARE SOME of the typical social processes involved in role exit? Ebaugh points out that exiting a role can include both 1) disengagement and 2) dis-identification.

The process of disengagement may involve withdrawing from certain role expectations, as part of acquiring a new role with different expectations (Ebaugh, 1988, 3, 8). If we get another full-time job, for example, we can no longer ful-

fill the expectations and responsibilities associated with our previous job. In sociological terms, disengagement will often incorporate a change in role set (Ebaugh, 1988, 3). What is a role set? Merton describes it in this way: "that complement of role-relationships in which persons are involved by virtue of occupying a particular social status" (Merton, 1957, 110). In other words, role set describes the range of relationships with other people in complementary roles (e.g., the role set for a university student includes other university students, professors, tutors, university staff, etc.). Disengagement from a role, therefore, may include a decrease in the number and type of inter-

actions with the accompanying role set (Ebaugh, 1988, 9). If we get a new job, or move to a different neighborhood or city, or get a membership at a new gym, we may no longer interact with our former co-workers or neighbors or fellow gym members, or at least, not as often.

The process of dis-identification means that the role incumbent (i.e., the person in the role) becomes less likely to think of him or herself in a particular role (Ebaugh, 1988, 4). For example, a store employee who gets a promotion will begin to think of him or herself as the assistant manager, no longer as a cashier. In terms of SRV implementation, dis-identification is a

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A note on the words 'image, imagery, imagine, imagination'

Social Role Valorization theory emphasizes image enhancement as one of two essential avenues toward gaining a societally valued role (Wolfensberger, 2013, 85). Image refers to the mental pictures we hold about another person or group, and can be created by: our expectations and experiences, how a person or group acts, what we are told about the person or group, physical and social settings, personal appearance, and so on (Wolfensberger, 2013, 86-93).

The word 'image' has been used as far back as the 14th century, by Chaucer, for example, in his translation of *The Consolation of Philosophy* by Boethius. Some of the word's meanings include symbol, representation, an impression of a particular person, a thing that represents something else, and mental representation. It also has some narrower meanings in fields such as mathematics.

Closer in time to the formulation of normalization and SRV, J.K. Galbraith in *The Affluent Society* (1958) wrote about images as impressions of a particular person created in the minds of the public. We might make a connection with the SRV strategy of taking advantage of the social nature of images to help create more positive impressions, and to counter negative stereotypes, of a societally devalued person or group.

Related words include imagery, imagine and imagination. For example, we may have an image of a person who is not physically present to us, but that comes from our memory or imagination. Imagination can describe forming a mental concept of something not present to our senses, as well as a mental consideration of actions or events not yet in existence. In regard to the role goals associated with SRV implementation, servers may utilize their imagination to think of possible valued roles for a particular societally devalued individual or group. This is a fairly common tool used in PASSING workshops (e.g., during a foundation discussion) as well as in certain planning processes.

A now obsolete definition of imagination was: an impression as to what is likely; an expectation or anticipation. This is interesting in light of the focus in SRV on the power of images to shape expectations.

Thanks to Joe Osburn for suggesting a look at the words image, imagery, imagine and imagination.
Source information from the Oxford English Dictionary

process that others (including family, friends and/or servers) may help to facilitate. One of the relevant strategies that SRV offers in this vein is to consciously craft the common role communicators (e.g., setting, activities, time use, appearance, language) to stop communicating the former role or role to be exited, and to begin communicating the new role or role to be acquired.

Instead of calling a co-worker Jane, as was appropriate when she was a fellow cashier, now she is addressed as Ms. Addams, which is more appropriate to her managerial role. Her clothing, pay scale, benefits, hours and responsibilities will change. She may be given a desk or office, and a new place to park. She may be expected to go to additional specific training opportunities. And so on. All these can help to serve to communicate to others her new role as assistant manager.

As noted above, family, friends and servers can consciously help to reinforce the role communicators. To take another example, a student with impairments may be helped to join a new, more physically and socially integrated classroom. Teachers, other students, family and friends can help to emphasize the new role communicators (e.g., a different physical setting, new homework expectations, a new classroom schedule, etc.), as a way of helping the child to exit the former role of student within a more segregated classroom, and to take on the new role of student in a more typical classroom.

A Possible Framework for Understanding, Analyzing, Teaching & Implementing the Concept of Role Exit

EBAUGH ALSO LAYS OUT a helpful framework of relevant factors that may be involved in a process of role exit (1988, 35-39). This framework can be helpful for those teaching and/or applying SRV, as well as those using the PASSING tool, either for training or evaluation. These factors include the following:

• the voluntariness of the role exit can range over a continuum (from a chosen role exit to an imposed role exit)

• the centrality or salience of the role to the incumbent (cf. Tumeinski, 2013)

• is the process of role exit at least potentially reversible; and if so, to what extent?

• duration: how long might rexre role exit process take to come to fruition?

• what degree of control does the incumbent have over the process of role exit?

• degree of the role incumbent's awareness of the role exit process

• is it solely an individual role exit or is it part of a larger group exit? For example, a group role exit may include a company laying off a percentage of its workers, a school graduating a class of students, etc. Remember that SRV proposes various levels at which SRV may be implemented, i.e., from the individual all the way up to an entire society (Wolfensberger, 2013, 103-105)

• does it involve a single role exit or multiple simultaneous exits, i.e., of related roles? Someone who gets a new job in a different city may thus simultaneously exit roles of worker, neighbor, gym member, restaurant patron, choir member, certain relationship roles (e.g., leaving behind friends), etc. This might perhaps be thought of as a negative reversal of the role cascade process described by Lemay (2006), i.e., rather than one new valued role opening the door to other new valued roles, losing one role may cascade into losing other roles. Note that this process is relevant to both valued and devalued roles. A multiple role exit of related devalued roles may be desirable, while a multiple role exit of societally valued roles is probably not, at least not for a devalued party.

• is it an institutionalized process with normative 'rites of passage' or transition stages (e.g., graduation from high school or university, retirement)?

• is there a normative sequentiality to the process (e.g., medical student to intern to licensed physician to specialist)?

Role Exit, Role Transition & Anticipatory Socialization

WHAT ADDITIONAL FACTORS may be relevant to the process of transitioning from an exited role into a new role? As mentioned above, this transition process might include, for example, exiting a devalued role with an eye toward gaining a valued role, or exchanging a more devalued role for a less devalued one. Note that from an SRV perspective, these factors can be taken into consideration by both informal and formal servers. Such factors can include 1) anticipatory socialization, 2) role clarity, 3) the definiteness of the role exit process, 4) clear role cues, and 5) stages of role acquisition. Following are brief descriptions of these relevant role exit factors:

1. Anticipatory socialization can make a transition from one role to another role go more smoothly (Burr, 1972, 408). Merton described anticipatory socialization as a person beginning to take on and internalize the values and attitudes of those who already hold a desired role (1968). For example, someone who wants the role of elected official, or of rugby team member, may begin to speak, act, dress and 'think' the role of politician or rugby team member, even in the run up to an election or before tryouts begin.

2. Role clarity is a key factor in at least two possible ways. a) Role clarity around a currently-held role can make exit from that role more difficult for the incumbent. b) Role clarity of the desired role to hopefully be acquired can contribute to making a role transition go more smoothly (Burr, 1972, 410).

3. A clear and definite role exit process, plus a degree of high importance afforded to the process by the incumbent and/or by others, will likely ease the process of role transition (Burr, 1972, 414). If the process is clearly laid out with recognizable and agreed-upon steps, as well as with visible cues, it can become easier for a person to exit the role.

For example, graduating from high school often involves several clear steps and signs: talking with guidance counselors about post-graduation options, discussions with family and friends about the future and various possibilities, beginning to look at different options such as further schooling or employment, going to graduation parties, engaging in the graduation ceremony itself, and so on. Additionally, if the incumbent can see the importance of the role exit process, it can go more smoothly, e.g., if the person is excited to start a new job or to move to a new neighborhood.

4. Sending new, clear and strong role cues related to the 'target role' (e.g., helping someone to acquire new clothes, or to learn new habits or mannerisms) can smooth the process of role transition (Ebaugh, 1988, 151-152).

5. Acquiring a new social role may include both learning and un-learning (Ebaugh, 1988, 4), on the part of the incumbent as well as by others (e.g., observers, family, friends, servers). As described above, acquiring a new role can include dis-engagement and dis-identifying with the expectations associated with the old role (un-learning), as well as anticipatory socialization and identifying with the new expectations of the role 'target' (learning) (Ebaugh, 1988, 7, 10).

Thornton and Nardi describe such anticipatory socialization as the first stage of role acquisition (1975, 874). The authors go on to describe the second stage as actually taking on the role and its expectations from the inside, as an incumbent. This stage can be aided by the expectations of others, particularly those in the relevant role-set: "Within the role set, two sources may be distinguished: people enacting the same role as the incumbent (similar-role others) and people enacting reciprocal roles (reciprocal-role others)" (Thornton & Nardi, 1975, 872; cf. 876). In the context of service, servers would do well to be aware of both 'sources,' and to think deeply about how similar-role others and reciprocal-role others might help a

societally devalued person to exit a devalued role, and to acquire a societally valued role.

Typical Tensions Surrounding Role Exit

Trying to help a societally devalued person to exit a devalued role will likely raise certain tensions. One possible source of tension is that others around the devalued person may continue to hold onto expectations associated with that societally devalued role (cf. Ebaugh, 1988, 3). For example, if staff or even family continue to (unconsciously) hold and communicate child role expectations to an adult with impairments, it can make exiting the child role incredibly difficult.

The role incumbent him or herself may also (unconsciously) continue to hold on to self-expectations and habitual patterns which are strongly associated with the role to be exited, perhaps even having built these up over a long period of time (Ebaugh, 1988, 5). Such role residuals (Ebaugh, 1988, 173, 178) are particularly likely to linger if the role is or was highly salient to the incumbent, and required much time and effort to acquire in the first place. Someone who spent lots of money, time and effort on training and education to become a nurse or computer technician, not to mention years or decades of carrying out the work, is likely to find the process of exiting a work role (e.g., due to retirement or layoff) even more difficult. The same dynamics can occur even for incumbents of societally devalued roles.

Incompatible role demands between the role to be exited and the role to be acquired can also add a degree of complexity and tension to the process (Burr, 1972, 411). For example, helping a societally devalued adult to exit the role of child and to acquire the role of worker can be made even more complex in part because of the competing role demands of child versus worker.

Additional Considerations for Teaching or Applying the Role Exit Process Within an SRV Context

A prime consideration in learning, teaching and implementing the above ideas within an SRV context is that the process of role exit and consequent role acquisition will likely take time (Ebaugh, 1988, 22). It is not always a quick process, even if a precipitating event happens quickly. For example, losing a job or graduating from university may happen relatively quickly, though it may still take a long time for that person to stop thinking of themselves as a worker or as a university student, and to change their patterns of activity and thinking. An adult with impairments who has lived with his or her parents for his or her entire life may find it quite difficult to exit the role of 'grown-up child living at home' in order to take on a new role of roommate or apartment tenant.

Additionally, the degree of an incumbent's commitment to a role, regardless of whether the role is socially valued or devalued, will affect role exit. SRV teaches us that someone may become deeply committed to, and internalize, even a highly devalued role. Milne (2011) helpfully identifies two types of commitment: interactional and affective.

Interactional describes the amount and level of social commitment involved in a particular role. How many people does the person interact with in the role? How much time is spent on such interactions? This may affect the ease or the difficulty of role exit.

Affective commitment describes the weight of emotional energy and connections that the person associates with the role. Both interactional and affective commitment can affect the role exit process, and thus should be taken into account by servers, for example.

Finally, Ebaugh adds a further consideration in terms of the number of 'bridges' between a role that is exited and any newly acquired role (Ebaugh, 1988, 146). For example, family, friends, activities or hobbies may serve as bridges between an exited role and a new role. Such bridges can either facilitate or hamper efforts at role exit and role transition, and so should be taken into consideration by servers trying to bring about role exit from a societally devalued role, for example.

Conclusion

THE PURPOSE of this brief column was to look at some available material on the concept of role exit as described in sociological texts, and to analyze this material in light of SRV teaching and implementation. It is clear from Wolfensberger's body of work that he continually drew on new research and theoretical work from a variety of fields (e.g., sociology, psychology, education) to refine and add depth to SRV theory. This type of theoretical work remains important today, even without the presence of the original author.

Role exit seems to be a useful conceptual framework that has relevance to SRV teaching and application. I propose that an understanding of the related processes of role exit and role acquisition can be a helpful guide in SRV-based decision making, teamwork, goal setting, assessment of service efforts, etc. Its ideas and language may prove useful for SRV teachers and PASSING team leaders, as well as those working to apply the ideas of SRV within a human service context. ❧

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2a   Medieval Hospice and Hospital Design   (32:01)
2b   The "Menacization" of the Afflicted   (10:35)
2c   The Rise of Pauperism   (29:42)
3a   Deportation and Exile   (16:28)
3b   Containment and Confinement   (15:47)
4a   Degradation and Elimination of the Altar   (11:46)
4b   The Panopticon and Central Observation Stations   (28:11)
5a   Service "Deculturation" and Moral Treatment   (17:09)
5b   "Menacization" Images and Associations with Leprosy and Contagion   (23:58)
6a   The Association of Hospices with Houses of Detention   (13:43)
6b   Various Beliefs That Played a Role in Menacization   (4:59)
6c   Human Service Assumptions Based in Materialism   (14:18)
6d   Further Menacization Through "Treatments" Based on Punishments   (31:23)
6e   Regimentation and the Use of Military Imagery   (17:07)
7a   Historical Lines of Influence in the Perversion of Western Human Services   (14:51)
7b   Core Realities, Strategies and Defining Characteristics of Contemporary Services   (31:21)
7c   Some Conclusions   (10:53)

DAY 2: Reflections on a Lifetime in Human Services

1   The Bad Old Days, Part One   (23:48)
2a   The Bad Old Days, Part Two: The Institutional Scene, Part 1   (33:06)
2b   The Bad Old Days, Part Two: The Institutional Scene, Part 2   (15:59)
3   The Bad Old Days, Part Three: The Educational Scene   (19:54)
4a   What Has Gotten Better, Part One: The Early Reform Era   (27:39)
4b   What Has Gotten Better, Part Two: Normalization   (12:53)
4c   What Has Gotten Better, Part Three: The Rights Movement   (5:55)
4d   What Has Gotten Better, Part Four: Summary of Positive Developments   (17:53)
5   What Is Still the Same, New Problems That Have Arisen & Things That Have Gotten Worse:
        Part One   (12:30)
6a   What Is Still the Same, New Problems That Have Arisen & Things That Have Gotten Worse:
        Part Two   (31:18)
6b   What Is Still the Same, New Problems That Have Arisen & Things That Have Gotten Worse:
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Reviews & More

Picturing Disability: Beggar, Freak, Citizen, and Other Photographic Rhetoric. By R. Bogdan *with* M. Elks *and* J.A. Knoll. Syracuse, NY: Syracuse University Press, 198 pages, 2012. **REVIEW AVAILABLE ONLINE @ www.srvip. org**

Reviewed by Thomas Malcomson

Robert Bogdan, Distinguished Professor Emeritus of Social Science and Disability Studies at Syracuse University, has written a fascinating overview of the history of the photographing of people with disabilities in the United States, between 1870 and 1980 (with separate chapters from Martin Elks and James A. Knoll). The major focus of the book though is from 1900 to 1960. It is a generalist's book as it will appeal to those interested in photography in general and as an art form, the history of postcards, clinical representation of the disabled, institutions for the disabled, circus freak shows, and the histories of advertising, begging and charity. Each of these topics assumes the core of a separate chapter.

Bogdan declares his purpose to be the examination of photographs of disabled people (and in one chapter asylums for the disabled) to uncover what the "makers" of the photographic images "were up to" (p. 3). All three authors do this by exploring the "visual rhetorical techniques in photographs" (p. 2). He breaks the photographs into separate genres, searching within each for similarities in staging, subject portrayal, intended audience and use. This analysis creates categories within each genre. He attempts to grasp the photographer's intention for the photograph. The pictures add an emotional and aesthetic element to the collection of facts we have about past social orientations towards people with disabilities. Bogdan's method soundly accomplishes his goal within the following nine chapters.

Chapter two addresses the images produced for freak shows. These images were created to sell for the profit of the person depicted and/or their promoter, to advertise the show's attractions and to provide the audience with a souvenir of their experience. There are three categories discussed within the chapter. The first are people missing their arms who use their feet to perform tasks usually left to the hands, such as drinking tea from a fancy cup, tatting and drawing. Second are the dwarfs and giants whose unique size is photographically exaggerated by juxtaposition, if not with each other, then with people of average height. The third group is composed of those whose abnormal body is created, or embellished for the camera. Both of these are engaged in the effort to dupe the audience. One form of this category is an able person using people with a disability in a false context. Bogdan uses the example where people with microcephaly were dressed in supposed garments of ancient Aztecs, or African tribes, and presented as primitives. As Bogdan notes, this depiction left "… people with developmental disabilities … cast as comic fools" (p. 18). Missing from these presentations was any sign of charity or destitution; indeed, the author tells us the subjects of the photographs were at times financially better off than the people who bought the pictures.

Financial need is at the heart of the next chapter which explores the use of begging cards to earn money for the person depicted on the card. These cards were very common in the first three decades of the 20th century. Distributed by hand, by the person they depicted, or through the mail, these postcards were meant to elicit donation to the "beggar." Some cards contained Christian messages of charity to encourage a donation, some used pity, while others offered some item (such as a magazine subscription) or a performance of music by the person depicted. Another genre with-

in this category was the travelling person, who roamed America in search of money in some form of transport, be it a specially modified motorbike with a sidecar, or a cart pulled by goats or dogs. All these photo cards revealed the person's disability (most show a person without legs). Those selling an item or giving a performance were engaging the would be donator in an exchange of some form whereas the first groups were simply asking for money, depending on the donator's good will or guilt. Some of these beggars developed local personal notoriety. Bogdan indicates that the social service agencies and social workers ultimately undermined "the beggar," with their claim to be the only legitimate points of distributing money to the disabled.

This last point segues nicely into the following chapter which explores the photographs generated for the charity movement, especially from the 1940s through the 1970s. The first photo-cards/postcards used by charities (including those operated by fraternal orders) were much like the begging cards. By mid-century the idea of poster child had dominated the fundraising activity of most charities. The use of photogenic young children was meant to strike at the adult heart, provoking a donation. Many of the images depicted children being freed of their disability through the money that was donated for research, treatment and cure. Some, like those of the Jerry Lewis Muscular Dystrophy telethon photos, emphasize the despair in the child's condition to elicit pity (possibly guilt) in the would-be donator.

Another group of images has celebrities (movie stars and politicians) interacting with the disabled person, raising public awareness, and campaigning for donations. The splash back for the celebrity was the positive image created in the public mind of their 'being compassionate' towards those viewed as less fortunate then themselves. Photographs include a young Elvis Presley, Marilyn Monroe and Richard Nixon, each supporting a March of Dimes campaign. Presidents apparently created photo-opportunities where they shook hands with disabled war veterans on the White House lawn. One interesting photograph in the book is of F.D. Roosevelt doing this in 1936. He is standing next to a naval officer as the line of disabled veterans in wheelchairs and their attendants pass by (Fig. 4.14, p. 52). Looking carefully you can see Roosevelt is holding on to the naval officer's arm: the President's cane hooked over the officer's forearm. F.D.R.'s own disability is partially submerged in this photo of disabled veterans meeting their President. Charity images were meant to raise funds, not to accurately represent the disability, or the people who experienced it the most. Bogdan states they may have been demeaning but they were ultimately effective.

Chapter five addresses the use of postcards and photographs for either support or criticism of asylums. Most of the chapter deals with the generation of postcards depicting the institution as tourist attraction, major local employer or as site of 'modern' scientific/medical intervention. They were sold for profit to the public and were to be collected or used to send missives to others. These images were most often devoid of the institutional inmates or workers, as they and cars (also missing in most images) dated the image and thus shortened the shelf-life of the postcard. They depicted the size and architecture of the institution, favouring distant photos of the massive buildings and photographs of front gates, administration buildings or the two and three storey 'cottage' residences. When images with people did appear in this category, they showed them sitting in hallways or in ward views. Images of the institutions were also used to promote and advertise the asylum. They appeared in annual reports to government and/or the board of directors and funding organizations. These images represented the good work being carried on at the asylum. Inmates were depicted engaged in activities that were deemed most suitable for their abilities and future. They were intended to demonstrate the positive conditions existing within the institution. The third category of image covered in

this chapter are the images revealing the horror of life within the asylum. Bodgan calls these the muckraking photographs, obtained by journalists doing exposés on asylum life and other critics of the institutional model. The third group were intended to do the opposite of the first two types. All three were produced to demonstrate the perspective of the person taking the picture and they could all be of the same institution.

Martin Elks (the author of chapter six) explores photographs taken as a clinical piece of data illustrating some physical aspect of disability, or defect, for the professional to study, or the general public to realize the physicality of the condition being discussed. They are not taken for aesthetics, nor as souvenir or to entertain, but to inform. They show twisted, deformed and unstable bodies, upper torso and head profiles (front and side like a mug shot) or 'deformed' body parts. The texts with which these pictures were intertwined explained intellectual disability, mental disorder, poverty and immorality as being biologically rooted. They served the biological medical model and the eugenicist, convincing the public that these 'physical' problems required a physical solution. Elks notes that eugenicists "created an imaginary disease, feeblemindedness" in part with photography (p. 98). The sense that a photograph was a truthful depiction of reality lent false validity to their claims.

In chapter seven, Bogdan examines the use of people with disabilities in advertising. There were two very different types of photographs in this genre. The first group uses people with disabilities to sell products. In one variation they are used within a mythic tale of the origin of the product for sale. Perhaps the best example was the use of a dwarf to play Buster Brown, the perpetually five-year-old cartoon character, to help sell shoes for the Brown Shoe Company (pp. 100-101). Dwarfs were also employed to get the reader's attention by using their 'different' appearance to catch the reader's eye (these were print ads in popular magazines). The second group was quite different, in

that it used disabled people to sell appliances (i.e., artificial limbs, wheelchairs) to other disabled individuals. The man with two artificial legs in the ad was similar to the potential buyer. Where the first type in this genre appeared to preserve and play on the stereotyped perception of the disabled, the second used their legitimate experience to help sell a product.

Hollywood's image of people with disabilities is the focus of chapter eight. Bogdan examines films from the 1920s and 30s mainly (Dr. Strangelove, 1964, is the most recent film mentioned). He highlights the career of Lon Chaney, who played many disabled characters, almost always monster like. The movie world seems to cast disabled people into roles of fool, murderer, angry and hateful person, or a warped creation of a mad scientist. He concludes that Hollywood has placed in the public mind many of its perceptions of disability. This "hidden curriculum … informs people of all ages that people with disabilities are to be feared or pitied or laughed at" (p. 128).

James Knoll penned chapter nine, dealing with the representation of disability and the disabled within photographic art. Due to copyright issues, few images appear in the chapter, but Knoll's written descriptions of the works are vivid, and wherever possible he provides URLs to view the image online. This chapter holds the most recent photographs (1965-1980) discussed in the book. The use of the person with a disability as part of the aesthetic captured by the photographer is extremely different from any other genre discussed in the book. Composition, line, shadow and symbolism (among other elements) become the dominant features in creating the images. Perhaps to offset this, Knoll does provide information on some of the people depicted, information that would not be present in the art installation. The chapter is organized around seven photographers and their work. Knoll concludes that the disabled have been placed in the role of provocateur, to disturb and alarm the viewer. He also finds that the images often show the person with a disability

to be an "outsider," someone set apart from the rest and unable to enter equally into society. This, he notes, is in contrast to the "efforts by many people with disability" to be seen as equal, capable and connected into the rest of society.

Chapter 10 concerns photographs "as personal keepsakes" and is titled "Citizen Portraits." The chapter examines photographs taken for work, community and family, in which one of the individuals (in some cases the only individual) happens to have a disability. Contrary to the other genres, we see here an effort by the photographer at inclusion and creating 'normality' in the scene. Here all people are equal, even if in some instances efforts are made to hide or distract from the disability. Personally, I found this chapter to be the most encouraging, in that it covered the same time period as some of the most devaluing photographs analysed in the book, and yet revealed people's efforts throughout the era to have images that captured the valued roles (worker, friend, child, sibling, grandparent, etc.) in which the photographed people were engaged. Examples include: The three employees standing next to a press (the centre man on a crutch has one leg) are simply workers being photographed (10.8, p. 149). A grandmother holding a newborn is the central figure in another picture, her wheelchair present but not dominant (10.26, p. 157). And the young boy with Down's syndrome seated on a window seat, well dressed and groomed, with proper posture, the drapes behind him and the potted plant off to the side indicate the home and family of which he is a member (10.2, p. 146). He appears to be a young man with potential.

The final chapter is titled conclusions but it does not review the various findings across the chapters. It proposes a set of possible future genres for study and sounds the warning to be careful when interpreting or reading the images. The possible genres include town characters, veterans, African-Americans with disabilities, religion, and to explore photography of the disabled in other countries. Bogdan considers his purpose, to examine

the motives for making the pictures he reviewed, accomplished. He notes that he did not examine social forces that shaped the photographers and how they used their images, but suggests that the image makers were a product of their times.

I agree that Bogdan, Elks and Knoll have accomplished the goal they set out to explore. Their analysis of the images examined is compelling. There are, however, tensions that exist within the book between some of the various chapters. The chapters on freaks, beggars, charity and advertising are related, sharing the common features of the semblance of direct involvement of the person with a disability in the activity, and the underlying motive of generating money through the use of images of people with disabilities. A second group contains the chapters on asylums and clinical pictures. Here the commonality is a distance from the person with a disability and the role of an authority using the images to create support for their perspective. The chapters on Hollywood's representation of disability, photography as art, and citizen portraits, each stand separately, in clear opposition to all the others. The chapter on Hollywood is overwhelmingly about the creation of the image of menace and uses people without disabilities to 'play' disabled people. The art photographs are about aesthetics and the chapter on citizenship is about people having a valued place in society. The tension between these dynamically opposed themes needs exploration. Bogdan does draw the reader's attention to the difference between the asylum images and those with a focus on people. The tension is approached again in the chapter dealing with the art of photography, with a discussion of how photos as 'art form' changes the nature of how to look at the images. But the differentiations need to be drawn out much more. The citizen photographs are dominated by images of inclusion, valued roles and competencies, unlike any other within the book. How did these positive images exist within the same time and space as those of the freak, beggar, poster child, and Hollywood

monster? Where did these opposing representations meet and what resulted?

This book was not written from an SRV perspective. Bogdan, a sociologist, employs the same analysis as he would if he were reading "interview transcripts or field notes" (p. 4). SRV is mentioned once in the entire text (p. 145) and is used to explain the creation of positive images of people with disabilities by various social service agencies, community organizations and disability rights advocates to foster positive public perceptions of the disabled. He states it creates contrived pictures, the exact opposite of the 'natural' images found in chapter 10, "Citizen Portraits." This is a limited view of SRV and ignores the potential it holds to assist in understanding the perspectives of the photographers and the impact of the images discussed within this book, including chapter 10.

There are so many examples that illustrate SRV's image and role communication within the 223 pictures in this book that only a few can be noted. The impact of grouping many disabled people in one picture or several individual photographs on one page of a book (as several examples in the chapter on clinical photographs demonstrate) clearly serves to heighten the sense of difference and the scale of the disability. The chapter on advertising has several examples that cast adults in the role of perpetual children. Images of people working in freak shows reinforce the negative stereotype of primitive, savage, abnormal, and if not these, then certainly different. Even if they earned more money than their audience, the setting they were viewed in reinforced the divide between them and their audience, who came to view, not to interact. The creation of people as objects of pity in order to extract money from the viewer is present in many of the images in the chapters on begging and charity. Beyond these (and the many other) specific examples of SRV elements, the sheer presence of so many of these images in the public domain between 1870 and 1980 illustrates the role of social imaging and (in most cases) the negative perceptions and expectations planted into the minds of the viewers, much at an unconscious level.

This book by Robert Bogdan (with Martin Elks and James A. Knoll) is highly recommended to

Invitation to Write Book, Film *&* Article Reviews

From the Editor

I ENCOURAGE OUR READERS to submit reviews to *The SRV Journal* of current films, books and articles. For people who are studying SRV, looking for everyday examples can help deepen one's understanding. For people who are teaching SRV, learning from and using contemporary examples from the media in one's teaching can be very instructive for audiences. For people who are implementing SRV, contemporary examples can provide fruitful ideas to learn from. Some books and articles mention SRV specifically; others do not but are still relevant to SRV. Both are good subjects for reviewing. We have written guidelines for writing book and film reviews. If you would like to get a copy of either set of guidelines, please let me know at:

Marc Tumeinski
The SRV Journal, 74 Elm Street, Worcester, MA 01609 USA
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anyone interested in the lives of people with disabilities and their representation within society. It is a must read for those involved with SRV, whether in implementation, teaching or learning the theory. Apart from informing on the subject of photographic representation, the material in the book ought to provoke a cascade of SRV connections and much thought about the social power of images.

THOMAS MALCOMSON, PHD, is a professor at George Brown College in Toronto. Co-author of the textbook Life-Span Development, he teaches a course on the history of eugenics.

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Announcing the publication of
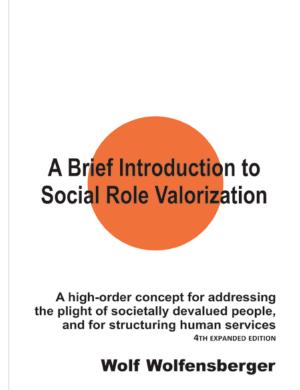## A Brief Introduction to Social Role Valorization:
A high-order concept for addressing the plight of societally devalued people, and for structuring human services *(4th expanded edition)*
by Wolf Wolfensberger, PhD

"A long-held rationale of those of us who teach SRV Theory is that the material helps students to see the world from the perspectives of those who receive services and supports, rather than the service provider. Time and again, we hear students describe this as the single most important aspect of taking an SRV Theory course. They talk about how they now have new, or different, eyes with which to see and understand their world. Many describe the realization that *they* first had to change in order for them to address the issues and problems of the people they were assigned to teach or help. When they changed their perceptions of another person, they then changed their expectations of this person, along with their ideas of what the person actually needs and how to effectively address these needs" (from the foreword by Zana Marie Lutfiyya, PhD and Thomas Neuville, PhD).

CRAZY LIKE US: THE GLOBALIZATION OF THE AMERICAN PSYCHE. By E. WATTERS. NY: Free Press, 2010. **REVIEW AVAILABLE ONLINE @ www.srvip.org**

Reviewed by Susan Thomas

THIS REVIEW IS BASED ON a presentation given about the book by the author, a San Francisco-based journalist. For this book, he examined four different types of supposed mental disorders, each one in four different parts of the world: anorexia in Hong Kong in the mid-1990s, depression in Japan, post-traumatic stress disorder (PTSD) in Sri Lanka after the Boxing Day tsunami there (December 26, 2004), and schizophrenia in Zanzibar. He contrasted the ideas about these conditions that prevailed in these different cultures with the prevalent ideas in the US, and compared as well their treatments for these conditions with the treatments used for them in the US.

Not surprisingly, what is recognized as mental disorder varies around the world, such disorders take different forms at different times and places, and conditions that were at one time and place widely prevalent may at another hardly exist. For instance, during the Victorian era in England, a large number of women were diagnosed with hysteria, and a similarly large number of young men exhibited anomie by wandering the countryside (they were called "mad travelers"). Now, we hear hardly anything about either of these two conditions.

The historian of psychiatry Edward Shorter has noted that cultures at different times and places make different "symptom pools" available to members of their culture to express their mental distresses, "symptoms" being how people communicate their distress so that it will be recognized by their society in their time. (Without using the language, Watters noted that much expectancy and conformity to expectancy is at work here.) Who defines the "symptom pool?" It is (a) experts and quasi-experts, e.g., priests, doctors; (b)

the suppliers of treatments, e.g., shamans, drug companies; (c) journalists and fiction-writers; and (d) celebrities. Whenever something is recognized as being in the symptom pool for indicating mental distress or disorder, a large number of people will manifest that symptom; but once the symptom declines in social acceptability, then the number of people who display their mental distress in that way also declines. For instance, when Princess Diana was alive and reported to be bulimic, the number of people who also reported being bulimic was very high–but after Princess Diana died, the incidence of reported bulimia drastically declined.

As regards PTSD, this condition as we now know it first started out in 1972 when it was called post-Vietnam syndrome. In the five years between 1999-2004, the number of Vietnam war veterans in the US applying for help with PTSD doubled, even though this was more than 25 years after the end of that war, at least in good part because PTSD is now in the symptom pool. Also, a large number of US veterans now returning from combat in the Middle East are committing, or attempting to commit, suicide, reflecting the fact that suicidal behavior is now firmly entrenched in the symptom pool in this culture. This idea of a "symptom pool" raises the troubling question: now that all four authorities noted above that determine what is in the current symptom pool have apparently concluded that mass rampage murder is one of the ways that mentally disturbed people in our culture express their disturbance, and now that large numbers of the public apparently agree with them, will there be–for that reason alone–an increase in mass rampage murders as more disturbed people communicate thusly their disturbance in this society, not to mention there could be other contributors to an increase in such violence?

When the Training Institute was issuing its publication TIPS (Training Institute Publication Series) from 1980 to 2007, Dr. Wolfensberger used to poke fun at shrink-types from the devel-

oped world, mostly the US, who would swoop in whenever and wherever a disaster occurred, and begin offering shrinkery to the dazed survivors. Such "counseling" of myriad forms was likely to be offered even before (and sometimes instead of) what the suffering people really needed, such as food and shelter. Watters also analyzed this phenomenon, and while he attributed good intentions to these westerners who swarm to disaster zones, he also noted how un-fitting are the options they offer for treatment to these different cultures that are not so materialistic, atomized, and decommunitized as is contemporary western culture. However, with the exception of documenting the higher recovery rates from "schizophrenia" in Zanzibar than in the west, Watters did not remark on the fact that these western treatments are notably unsuccessful even in the west, let alone in other parts of the world.

Watters' research is a re-confirmation of what has long been known, namely that culturally-embedded practices tend to work in their culture, and culture-alien ones do not. This is the reality underpinning the importance given in SRV to identifying culturally valued practices, and then using these valued practices as the analogues or models for what is done to or for devalued people to address their problems and needs.

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

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Tranquil Prisons: Chemical Incarceration Under Community Treatment Orders. By E. Fabris. Toronto, ON: University of Toronto Press, 2011. **REVIEW AVAILABLE ONLINE @ www.srvip.org**

Reviewed by Susan Thomas

This book is written by a self-described "psychiatric survivor" (meaning someone who has been a recipient of mental services, including "hospitalization"), but who also has other roles, including university lecturer, advocate and social activist, and former human service worker. The book's thrust can be summarized as follows:

Community Treatment Orders, or CTOs, are legal orders in Canada that allow a person deemed to have a mental disorder to be treated "in the community" (i.e., not in a psychiatric institution) on the condition that such a person voluntarily agree to stipulated treatment. Similar arrangements exist in Britain, New Zealand and the US; in the US, they are called Involuntary Outpatient Committals. However, in the vast majority of cases, the "treatment" ordered by a CTO consists of the administration of mind-affecting and mind-controlling drugs, and possibly also visits to a psychiatrist. Further, while the person is supposed to agree voluntarily, the system is so arranged that a person's refusal to agree to a CTO is taken as de facto evidence that the person "lacks insight" or is "in denial" about "having" a "mental illness," and that the person is not/will not be compliant with "treatment." This refusal usually means the person will either get sent back to a mental institution, or not be released from one if that is where he or she is. In other words, the supposed voluntariness of the CTO is a sham (at least in the US, the parallel order is explicitly called involuntary). Thus, the CTO constitutes an arrangement that the author calls involuntary chemical incarceration, in which the drugs (the chemicals) are just as restrictive of movement as being physically incarcerated in a prison or mental institution, and are

additionally restrictive of a person's intellect, will, and consciousness. In other words, a provision that is touted as a service reform or improvement (over institutionalization) is actually the opposite. Indeed, CTOs are based on the unspoken premise that coercion is treatment. This is similar to a conclusion we have come to from the observation of many human service practices, namely that the conveyance of death to recipients is often seen to constitute "treatment." The author himself, on pp. 188-197, provides a concise, but longer, summary of the book that is very similar to the one I have just given.

The book contains much documentation of the author's thesis, and of the fact that the vast majority of people with mental disorders experience their mind-drugging as harmful—and not only that they experience it that way, but that it is in fact very harmful. The book also gives numerous examples of the many wounds inflicted on people with mental disorders specifically: physical and functional impairments (inflicted largely by mind drugs); devaluation, and multiple jeopardy; rejection and distantiation; being negatively imaged; being cast into the roles of object, non-human, menace, sick patient, and burden; physical and social discontinuities; lack and/or loss of natural and freely-given relationships; deindividualization; deprivation of autonomy and control—in fact, this is the wound that the author focuses most prominently on; and deathmaking. So extensive is the evidence that the book could serve as a resource for a presentation on the common "wounds" of people with mental disorders. Unfortunately, the thesis and the evidence for it are embedded in the peculiar and sometimes (actually, often) virtually undecipherable language of social constructionism, contemporary "mad" discourse of the psychiatric survivor movement, and the social model of disability. (See the article by S. Tiffany on the social model of disability in the December 2011 issue of this *Journal*, vol. 6, no. 2.) Also included in this confusing and even impenetrable language

are the author's numerous efforts to explain his method of inquiry and the sources he drew upon for it. In fact, his aforementioned summary on pp. 188-197 is the clearest part of the book, and would suffice for at least those readers who are already somewhat familiar with the bankruptcy of contemporary mental services, and especially the harmful effects of mind drugging.

In an exceedingly brief section at the end (p. 198), the author proposes six measures to improve mental services: "(a) create self-sustaining refuges to meet 'basic needs'; (b) give people at least one person who they can count on in any circumstance; (c) create non-judgmental support strategies, not given or governed by those who are charged with imposing restrictions; (d) have negotiations regarding social restrictions overseen by advocates to ensure compliance with basic standards …; (e) encourage the use of non-destructive therapies (e.g., natural remedies) even for chemical restraint …; (f) use non-destructive methods to intercede in violence." Thankfully, suggestions (b) and (d) recognize the need for independent advocacy, and would support volunteer individual advocates, such as Citizen Advocacy programs find and arrange for. Unfortunately, while earlier

in the book the author cities many instances in which mentally disordered people do better when they are working, enrolled in school, painting and writing, etc., the relevance of this fact to the power of social roles is never taken up, nor is there any recommendation that such valued roles be sought for people with mental disorders.

Also, the few mentions of normalization in the book are negative references, consistent with the social model of disability's perspective that the "normal" is oppressive and what this author (and contemporary "mad" rhetoric) describes as "sanist," meaning that the upholding of sanity is devaluing of the mental states of mentally disordered people themselves, particularly when a version of sanity is held or even enforced as a norm.

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

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Announcing
**Advanced Issues in
Social Role Valorization Theory**

Social Role Valorization

Advanced Issues in
Social Role Valorization Theory

Wolf Wolfensberger

About Social Role Valorization (SRV)
Social Role Valorization (SRV), a human service theory based on the principle of normalization, proposes that positively valued social roles are needed for people to attain what Wolfensberger has described as the good things of life (well-being). This is of particular importance for individuals with impairments or otherwise at risk of being socially devalued by others, and therefore of great importance for human services to them.

About the book
The first two chapters explain SRV, and give depth and background to SRV as an empirical theory that is applicable to human services of all kinds, to all sorts of people. The remaining chapters are all revised and expanded versions of presentations that Dr. Wolfensberger had given at previous international SRV conferences. The topics treated in the chapters move from the general (chapters 2, 3 and 4) to the more specific (chapters 5, 6 and 7).

  The contents of the book are especially useful for people who do, or want to, teach SRV; for SRV researchers; and for those interested in implementing SRV in a systematic way, especially in service fields where SRV is new, not yet known, and not widely—if at all—embraced.

About Wolf Wolfensberger, Ph.D. (1934-2011)
World renowned human service reformer, Professor Wolfensberger (Syracuse University) was involved in the development and dissemination of the principle of normalization and the originator of the program evaluation tools PASS and PASSING, and of a number of service approaches that include SRV and Citizen Advocacy.

Book Chapters
  • Foreword
  • Preface
  • Chapter 1: A brief overview of Social Role Valorization
  • Chapter 2: The role of theory in science, and criteria for a definition of Social Role Valorization as an empirically-based theory
  • Chapter 3: The hierarchy of propositions of Social Role Valorization, and their empiricality
  • Chapter 4: The relationships of Social Role Valorization theory to worldviews and values
  • Chapter 5: Values issues and other non-empirical issues that are brought into sharp focus by, or at, occasions where Social Role Valorization is taught or implemented
  • Chapter 6: Issues of change agentry in the teaching, dissemination and implementation of Social Role Valorization
  • Chapter 7: The application of Social Role Valorization principles to criminal and other detentive settings
  • Conclusion to the book

GABRIELLE. By L. ARCHAMBAULT (Director). 104 minutes, 2013. French (with English subtitles). **REVIEW AVAILABLE ONLINE @ www.srvip. org**

Reviewed by Judith Sandys

THE FILM Gabrielle had its North American premiere at the Toronto International Film Festival (TIFF) in September 2013. First shown at a film festival in Locarno, Switzerland (where it was awarded the Audience Award), and now released internationally, the film has been submitted by Canada as a potential nominee for an Academy Award in the Best Foreign Language Film category.

Gabrielle, a fictional story, stars Gabrielle Marion-Rivard, a woman who both in the film and in real life has an intellectual disability. Gabrielle Marion-Rivard has Williams syndrome, a genetic condition associated with intellectual disability. (According to the Williams Syndrome Association website, people with this condition are also said to have "striking verbal abilities, highly social personalities and an affinity for music.") Ten other actors are also people with intellectual disabilities, and they are members of the choir that is featured in this film. They are joined by a number of non-disabled actors, including Alexandre Landry who plays the role of Martin, Gabrielle's intellectually disabled boyfriend. Gabrielle Marion-Rivard and some of the other members of the choir are members of Les Muses; in English, The Muses: Centre for the Performing Arts, which describes itself as "a unique school ... that offers professional training in theatre, dance and singing to artists living with a handicap."

The film focuses on Gabrielle's experiences and struggles. Gabrielle is attractive, well dressed, articulate, and very sociable. She is also a skilled singer and an enthusiastic member of a choir, comprised of people with intellectual disabilities. She has a boyfriend, a lead singer in this same choir, with whom she has a close and loving relationship; a boyfriend with whom she wishes to

have a sexual relationship. But Martin's mother disapproves of this relationship, takes him out of the choir and forbids him from seeing Gabrielle.

In order to pursue this relationship, Gabrielle wishes to live independently rather than in the group residence where she is currently living. Gabrielle's sister is supportive of their relationship and invites Gabrielle to stay at her house. But when Gabrielle is left on her own, she makes a mess of the kitchen, burns the toast, and sets off the smoke alarm. Following this, she sets out to find her boyfriend where he is working, rushing out into traffic, narrowly missing getting hit by a car.

Throughout the film, the choir is rehearsing for an upcoming music festival in which they will be participating. In the end Gabrielle and Martin do manage, against all odds, to consummate their relationship. They then return to sing in the choir during the big performance at the music festival.

Reviewers of the film are uniformly generous in their praise of Gabrielle Marion-Rivard, referring to her, for example, as "a delightful newcomer" (Hollywood Reporter, 2013), "an utterly enthralling onscreen presence" (Gray, 2013), and "likeable, touching and believable" (Marchen, 2013).

In terms of the film itself, reviews are more mixed. Some see it as "a poignant drama" (Perkins, 2013) or "a respectful, honest and moving story about love, music and personal independence," that "also happens to be about the developmentally challenged" (Gray, 2013). However, others see the film as highly manipulative and lacking in subtlety. One reviewer contends that "the emotional moments are a direct result of sympathy for Gabrielle's condition" (Next Projection, 2013). Weissberg (2013) writing in *Variety* magazine, comments: "Fitting into the solid market for well-made uplifting stories about individuals with special needs fighting the odds and coming into their own, the picture can also be seen as a manipulative heart-tugger directed at self-satisfied audiences who enjoy rooting for those less fortunate than themselves."

To what extent, if at all, does a film of this nature affect how viewers perceive people with intellectual disabilities? Does the film challenge existing stereotypes, enabling viewers to see beyond some of the misconceptions that they may have held? To what extent do viewers identify with Gabrielle and see her (and the other intellectually disabled people in the film) as more like themselves than different?

In many respects, the film presents Gabrielle positively. We see a young woman, well dressed and attractive, able to engage in a meaningful relationship, with desires typical of many young women. We see a person who is strong-minded and determined, and someone who is a very competent singer and choir member. Clearly this young woman has a number of valued social roles–singer, choir member, girlfriend, sister, daughter.

The members of the choir are all well dressed and present a pleasant and appropriate appearance. All demonstrate the kind of disciplined attention and perseverance required for the mastery of a skill, and they make beautiful music together. Clearly being a member of this choir is a valued social role. Gabrielle's boyfriend is portrayed as a somewhat shy and awkward individual but he, too, looks and acts appropriately and he has a job. Like Gabrielle, he is member of this choir, and in fact is the lead singer. He is obviously able to reciprocate Gabrielle's feelings for him. Again, he has some valued social roles–as a singer, choir member, boyfriend and employee.

Unfortunately, these positive images and roles are accompanied by many others that are troubling. When Gabrielle burns the toast and sets off the smoke alarm, the sister comments that this show that Gabrielle needs to be in the group residence. Rather than assuming that Gabrielle needs assistance in learning to cook, this is taken as evidence that she cannot live on her own. When she runs into the street without looking out for traffic, this too is seen as a lack of competence rather than a lack of appropriate preparation. Clearly

the message portrayed by the film is that someone like Gabrielle cannot learn new skills nor become more independent. Even the positive work role of Gabrielle's boyfriend is compromised; he works in a pet store, one of those jobs many people see as particularly appropriate for a person with an intellectual disability.

The intellectually disabled people portrayed in this film are seen living in a group residence and attending a segregated "centre" where they participate in a segregated choir. The assumption that these segregated settings are necessary and appropriate for this population is never questioned or challenged. However, while the segregated nature of the center is negative, the activity is positive. This is an example of how, even in the context of a segregated setting, it is possible to provide meaningful activity, and intensive and relevant training that promotes competency enhancement. Ironically, the choir is so skilled that one imagines its members would be an asset to any choir. Why then the assumption that they should be segregated?

Another disturbing aspect of this film is the way families are portrayed. Gabrielle's sister is supportive of Gabrielle's relationship with Martin but not effective in enabling her to be more independent. Her mother is barely visible in the film and it appears that she is very distant from her daughter. Gabrielle's boyfriend's mother is portrayed as the villain who is seeking, albeit unsuccessfully, to prevent Martin from having a relationship with Gabrielle. That many families can and do play an important role in promoting increased independence gets lost in these stereotypical portrayals.

For the typical viewer, this is likely a "feel good" film. Viewers are likely to feel positively towards Gabrielle, to admire her determination and to celebrate her relationship with Martin. Many will not have had much opportunity to know people with intellectual disabilities, and this seemingly intimate portrait and the positive feelings that it engenders will enable them to see themselves as being accepting and tolerant of such people.

However, in fact, the film is a confusing and frustrating amalgam of positive and negative images of disability. While at various points it presents very positive images which challenge existing stereotypes (e.g., it is not often that people with intellectual disabilities are portrayed as participating in a mature relationship involving sexual intimacy), in most respects it simply reinforces traditional and damaging perceptions of people with intellectual disabilities. For many, seeing this film is likely to confirm their belief that people with intellectual disabilities are unable to learn new skills, require segregated programs where they can be taken care of, and are happiest in the company of other disabled people.

Those of us who teach Social Role Valorization in university or college courses may find this a helpful teaching tool. The mostly young students who are often about the same age as Gabrielle will have no difficulty identifying with her desire for independence and for an intimate relationship. The combination of positive and negative images and roles are likely to generate good discussion, and to enable students to make connections between having valued social roles and experiencing the good things in life. Certainly, the valued social roles that Gabrielle has provide her with access to some of the good things in life, including meaningful activity, the opportunity for growth and development as a singer and choir member, the respect of those who hear the choir, and the intimacy that comes from being someone's girlfriend. At the same time, Gabrielle continues to experience the wounds that so often befall someone who is devalued on the basis of an intellectual impairment–segregation, low expectations, having one's living situation and relationship under the control of others.

The film is also likely to promote a discussion of sexuality and disability. Why should Gabrielle and Martin have had to sneak off in order to have sex? Why is it that people with intellectual disabilities are so often denied the opportunity to engage is sexual activity, and what should or could be done about this? While the issue of people with intellectual disabilities becoming parents is not explored in this film, any discussion of sexuality is sure to raise this complex issue. Surely the fear of parenthood is insufficient reason to prevent all sexual relationships? What should happen if and when a woman with an intellectual disability does give birth to a child?

I saw this film in September at the Toronto International Film Festival. One of the features that draws me back to TIFF year after year is the frequent opportunity it presents to hear from the director and principal actors after the performance, when they stay around for a Q & A. Such was the case at this film. In addition to the director of the film, Gabrielle Marion-Rivard was present, accompanied by her mother and sister. She was poised and articulate, clearly proud of her accomplishments as an actor and pleased to talk about it. Yes, she very much enjoyed being in this film. Yes, this was the first time she had acted. Yes, the director had been very supportive. Was there anything about it that she hadn't liked? No. What was the hardest part? The love scene!

Along with the images and roles presented in the film, the film itself provides an opportunity both for its star, Gabrielle Marion-Rivard, and ten other people with intellectual disabilities to act in a film–certainly a valued social role for all of them.

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LIST OF 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. (2008). By Janis Chadsey. Annapolis, MD: AAIDD, 49 pages.

Inclusive Livable Communities for People with Psychiatric Disabilities. (2008). Washington, DC: National Council on Disability, 84 pages.

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

Achieving community membership through community rehabilitation provider services: Are we there yet? (2007). *Intellectual & Developmental Disabilities, 45*(3), 149–160.

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

Hall, A., Butterworth, J., Winsor, J., Gilmore, D. & Metzel, D. Pushing the employment agenda: Case study research of high performing states in integrated employment. (2007). *Intellectual & Developmental Disabilities, 45*(3), 182-198.

Wolfensberger, W. How to comport ourselves in an era of shrinking resources. (2010). *Intellectual & Developmental Disabilities, 48*(2), 148-162.

Abernathy, T. & Taylor, S. Teacher perceptions of students' understanding of their own disability. (2009). *Teacher Education & Special Education, 32*(2), 121-136.

Patterson, I. & Pegg, S. Serious leisure & people with intellectual disabilities: Benefits & opportunities. (2009). *Leisure Studies, 28*(4), 387–402.

Social Role Valorization News & Reviews

Susan Thomas

The intent of this column is five-fold:

(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. Some of these items may serve 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.

(d) Document certain SRV-related events or publications for the historical record.

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

Aside from being instructive to readers, persons who teach SRV will hopefully find many of the items in this column useful in their teaching.

A Few Updates

*Here is an update on the 1971 Attica prison uprising, commented upon in this column in the preceding issue of the *Journal*: the only inmate who was convicted of murder as a result of the uprising died in Canada in March 2013. He was a Mohawk Indian who was found guilty of the death of a corrections officer, but was pardoned by the governor in 1976. He also tried to make a "citizen's arrest" of President Bush in 2009 for alleged war crimes (AP, *Syracuse Post-Standard*, 7 May 2013).

*Also in the previous issue of this *Journal* was an article by Wolfensberger on looking in literature for characters who are mentally retarded, otherwise impaired, or have any sort of devalued condition. How they are depicted can reveal role expectancies that either prevailed at the time the work was written, and/or that the author wanted to convey to readers, perhaps to shape their mindsets. The British writer Flora Thompson, in the memoir of her girlhood in the 1880s-1890s, *Candleford Green*, refers to a "village idiot" nicknamed "Luney Joe" (or possibly "looney Joe") who nonetheless had a valued family role and valued work role for his mother, though this apparently did not extend outside his family to the rest of the small, close-knit village community. He seems to have been "included" by the village, but his presence was not especially valued.

And a contemporary novelist, Sherry Boas, has written a book, *The Things Lily Knew*, in which the central character, rather than a minor one, has Down's syndrome. She herself has a young daughter with Down's syndrome, and plans to continue the character in an entire series of books.

*Yet another update on the unfolding Oscar Pistorius story: both Oakley (a maker of expensive sunglasses) and Nike (a maker of athletic shoes and equipment) have suspended their contracts with Pistorius, whom they had previously used to endorse their products. So his new devalued role

of murder suspect obviously outweighs in their minds his valued role of champion athlete (*Syracuse Post-Standard*, 19 February 2013).

O.J. Simpson was a US example of the same phenomenon: a famous professional athlete and actor who also endorsed numerous commercial products, and who was later accused of an horrific crime (the murder of his wife and one of her friends). His valued roles were certainly a contributor to his being found not guilty at his 1995 trial, but as a recent report put it, he "was never absolved in the public mind" (*Syracuse Post-Standard,* 12 May 2013). He was later convicted of robbery in a separate case.

Some Items on Interpersonal Identification

*When people identify with each other, they are more likely to value each other positively, open valued roles to each other, and do good things to each other. To identify with another means to see oneself in the other, and to see the other as like to oneself in many positive ways. Once people identify with others, then they usually do not want bad things to happen to those others, because that would be like wanting bad things to happen to oneself. People identify not only with other persons, but also with animals, such as their family pets, and with objects, such as their car. This sense of identification with objects helps to explain why people tend to over-charge when they are selling items that belong to them, such as at garage sales, or even houses. As one researcher put it, "Things that become part of you are seen as more valuable" (*Miami Herald*, 5 May 2013). We could substitute the word "people" for "things" and say that "people that become part of you are seen as more valuable." So if one wants certain people to be more valued by others, it is important to help those people "become part of" the others whose valuation one wants to cultivate.

*There are things that will help people to identify with each other, and there are things that can make it harder for that to happen. The problem is that sometimes the things that people do to supposedly "improve attitudes" are very unlikely to be helpful; in fact, sometimes they make attitudes worse. A recent example is an exhibition at the Jewish Museum in Berlin, Germany, of "Jew in the Box," in which a real live person (a Jew) sits in a glass box and answers any questions visitors might pose about Jews and Jewish life. According to reports, the questions range from the very mundane, such as why the yarmulke is worn by Jewish males but not females, to the explosive, such as about the conflict of Israel with Palestine (*Syracuse Post-Standard*, 31 March 2013, p. B-2). While the exhibit has been defended on the grounds that it allows people to "know more about Jews and Jewish life," it has also been strongly criticized. Among the problems with it from an SRV perspective is that it puts the representative Jew, and by extension all Jews, into the role of object, or of curiosity, not all that different from the side show exhibits of old carnivals. Much more likely to increase positive interpersonal identification between non-Jews and Jews would be to arrange shared experiences and interactions that are experienced by all parties as positive, to have Jews and non-Jews live together in the same neighborhoods, attend the same schools, work at the same workplaces and in the same jobs, etc. These latter strategies also have the advantage of being natural, rather than contrived and artificial.

*In the "City Year" program, young people–typically just out of high school or college–live with and like the poor, which means they eat only what they can afford through the US federal government's Supplemental Nutrition Assistance Program, or SNAP (the formal name for what are informally called "food stamps"), which gives poor people a certain amount of money each month to enable healthy(ier) eating. Not surprisingly, graduates of City Year have greater empathy for the poor, and are not in favor of proposed cuts to food assistance programs. Some are trying to extend this lesson in interpersonal identification

by challenging other people to eat on only $5 per day, and to report their experiences to an online site. Similar exercises can be designed to help people experience the living conditions of those with various physical and sensory impairments, the debilities of old age, etc.

*The *New York Times* (21 July 2013) profiled a couple in their 70s: the wife has for decades been an advocate and published author on the "right" of people to end their lives, and then five years ago her husband had a cycling accident that left him quadriplegic and nearly full-time dependent on a ventilator. He has also suffered some additional declines since then, so that he is now fed by tube instead of eating by mouth. In these years, she has come to re-think her previous advocacy but only in regard to his particular case, realizing that she does not want him to die, even though she believes the decision is totally up to him. And although he had executed a "living will" saying he did not want treatments to "unnaturally prolong the dying process" if he was in a "terminal condition or vegetative state" (none of which was the case when he was injured), he has not been able to bring himself to actually decide that his life should end, though he has been hospitalized many times and each time had the choice to accept or reject treatment. Her ambivalence appears to be that she does not want this person she loves to die, and that none of the opportunities for death so far have been conditions that "are exactly right" for the kind of death her husband desires. (The idea that one should be able to have the kind of death one wants is a thoroughly modernistic one, reflective of contemporary people's demand for total control in all things.) Unfortunately, nowhere in the lengthy article did she reveal having second thoughts about having advocated into death other people via her writing.

Also, while the author of the profile noted that the husband continues his valued roles of husband, stepfather, friend, and even university teacher (the latter largely via the role-valorization

strategy of having role-helpers), the author also used a number of role-degrading terms, e.g., referring to him as "a plugged-in mannequin," and to his "useless body" (obvious, it is not "useless" in keeping him alive) and "inert sack of a body."

*Like every conceivable tactic or strategy, interpersonal identification can be used to bad ends as well as good, as when marginal or devalued parties identify strongly with people who are not models of positively valued social roles, or of adaptive interpersonal behavior and habits, etc. How interpersonal identification can actually be used to hurt people is exemplified by findings as to who is most easily conned out of their money by internet and telephone scams. Three characteristics of the most likely victims are: being willing to take risks (obviously, participating in an offer that seems too good to be true implies some risk); being heavily in debt (again, obviously one might be tempted to take any offer that promises to end the debt); and being in the process of mourning and grief, such as after the death of a loved one (Singletary, 28 April 2013). Experts interpret this as meaning that grief had impaired the judgment of the victims, but interpersonal identification could also provide an explanation, namely: since the perpetrators of these frauds often present their appeal with a sob story about their present troubles, this makes it easy for people who are themselves in sorrow to identify with the purported plight of the fraudster, and this identification leads them to want to help the person in trouble–in other words, to extend to them some of the good things of life, such as a loan or a financial gift.

*A professional photographer who was embedded with a military unit in Afghanistan lost his left leg when a roadside bomb exploded. With his new advanced prosthetic, he was able to resume his valued role of news photographer, and he also took up running and skating to develop competencies related to physical strength, which is critical because of the increased demands on the

body made by a prosthetic limb. (Failure to develop such competency is one of the reasons that such devices end up not being used.) In fact, he has several interchangeable "feet," depending on whether he will be walking, running, etc. Among his photography projects is one on civilians who lost limbs in war, and who of course do not usually have access to the most advanced, high-tech, and expensive prosthetics, but have to make do with older, less individualized, less flexible, and more image-degrading devices (AP, in *Syracuse Post-Standard*, 28 April 2013, pp. E1, E4).

The article about him appeared less than two weeks after the Boston marathon bombing (April 2013), and with a slant and headlines relating it to the people who lost limbs in that bombing, to give them "hope." This is an example of a role-valorizing effort on the fourth level of societal organization (that of an entire society, rather than one of its sub-sectors), namely, an effort to increase positive interpersonal identification between such newly impaired people and someone who could be a model to them of how to adaptively cope with such an impairment, and maintain valued roles and craft new ones.

*As noted before in previous columns, the injuries inflicted by and in war often lead to the development of new medical and rehabilitation procedures and tools that can benefit not only maimed soldiers, but also (eventually) civilians, including people whose impairments were not inflicted in war. The most current prosthetics have a very high-tech "look," which is an attractive image for contemporary people who are enamored of high-tech generally. Unfortunately, it often takes some time for these new techniques, procedures, and equipment to become available to people who do not hold the valued role of war hero, such as people with congenital impairments. In connection with the April 2013 Boston marathon bombing, in which nearly 20 people lost one or more limbs, there was news coverage of the now-available high-tech prosthetics for amputees. This

coverage used language of people resuming "generally normal lives," and becoming "as functional as they were prior to the amputation" (*Wall Street Journal*, 18 April 2013, p. A7), which in SRV language might be phrased "resuming their previous valued roles, and/or acquiring new valued roles." The coverage also underlined an important premise of the conservatism corollary to SRV, namely, that one aspect of the heightened vulnerability of many devalued people is that so many things in life take much more time, energy, money, and other resources for them than for the ordinary or even valued person. To wit, even with an advanced prosthetic, it takes 60% more energy for a person with an above-the-knee amputation to walk the same distance as for a person who has two whole legs. Imagine then how much more quickly such a person would tire, how typical chores done by unimpaired persons would be more difficult to accomplish, etc.

*And speaking of the heightened vulnerability of devalued people, that–as well as other things– was also illustrated by what is happening to the service arrangements for some handicapped people as a result of funding cuts derived either from the "sequestration" (i.e., across-the-board financial cuts that have come down from the US federal government since early 2013), or efforts by other levels of government to cut costs. For example, even a cut of several hours of daily home help, or a cut in some subsidized transport, could mean that many impaired people who live in apartments in the community with such services might no longer be able to do so, and would end up in nursing homes or other institutions– ironically, services that are much more expensive than the community services and support services that are being cut. Unfortunately, as Dr. Wolfensberger noted in an article on anticipating reduced service funding and trying to make rational and adaptive cuts, there is little reason to expect that people will bring to bear a sense of justice, mercy, or even just plain rationality whenever possible

loss of funds is at stake (see Wolfensberger, W. [2010.] How to comport ourselves in an era of shrinking resources. *Intellectual & Developmental Disabilities, 48*(2), 148-162).

Some Items on Integration & Segregation

*Relevant to the SRV theme of social integration and valued social participation is a recent directive from the US federal government that schools must now "afford qualified students with disabilities an equal opportunity for participation" in sports. This can mean the participation of "students with disabilities" on already existing school teams, and/or the setting up of special sports programs for such students, such as teams for wheelchair basketball, football, etc. This is an example of a measure on the fourth level of social organization (that of an entire society) that affects whole classes of people throughout society, in contrast to measures that any particular school might take that would affect only its students. However, in order for participation to be valued, it must be desired and welcomed by both the parties being integrated and the parties doing the integrating. Laws may set up certain pre-conditions, but they cannot guarantee that anyone's presence and participation will be thusly desired.

*A high school football player suffered a form of cancer that took his eyesight, and the year of treatments also left him so weak that he had to wear braces to walk. But once he was able to return to school, he continued to attend practice sessions for three sports he had played when he had his sight (track, wrestling, and football), and his teams enabled him to participate to some degree in all of them. For football, the coaches of his and the competing team arranged that no other players would go after him when he snapped the ball (*Syracuse Post-Standard*, 23 June 2013). One could call this an adaptation of the sport, at least on a few occasions. It points to how adaptations could be made even for people who never had sight–

assuming, of course, that they could otherwise compete in the sport.

*A woman became quadriplegic as a result of an automobile accident. Then she did something that would not be role-valorizing, though it may be "inclusive": she assumed the role of running a drugs-and-guns ring, in which capacity she also, with members of her gang, robbed an undercover police officer in a gun deal gone wrong–at least, this is the accusation against her. A judge offered her a 12-year prison sentence (in a "generic" prison), less than she might get if she was convicted in a trial, if she would plead guilty, but she told the judge that would be a "death sentence" for her due to her health conditions. She did plead guilty to the drugs and weapons charges, but preferred to go to trial and take her chances on the robbery charge (*Syracuse Post-Standard*, 30 June 2013 & 21 July 2013).

*Camp For All is described as "a unique, barrier free camp for children and adults with special needs and challenging issues," and one print ad showed a bald camper, presumably a child who lost her hair from chemotherapy for cancer. So "camp for all" is really "camp for some." While the camp may offer all sorts of fun experiences, it would also be possible to arrange more integrative camps so that people "with special needs and challenging issues" could camp together with ordinary children. Also, it is image-problematic for handicapped adults and children to be juxtaposed in this way. Camping for and by adults is usually much different than week(s)- and month(s)-long camps for children.

*For six weeks in the summer, graduate students in music education (i.e., who do or plan to teach music in schools) teach impaired high school students how to operate a music recording studio, including how to record, edit, mix, and produce music CDs. In addition to teaching the students skills that could enable them to get work in the

music business, this program also aims to refine the computer programs so that they meet the criteria for "universal accessibility" to people with different types of impairments (*SU Magazine*, Fall/Winter 2012). The more that things in the world are thusly "universally accessible," the easier it will be for people with impairments to participate in the world. The program is preparing the students for real work, and in a real work environment. However, competition for jobs in the music recording business is fierce, and for students who already start out disadvantaged at obtaining employment, there may be few (if any) who actually obtain jobs in this field.

*Eisenman, L.T. (2007). Social networks and careers of young adults with intellectual disabilities. *Intellectual and Developmental Disabilities, 45(3),* 199-208. The author looked at how the social networks–family, friends, acquaintances–of mentally retarded people affected the likelihood of their obtaining employment, or a better job. Families often provided job support and guidance (e.g., regarding how to dress for work), but they were not necessarily helpful in locating jobs; other research has found that broader networks, including acquaintances, are more helpful to this end. When an employer supported career development for all employees, the employees with impairments also benefited from this. Not surprisingly, people with impairments, even if they had very involved families, had very few friends and acquaintances, and the few they did have were as a result of their work or student roles.

The Social Context: Who is Doing the Valuing or Devaluing, *&* Who Can Extend or Withhold the Good Things of Life?

*An important question in the enactment of any role-valorizing measure is "who is the party whose valuation of another one wants to recruit, improve, etc.?" For instance, is one trying to role-valorize a party in the eyes of their family, their neighborhood, their school, society as a whole, a local chapter of Daughters of the American Revolution, the liberal political party, the conservative political party, a church or synagogue, their teen peers, a gang, etc.? This question is important because different parties, sub-cultures, and sub-sectors of society may hold different values, and therefore what will be role-enhancing in the eyes of one "audience" may not be role-enhancing in the eyes of another. Based on its values, one party may positively value roles and behaviors that are devalued by other parties. For instance, what is valued behavior and appearance to school teachers and administrators can be different from what is valued behavior and appearance to a particular clique of students in that school. So what party is in a position to grant the good things of life to a marginal or devalued party, or to withhold those good things from the party? Other things being equal, and within any boundaries set by one's higher-order value and morality considerations, it would be that party to whom one would make a values appeal.

This issue is particularly well-illustrated by looking at different cultures, where such differences can be striking. For instance, in Iran, wrestling is the national sport, and is followed with a passion that it does not generate in most locales in North America, so much so that US wrestling stars are worshipped in Iran, and that at a time when Iran typically despises many things American. (This fact also illustrates that the role of wrestling star, which is an immensely positively valued one in Iran, outweighs the negatively valued characteristic of being an American.) One report said that during a wrestling match between Americans and Iranians, "there were no shouts of 'Death to America,' or taunts about the 'Great Satan,' or burning American flags;" in fact, the Iranian president posed in front of an American flag with members of the American wrestling team (*Syracuse Post-Standard,* 21 April 2013, p. C10). Thus, one option to consider for the role-valorization of some parties is travel or even physical relocation to a locale where the roles the party already possesses are very highly valued.

*The identity of the perceiving party, who does the valuing or devaluing of another, was also underlined in a story about "white hat" hackers, so called because they hack into computers not with the intent of compromising or destroying the integrity of the work of the computer-user, but in order to identify weaknesses in computer security so that defenses can be strengthened. Their official work role titles are "senior security consultant," or perhaps even "chief operating officer" of a computer security firm. One such consultant sports a bleached Mohawk hairstyle and punkish clothing–which, he notes, is "usually a little bit of a shock" to those who employ him, but once they see the quality of his work, they are no longer put off by his appearance. Once again, a valued competency compensates for what would otherwise be a devalued characteristic.

This particular type of work also enables a schedule that would otherwise be considered non-normative (*Seattle Times*, 5 May 2013).

A Few Items on Imagery, *&* Image Messages About Roles

*Under the name "Wounded Warrior Project," numerous efforts are made to assist wounded veterans to resume civilian life. The term "wounded warrior" is a role name that would have positive connotations at least to those parties who view military service positively. The project also refers to the people it serves in its various programs with the positive role term "alumni."

*We have long taught, and long witnessed, that one way of negatively imaging devalued people is to attach to cabs and vans that transport them signs that say "Caution, wheelchairs," or "Elderly patients." We recently noticed a variation on that theme, namely a wheelchair transport van that had written in large red letters on both sides "Bariatric Transport," meaning that it was equipped to carry people who are severely overweight. We can anticipate the justifications that might be voiced in defense, e.g., to alert others in case they have

to extricate the passenger in an accident. Nonetheless, it is negatively imaging–and especially so when the passenger is not overweight, as was the case when we first noticed this.

*In SRV teaching on unconsciousness, we mention that many practices, product features, etc. that once served a practical purpose may still be continued, even though they no longer serve that purpose and even though people may no longer even have consciousness of the original purpose of the practice or feature. The term skeuomorph refers to such retained features that are no longer useful. Skeuomorphs are relevant today in the area of computer software design, where digital "objects" are designed to look like real-world objects, even though the digital "objects" are not real objects and need not look like their real-world antecedents or parallels. An example is the trash can icon on many computer screens to represent where unwanted files get "thrown away." There are many skeuomorphs in human service practices, for instance, the ringing of a bell at a certain time: no one at present knows why the bell is rung, but at one time it served a purpose, for example, to call in the workers from the fields when institutions used to have their own farms. Some skeuomorphs may be merely peculiar, others cast an odd or outright negative image on service recipients.

*Peculiar practices continue to be associated with fund-raisers where devalued people are concerned. In a recent foot race to raise money for Special Olympics, runners were doused with colored cornstarch at different stations along the course (*Syracuse Post-Standard*, 5 May 2013, p. A11). Perhaps this was a chance for the non-handicapped runners to see what running in the Special Olympics can be like, when other surprises such as clowns pop out mid-way to greet the contestants there?

There are actually several companies, including Color Me Rad and Color Vibe, that hold "fun

runs" in which an integral part of the run is the dousing of participants with colored cornstarch. The runs are apparently very popular–who knew that so many people would want to be covered in colored cornstarch, which undoubtedly would not be easy to dust off since the targets would be sweaty after their run? In any case, it is still not an image-enhancing element to this fund-raiser, even if it is not very unusual.

*Terri Schiavo was the Florida woman at the center of media coverage and court wrangling in 2004-2005. She had become severely impaired years earlier, her husband wanted to marry another woman by whom he had a child, and so he sought permission to withdraw food and liquid; her parents and brother wanted to see her live, and opposed him. Eventually, the court ordered– not permitted, but ordered–that food and liquid be withdrawn, so that she would starve/dehydrate to death, which she did. However, there were several indications that in the mind of her husband, she was in the "already dead" role for some time before her actual death. One is that a few years after her collapse, he established an open file for her at a local funeral home, something which is done when a person is expected to die very soon so that final arrangements can be made quickly and easily. Another is that he placed her into a "hospice" service for people said to be dying, even though she had no terminal condition but was only severely handicapped, where she lived for several years. Also, after her burial, the marker her husband placed on her grave gives her date of death as the day she became incapacitated, which was many years before she actually was done to death (Fuhrman, 2005, 134).

*Vladimir Putin announced the end of his 30-year marriage by saying that his wife "Lyudmila Alexandrovna has done her shift" (*Time*, 24 June 2013), a statement which cast her into the role of object, or perhaps factory worker at best, rather than spouse–and should give occasion for pause

to any other women contemplating dating or marrying him.

*Four malnourished men were discovered being held in a "dungeon-like" home in Texas, a garage with one chair and no bed. The men were poor and elderly, and said their captor stole and cashed their public assistance checks (*Syracuse Post-Standard*, 21 July 2013). Clearly, these captives were in the roles of sub-human, object, and source of income.

*Alaniz, J. (2013). *Death, disability, and the super-hero: The Silver Age and beyond.* Oxford, MS: University of Mississippi Press. In a presentation based on this book, the author said that "disability is defined and mis-valued from without," meaning by non-disabled people, and that "disability is the 'to be looked at'." Mis-valued has much overlap with the SRV concept of devaluation, and the "to be looked at" part is equivalent to the object role. The "silver age" in the book title refers to a particular period in the history of comic books.

How Various Image & Other Interpretations of Devalued Conditions & People Connect to Service Responses & Service Models

As noted in the above item on Terri Schiavo, how people are imaged and interpreted has a great impact–sometimes even a life or death impact–on what happens to them. These interpretations have a close connection to social roles and to the model of service that is carried out. For instance, if a condition is seen as a disease, then service recipients are apt to be cast into the sick role, and servers to operate on a medical model; if recipients are seen as menaces, then the service model is likely to be a detentive one, and recipients may even be cast into the role of prisoner; etc. Also, there is often controversy over what is the truth about devalued conditions and devalued persons, e.g., is a condition a disease and are the people who "have it" sick, or not. The items in this section all speak to this issue.

*A physician, Dr. Kermit Gosnell, who ran an abortion clinic in Philadelphia, was recently tried for murder and manslaughter, charged with having killed infants once they had been removed from the womb, and having killed a woman who did not survive the abortion he performed. There are many aspects of the trial worth commenting on. However, a particular SRV point is the contention over how the four dead infants were described, and were to be perceived. The prosecution referred to them as "murdered children," whereas the defense called them "aborted fetuses." This is one of the most clear-cut instances of the power of a social role on the minds of observers: if the dead infants are seen in the role of children, then this will mean the physician who killed them is guilty of murder or manslaughter, whereas if they are seen in the role of fetuses, then they were not murdered, only aborted, and since abortion is legal, there can be no guilty verdict. Unfortunately, the infants are dead, so the verdict makes no difference to their lives now. But of course, if infants while in utero are seen in the role of unborn baby, they are much more likely to be allowed to live–certainly one of the good things of life; whereas those who are seen in the role of fetus, and unwanted fetus at that, are much more apt to be made dead.

*In mid-June 2013, the American Medical Association declared that obesity is a disease, thereby, as one report put it, instantly labeling one-third of Americans as sick (Jameson, *Orlando Sentinel*, 23 June 2013). Primarily, identifying obesity as a disease enables "better reimbursements," according to the physician president of The Obesity Society, and may also make overweight people eligible for accommodations on the basis of the Americans with Disabilities Act (ADA). However, while obesity does affect health, and increases the risk of a number of diseases, activists in the "fat acceptance" movement argue that it is not in and of itself a sickness. Most certainly, this designation now casts over-

weight people in the sick role, and medicalizes any service response to their condition.

*Greenberg, G. (2013). *The book of woe: The making of the DSM and the unmasking of psychiatry.* New York: Blue Rider Press (div. of Penguin). This is a history of the much controverted Diagnostic and Statistical Manual of Mental Disorders (DSM), primarily used by practicing psychotherapists and funders of shrink-type services, which in its various revisions defines, re-defines, and de-defines, what are considered mental disorders. The book explains how these shifts in definitions reflect not so much actual scientific discoveries or new knowledge, but social, political, ideological, and economic influences and controversies. Also relevant is G.K. Chesterton's remark that medicine is the current embodiment of persecution, defined as "the imposition by the police of a widely disputed theory, incapable of final proof," in the insistence that so many conditions are problems of the physical body, and are located either in the brain, brain chemistry, or genetics.

*As of mid-2013, one in ten American children is "diagnosed" to have attention deficit/hyperactivity disorder, or ADHD (*Time*, 22 July 2013). Surely that figure reveals something about how children are being raised these days, and about the medicalization of all sorts of behavior that may be anything from inconvenient to disruptive to intolerable.

*There is obviously something deeply unconscious about the human relationship to animals, since so much outright craziness attends it. Merely one recent expression is the widening of the concept of "pet" to "domestic partner," therapy or assistive companion animal, and now support animal or "comfort creature" (e.g., see *Time*, 22 April 2013). It is said that "the very presence" of these animals "ameliorates … a person's disorder." In other words, the animals do not do anything, as a guide dog does, but just having the animal

around makes a person feel better–which sounds like what people might have said about their pets a generation or more ago. This service tactic is tied in with the medicalization of many afflictions, in that a physician must prescribe it in order for an animal to qualify as such a comfort creature. This also brings the people the animal is said to comfort or support into conflict with, for instance, airlines and apartment building owners–not to mention with other airline passengers and other apartment tenants, who may object to having a goat in the airline cabin or pigs in neighboring apartments–because according to anti-discrimination laws, such assistive and support animals must be accommodated, whereas all pets do not have to be, or do not have to be under the same conditions, e.g., as regards air transport (AP in *Syracuse Post-Standard*, 24 March 2013).

*We now learn that a new model of the family is being promoted, which interprets the family as the equivalent of a business, and pushes "data-driven solutions" from the world of business for managing family and child-rearing problems, as exemplified in the recent books *The Secrets of Happy Families* and *Family Inc.* This model is said to appeal particularly to those people who are very career-oriented and waited until later in life to have children, and who therefore are habituated to a business mind-set. One writer (Rochman, in *Time*, 25 March 2013) characterized this stream of advice as "Parent like a corporate executive." Family members as co-workers, or boss and employees, management and labor?

*On the one hand, hospital emergency rooms have often acted as a catch-all for people with a very wide range of illnesses, from a bad chest cold to life-threatening trauma. As we explain in SRV teaching, they may be designed to be model-coherent for those with true medical emergencies, but they get used by people for whom they were not meant. This typically detracts from the model coherency such an emergency room ser-

vice might otherwise possess, and also negatively affects the care that at least many users of the service receive, e.g., in exceedingly long wait times, and unnecessary exposure to people with communicable conditions.

In recent years, specialized pediatric emergency centers have been established for children, and now there are geriatric emergency rooms (GERs) for the elderly, but specifically those elderly who were relatively able before they developed a medical condition that sent them to the emergency room. These GERs are designed to: be smaller, with fewer beds or rooms; be calm and quiet rather than noisy and chaotic; help the elderly feel safe, which they might not when someone is having delirium tremens in a bed next to theirs; operate at a slower pace; and keep the elderly out of the hospital, because hospitalization often takes a much greater toll on them than on younger persons. All of this is an example of applying the model coherency question "who are the people and what do they need?" to the design of a service. Of course, it could be argued that many of the features of GERs would be beneficial for other types of emergency rooms for other kinds of sick people as well.

One such GER has the image-enhancing acronym GEM.

*Cureton, A. (2007). Respecting disability. *Teaching Philosophy, 30*(4), 383-402.

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

It is interesting, and somewhat unusual, to discover items on impairment and societally devalued people in publications that are not related to human service, such as philosophy journals. These two articles constitute such an instance.

Cureton–who himself has a significant visual impairment–argues that whenever something taught in a philosophy course might be insulting or offensive to people he calls "disabled," then the course instructor must take special measures to be sure that this offensiveness is acknowledged,

communicate that he or she disagrees with the offensive element, and present alternate views that counteract the offensive elements. He gives examples of such possible topics, including Aristotle's passage on "natural slaves" in *Politics*; Kant's and Hobbes' discussions of equality in the social contract; and what he calls "negative selectionism," which refers to the bioethics question of whether people with impairments should be born. But, one might ask, why only "disabled" people? What about when something is offensive to any group, or for that matter, to any individual? And why only in philosophy courses: what about history, or geography, or English literature? And what if the instructor, even recognizing that something might be offensive to some party, actually agrees with it? Must the instructor pretend so as to please his or her students?

It is also sad that Cureton does not mention high-order values, including religions, as a possible source for people's stance on the value of humans, on justice, and on mutual obligations. For instance, in discussing bioethics courses in which philosophies may be taught that encourage selective abortion and other measures to reduce or eliminate people with impairments, he does not acknowledge one of the most significant sources of opposition to such philosophies, namely, religions which hold that all human life is sacred. Further, as is often the case in discussions about the very broad domain of "disability," Cureton emphasizes the positions and opinions of people who have some physical impairment but are mentally competent, but says hardly anything about people who are significantly impaired in mental competence. In regard to them, it is a plain fact that they do need–there is no other word–other people to hold a positive view of them, look out for them, act charitably towards them, etc. A number of philosophies and religions can enable people to do this, apart from and beyond being sensitive to people's tender feelings that may be the result of a long pattern of woundedness in their life.

Altogether, although Cureton's is a scholarly article, it is disappointing in its lack of depth.

The article by Ho, a university bioethics instructor, relates to the fact that devalued people are at risk of being "made dead." The author examined seven bioethics textbooks (including anthology-type books) currently in use in college bioethics courses to see how they present "disability," especially in connection with genetic testing and what the author calls "medically assisted death." In regard to "disability," she found that the books were overwhelmingly slanted against people with impairments, and in favor of what she calls the "ableist" position that "privileges" unimpaired people over impaired ones. The books overwhelmingly contained content that favored genetic testing to identify possible impairments, so as to prevent either the conception or birth of a possibly impaired child. The only critiques they offered were based on concerns about privacy, possible overuse of the tests, and problems with their accuracy.

As to the issue of "medically-assisted death," again the books overwhelmingly interpreted impairment as making life intolerable, and approved of inducing death. And, as with issues of genetics testing, the author claims that the arguments in these books are shallow and incoherent.

Ho also noted that although many of her students are pre-med or otherwise studying for the health professions, and are being trained as scientists, they tend to uncritically accept the premise that a life with impairments is inferior to one without. In regard to genetic testing, this means they tend to favor anything that can be done to prevent impaired people from coming into existence, and in regard to "medically-assisted death," they tend to favor it if medicine cannot cure such "defects."

An example of casting the unborn into the pre-human role is Ho's reference to embryos or fetuses as "potential people" (p. 405).

Miscellaneous Items Related to Positive or Negative Valuation &, Of Course, Social Roles

*A young woman suffered severe brain damage from being run over by a drunken driver; doctors told her family that she would never eat, walk or talk again, revealing very low expectations, unfamiliarity with the tremendous human capacity for growth (as posited by the developmental model), and probably even deathmaking intents. After all, hearing such bad news, many people these days would think someone like that would be "better off dead," especially considering that she remained in a coma for two months. From the hospital she went to a rehabilitation center where staff told her parents she would be "a functional non-eater," a negative role interpretation if there ever was one, and once again revealing very low expectancies. Her family had the good sense to move her to another setting, and eight months later she was well enough to return home–and nine years later, not only does she eat and talk, but she is a runner, having completed a five kilometer race, and author of a book about her experiences (*Syracuse Post-Standard*, 28 July 2013). She still has significant impairments, and while her case may be unusual, it underlines the importance of not acceding to low expectancies but implementing a program of competency development.

*A relatively little-known devalued class is the very low-paid laborers, often immigrants (legal and illegal ones), people without marketable job skills, and men just a step away from homelessness, who work for temporary labor supply offices. One writer about their plight called them "the 4 a.m. Army" because, in the hopes of receiving several hours of work that day, they get up at 4 a.m. in order to spend more hours–for which they are not paid–just waiting to find out if any work is available, and then hoping to be selected for it, and then being transported there (usually at their own cost, and often in crowded and unsafe vehicles). These days, the work is often for large and wealthy firms (such as Walmart and Pepsi)

doing such tasks as stocking shelves, packing merchandise, even working in automobile plants. Almost one-fifth of the total job growth in the US since the 2008 recession has been in the temporary work sector, with major firms relying on temporary workers because this frees them from the cost of providing benefits, including health care, to workers. These laborers are now being referred to by the oxymoronic word "permatemps," i.e., permanent temporaries; indeed, some have worked at the same job on a "temporary" basis for years. They often live in what are called "temp towns," often in run-down areas of once thriving cities. Their rates of injury are twice as high as for regular staff doing the same work, and yet the government does not keep statistics on their injuries. They have very little visibility, political power, or advocacy on their behalf, and therefore even laws for their protection that do exist are often violated. (*ProPublica* report, July 2013)

*A PBS Frontline episode, entitled "Life and Death in Assisted Living," explored the massive growth in "assisted living" facilities for the elderly, which are congregated settings in which each resident typically has his/her own room, or shares a room with one other person, and receives a limited amount of help, e.g., in bathing, dressing, etc. Currently, one million elderly people in the US live in them. Because these settings are not medical facilities, they are very loosely regulated. These settings typically advertise themselves with depictions of vigorous, healthy elderly people enjoying an active life, and the assistance they provide to their residents is minimal–but they increasingly serve frail elderly people, many who use walkers or are in wheelchairs, and many with dementia. In fact, large for-profit chains of assisted living providers are taking residents who are too needy to qualify for such facilities, and who need more skilled nursing care, just in order to fill beds so that the providers can earn more money. Because there is such a mis-match (a model incoherency) between the identity and needs of residents, and

what assisted living settings offer them, there have been numerous deaths, e.g., residents have fallen, wandered away, been over-drugged, been left in bed round-the-clock where they developed decubiti, etc. One state inspector said that assisted living is "a rock we don't want to look under." The cost of living in such a facility can range from $4000 to $7000 per month. (For that amount, it ought to easily be possible to provide care for many such persons in their own homes, if only the competent home care were available.)

*Responses by authorities to offenses against devalued people can be an indicator of devaluation. For instance, investigations can be slow, help in recovery may be minimal or even withheld, etc. This is exemplified by the following two incidents.

A "gay bar" in New Orleans was set afire in June 1973, resulting in the deaths of 32 people– the deadliest fire in the city's history. The police claim the arsonist was an ejected patron, who died before they could actually arrest him, but critics say the police were not particularly interested in finding the culprit. In any event, no one was ever charged. Even most local religious congregations and leaders were silent and unhelpful to the survivors, and in memorializing the dead (*Time*, 1 July 2013, pp. 46-50).

What originally began as a "home for wayward children" in Florida eventually became a residential institution for youths who had gotten into trouble with the law. Eventually it became the largest such institution in the country. Virtually from the time it opened as the Florida State Reform School, there were continuous reports of exceedingly harsh treatment, including ferocious beatings and forced labor. Starting in 2012, a year after it closed, investigators began looking into unreported deaths there. No one knows how many boys are buried on the grounds, or how most of them died, since the cause of death is typically listed as "unknown" or "accident," though former residents testify to brutal whippings, even shooting of runaways. Families of these boys

would receive death notices that the boys died of pneumonia, but–as was so common during the killing of the handicapped under the Nazis during World War II–that may have been a cover up for what really happened. In the 1990s, the state erected some white crosses on the grounds, but there is no connection between the location of the crosses and the location of the bodies. And the crosses are all unmarked, as the graves and bodies are unidentified. Investigators have so far discovered 19 more grave shafts on the grounds than the state had said existed (*Syracuse Post-Standard*, 10 February 2013).

*A 13-year old very overweight girl in England who was bullied and harassed committed suicide. An article on the incident noted that she "fell into the fatal role of easy meat for a gang of bullies."

*In 1990, the Americans With Disabilities Act (ADA) was passed, to much acclaim, and various anniversaries of its passage have been celebrated, also to much acclaim. However, the employment numbers for people "with disabilities" still remain very low: as of early 2013, only 5.2 million, or 18%, of the "disabled population" were employed, and that is down from 20% four years earlier. In fact, "the job numbers for the disabled haven't budged much since the passage of the ADA" (AP, in *Syracuse Post-Standard*, April 2, 2013, p. B-4). Further, these numbers do not reveal how many of those who are employed are working full-time, or in what jobs. The federal government has been the biggest employer of "disabled Americans," and many such persons get employment working in some kind of service to persons who are impaired. In other words, they get put in positions of "deviant staff juxtaposition," where people who are themselves societally devalued work with/serve upon people who are also of devalued identity.

Yet further, the definition of what is considered "disabled" under the ADA has been broadened to include even people with mild impairments, such as those who have food allergies. This means

that even the 18% of "disabled" people who are employed may contain few of those whom most people would think of on hearing the word "disabled," such as those with physical impairments that put them in wheelchairs, or who are blind, deaf, or mentally retarded. So the employment numbers for such groups are even lower.

All of this was outlined and predicted in Wolfensberger's (1976) monograph, *The Limitations of the Law in Human Services*, which has just been re-issued by the Valor Press in a revised and expanded edition; see announcement elsewhere in this *Journal*.

*Thirty-two workers described as "mentally disabled" have been awarded $240 million (about $7.5 million each) in damages for years of having served in "virtual enslavement" at a turkey processing plant in Iowa run by a Texas company. This financial award comes on top of $1.3 million in back wages they were awarded last year. The men had worked at the plant since the 1970s. Much like what is done to migrant farm laborers, the employer deducted charges for their room and board, so they never received more than $65 a month for all these years. However, the Texas firm is now defunct, so it remains to be seen whether the men will ever see a penny of the award (*Syracuse Post-Standard*, 2 May 2013).

*As of August 1, 2013, it is official: the term "mental retardation," in use since the mid-20th century, has been expunged from US federal provisions related to certain Social Security benefits, to be replaced by the term "intellectual disability." Thousands of other departments and offices on the federal, state, and lower governmental levels, are making similar decisions whether or not to replace the decades old term. However, this should not be viewed as any kind of victory in attitudinal improvement, or in securing the good things of life for mentally limited people, but as merely one engagement in the never-ending battle over what term to use to describe the condition, a battle that

is never-ending because of two realities. One is that as long as a condition itself is devalued, any term that is used to describe it will at least eventually if not sooner acquire negative connotations and be used negatively. The other is that people are not reconciled to this reality, and constantly try to defeat it by inventing new terms and banning old ones. Of course, this is not to deny that terms might otherwise vary in their ability to capture reality and to be communicative, and to be image-protective or at least neutral. Nonetheless, changing terminology does not get at the roots of devaluation and of the wounding that derives from it.

*When certain benefits come with a devalued or at least marginally valued role, the question then arises whether the benefits outweigh the social costs of the role. For instance, the US federal government provides free health care to American Indians. Under the new health care reform act, everyone is required to carry insurance, but American Indians are exempt. So now people who have only a small amount of Indian blood want to be "Indian enough," as the report put it, to gain the exemption from paying for insurance (*Syracuse Post Standard*, 16 May 2013, p. A17).

*Most people these days seem to automatically welcome new technology, on the assumption that the technology enables impaired people to do more, and often more independently, than they could without it. However, a blind man had enjoyed the role of baseball fan, and for a while he attended the games in person, but found he could not follow what was going on because the noise from other fans interfered with his hearing. So he began to listen to the play-by-play broadcasts of the games on the radio. Then, the team decided to broadcast only via the Internet, which is available through smart phones and laptop computer, and the blind man had neither nor could he afford them. So this technological "advance" shut him out of a role. A sighted friend was able to get

them entry into the broadcast booth at the stadium, where the sighted man could see well, and both he and his blind friend could hear the announcer with no interference from the stadium. The announcer also reported that having such a serious fan next to him made him much more detailed in his commentary (*Syracuse Post-Standard*, 14 July 2013, p. C6). A lesson is to be attentive to whether a proposed technological change is apt to be truly competency-enhancing for a particular party, and/or whether it might cut the party off from a valued role.

  *Here is another technology-related poser. The technology-assisted manipulation of natural processes of conception and child-bearing involves serious issues of morality. While SRV does not prescribe morality, moral issues do of course come into play whenever a decision is made to do something that is role-valorizing or role-degrading for a party. However, such manipulations also involve questions that can be subjected to empirical observation and testing, e.g., are such manipulations adaptive and beneficial for humanity, either for specific sectors thereof or overall and over the long-run. While most debate and study until now has been on the question of older mothers, there has also been recent research into older men becoming fathers, often for the first time in life. This research, at least so far, reveals that the genetic material in sperm is affected by age just as are eggs, meaning that children of older fathers may have more genetic mutations that can lead to impairments and diseases, just as may children of older mothers (the most well-known of the latter is Down's syndrome) (*Time*, 22 April 2013). Thus, relevant SRV questions are "how old is too old for the role of 'father'?," "how will changing social practice around the age of parenthood affect how older parents are valued?," and "does child-begetting when one or both parents are older, even as old as what used to be thought beyond normal child-bearing years, increase the

incidence of certain impairments?" This issue, like so many others, is deeply intertwined with personal and society-wide value decisions (e.g., to delay child-bearing as long as possible, to use every available technological possibility to get what one wants, and to consider primarily one's own desires and interests and not those of future generations), and therefore research findings will be strongly contested if they challenge the wisdom of these value decisions. Ultimately, people decide what they will or will not do, will or will not support, not on the basis of evidence but on the basis of ideology and values, and often unexamined and unconsciously-held ideology and values to boot.

  *One strategy of role-valorization is to identify some trait or behavior of a person, and try to craft a valued role that utilizes that trait. Here is an example. A deaf man who learned to read lips as a child, or "read speech" as it is now called, has begun to tweet to fans what coaches and players say on the court and the sidelines of basketball games, where ordinarily only fellow players and referees can hear them. He says he got the idea from a deaf woman in Germany who does the same for soccer games. Even though lip-reading is not 100% accurate, since some very different words look the same, and relies on clear sight of the speaker, nonetheless he can comprehend enough of what he sees to have developed a following of his Twitter feed (*Syracuse Post-Standard*, 10 February 2013).

  *As noted in SRV teaching, people's roles are often enumerated in their obituaries. Of course, at that point, their roles can no longer bring them the good or bad things in life from others, but these roles can shape the mind-sets of readers, for example, regarding what kinds of roles might be expected of and carried out by different kinds of people. For instance, the obituary of a physically impaired man may recount that he was a husband and father, an entrepreneur, a

teller of tall tales to his children and grandchildren, and an elder at his church. Reading this, people who held low and negative stereotyped expectancies for such persons may now begin to think differently about what physically impaired people might be able to do. Similarly, an obituary of a mentally retarded adult showing a photo of that adult in a childish Santa Claus outfit will reinforce in readers the negative expectancy that such persons, no matter what their real age, are only big kids. One recent obituary (June 2013) of a man described as "quadriplegic and non-verbal" said he nonetheless "distinguished himself" at three schools, and then listed many of the things he had done: loved music, trains, the Los Angeles Lakers (and rarely missed seeing a game), lived in his own apartment, travelled overseas, went parasailing, and "ran" (being pushed by his father) in a long distance race. None of these activities and accomplishments, however, were phrased in role terms, such as enthusiastic Lakers fan, world traveler, high school graduate, etc.

Obituaries can also testify to the fact that some roles simply cannot be shaken off, but follow a person through life–again, both for good and for bad. For instance, a news article on the death of Annette Funicello in April 2013 called her "eternal Mouseketeer" (*Time*, 22 April 2013, p. 18), and mentioned no other roles after she retired from show business at age 22.

In terms of SRV implementation, people may want to think and plan, "What roles would it be good for a particular party to fill in life, that will follow them through life and be noted at their passing–in other words, what roles will most likely yield them the good things of life while they are still alive?"

*There are many interesting SRV lessons to be gleaned from the retirement of Pope Benedict. For instance, some roles can be retained even when a person's competence to independently carry out the role declines, as by having role as-sistants who will assume some of the role obligations that the role-incumbent is no longer able to meet. However, perhaps the role of Pope is not such a role, or at least it is not viewed that way by all its incumbents. The late Pope John Paul II retained the role even when he became very physically diminished, barely able to speak, and towards the end of his life bed-ridden; he was much more seriously impaired than Pope Benedict XVI, yet Benedict XVI felt himself no longer able to fill the role. Perhaps John Paul II had and used aides to help him perform some of the papal duties, although presumably there are some aspects of the role that no assistants can do "for" the Pope.

A commentator on Benedict XVI's retirement remarked that he kept a low profile and was "not particularly magnetic," especially in comparison to his predecessor John Paul II. Yet, the commentator also noted, "the role of Pope does wonders for a charisma deficit" (Chua-Euan, in *Time*, 25 February 2013, p. 23). What other valued roles could be identified that do similar wonders for other deficits that role-diminished persons may have, such as in intelligence, social skills, athleticism, etc.? ⌘

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

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