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The impact of Normalization and Social Role Valorization in the English-speaking world

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The method used in this section to evaluate the impact of Social Role Valorization (SRV) in selected English-speaking countries is to examine whether issues explicitly addressed by the theory have changed in directions consistent with it. Any such changes might conceivably be unrelated to the influence of SRV. In the case of those described herein, however, most important figures in the field would probably acknowledge that SRV had a significant, even if not an exclusive, impact. It is also plausible that "SRV-consonant effects" have been (at least partly) due to SRV only in conjunction with other important factors, with SRV acting as a catalyst. This is consistent with Wolfensberger's (1991a) description of SRV as a tool for utilizing and enhancing adaptive positive values and traditions in a particular culture.

Part of the problem in identifying the specific impact of SRV and Normalization in many English-speaking countries is that many other similar-appearing and often allied social movements have simultaneously been at work; a list of these would include deinstitutionalization, independent living, community living, civil and human rights, inclusion, community services, least restrictive alternative legalisms, human rights, empowerment, and so on. These movements or ideas have often shared varying degrees of similarity with SRV as to their goals, premises, and constituencies, yet they are not at all identical to SRV. In some cases these movements were themselves partly a spin-off from classical SRV formulations.

An advantage with the Wolfensberger SRV formulation is that it is composed of a well-delineated set of ideas cast in a "definitive" version. The SRV theory has been clearly enunciated by Wolfensberger as was the earlier Normalization formulation that he modified into a blend of the work of Nirje, Bank-Mikkelsen, and other now obscure Scandinavians who preceded them. This property of being a distinctly defined body of ideas is not at all shared by these other more fragmentary idea systems that tend to be considerably more opaque as to what their parameters and messages are. Yet taken together, these allied movements often pursued a strikingly similar agenda for social change. Some of the more noteworthy of these common agendas included a rejection of the second-class status of disabled persons; a negative view of institutionalization as a form of service; equality of disabled persons in treatment, rights, and citizenship; the challenging of negative images and stereotypes; and so forth.

It may be impossible to fathom the precise contribution of each of these social movement fragments and their theories on the broader societies of the industrialized English-speaking world since they were so often a united phenomenon. Nonetheless, one can certainly claim in the case of SRV that these societies have tended to move in many of the directions called for by SRV theory. It may well be that social forces are at work in addition to SRV that have produced these "SRV desiderata effects." For
instance, while the SRV theory only partially borrows from or resonates with the American civil rights movement and the “baby boom” protest movements of the 1960s. These, nevertheless, created a backdrop of rising expectations in which a then radical critique of an obscure human service field (e.g., disability) could find a welcome response. Rather rapidly, this theory of Normalization/SRV became a benchmark reference for the field’s mainstream even though its propositions were originally massively at variance with actual practice.

There is no question that, at the very least, Normalization and then SRV have served as major reference points for the field of developmental disabilities since their rapid adoption worldwide, beginning in the 1960s. This status is not shared by any rival theory. The SRV ideas have also impacted other fields such as mental health, aging, and child welfare, but its effect in these areas has been much less noticeable. Equally, the status of SRV in these fields is far more marginal even to the point where most leaders in these fields have only cursory familiarity with it. As a consequence, the ideas contained in SRV have not been taken as far and their eventual impact has been far more restrained.

The SRV consonant effects in the developmental disabilities area are most noticeable in the realm of formal service, but they also have percolated into public and private life so much that one may now perceive a broadening cultural impact. As much as Normalization/SRV had as its initial major focus the realm of services, its resultant cultural impact has deeply marked our civil and personal lives. What follows is a summary of only some of the more obvious areas where an SRV consonant effect has taken place.

1 EFFECT ON SOCIAL CONSCIOUSNESS AND PUBLIC PERCEPTIONS

Prior to the broad diffusion of Normalization and Social Role Valorization, the state of disabled persons, especially those who were institutionalized, was abject. The arrival of Normalization on the scene brought about a remarkable challenge both to the misery of the institutions and to the much more hidden marginalization of disabled persons within community life. A great deal of this challenge was in the form of the radical Normalization-based proposition that persons who were cast down and rejected as socially devalued persons could actually thrive and prosper under a regime of being treated as most citizens would prefer to be treated. This proposition has shifted many of the perspectives and beliefs that have oppressed persons with disabilities.

1.1 THE CULTURALLY VALUED ANALOGUE

The culturally valued analogue is a deceptively simple proposition of Wolfensberger’s principle of Normalization that was carried on into SRV. The socially embedded alienation of devalued persons from society rested heavily on the premise that such persons are not like other people and therefore need not be treated like others. This in turn legitimized the routine accord of less than acceptable treatment to socially devalued persons. This notion (and unconscious habit) was directly challenged by the assertion that many such persons would thrive if one treated them as other more valued persons were treated. From matters as small as dressing and appearing like others to matters as large as entitlements to public education, the lines demarcating the socially valued from the outcasts have been shifted noticeably in favor of moving many of the latter from social deviance to a kind of personal and social participation in community. The idea of helping such persons lead “ordinary lives” was a prospect that had seemed heretofore unthinkable. All of this has had an immense impact because it has gradually established the necessary positive awareness and understanding of socially devalued persons that would permit them to experience community life in a pattern closer to that which their fellow citizens took for granted. Even though the vast majority of these persons had always lived in “the community,” their social roles have changed substantially in favor of being more positively valued.

1.2 DEFINITION OF HUMANNESS

When people are oppressed, it is often due to an idea that is hostile to their humanity. This idea is the ordering mechanism of reality that results in their
continued suffering. Over the last decades we have observed perhaps the most striking shift in consciousness as people have moved away from seeing socially devalued persons as being less than human. The Normalization/SRV challenge was rather straightforwardly portrayed as rendering to devalued persons the opportunity to be supported to live as others do. A significant property of such a change has been the enrichment of what it has meant to be human (like others) that had been previously denied to people. Instead of being treated as subhuman and, consequently, deprived of the riches of ordinary life, the reverse has become manifest—the extension to devalued persons of the wealth of enjoyment and opportunities available to most citizens, including the recognition that their needs, wants, and full identity were essentially the same as their fellow human beings.

1.3 RISING EXPECTATIONS OF DEVELOPMENTAL POTENTIAL

When people are discarded and accorded low value it is not uncommon for there to be indifference to what people actually are and what they could be. In order for this potential to be perceived and pursued, there must be a decisive shift in perception. One of the chief demands of the Normalization/SRV ethic has been its emphasis on the developmental model. This, in turn, has invariably led to a challenge of the low sense of possibility accorded to those who are outcast and devalued. This has invariably meant an increase in the possibilities for growth and development and the breaking of perversely low perceptions of what was realistically possible.

1.4 DESTIGMATIZING CHALLENGES TO NEGATIVE ROLE STEREOTYPING (I.E., SOCIAL-IMAGE TRANSFORMATION)

It has now become obvious that persons with disabilities (and many other groups) have been bound up and afflicted by widely held negative public images of who they were. Often these were unconsciously internalized by both the perceiver and the perceived. With the advent of Normalization/SRV has come an intense awareness of the hidden dynamics of deviancy image juxtapositions and the broader interplay between negative social images and the conduct of social devaluation. In fact, for many of those exposed to intense Normalization or SRV training, the phenomenon of deviancy imaging revealed and concretized what had been sensed but never quite systematically articulated. More broadly, even among those not acquainted with formal training or writings, we have witnessed several decades of declining negativity to many disabled persons in almost all dimensions of their lives. While such a process is understandably incomplete, it is startling to see how many negative stereotypes have been challenged and how many positive ones have found their way into public consciousness. One of the most remarkable of these is the gradual lessening of the fear many persons have had of those persons called mentally retarded.

1.5 THE ACQUISITION AND GRANTING OF VALUED SOCIAL ROLES AND ROLE PERCEPTIONS

If one considers the narrow range of positive social roles that were in the past available and the often harsh existences that disabled people have historically led, one could conclude that established social conditions were their enemy. In contrast, the variety, value, and richness of roles they can now routinely enjoy is quite astonishing. Persons with disabilities seem to be everywhere these days, doing all sorts of unexpected things in every walk of life and in all manner of life settings, including school, work, family life, holidays, leisure, athletics, art, literature, and so on. While these social changes are by no means pervasive, the expansion of available—and attributed or acquired—valued social roles for disabled persons has taken place in a major and noticeable way.

2 EFFECTS ON SERVICES AND SERVICE-DELIVERY CULTURES

The original Normalization formulations in Scandinavia were rather more broadly focused on everyday life and culture. With the Wolfensberger formulations, it still maintained much of these cultural emphases but added a much stronger, explicit, and highly targeted critique of conventional service
practices. This became most manifest in the PASS and PASSING tools, which were specifically devoted to the application of Normalization to services. Many of the changes suggested by application of these tools have now become commonplace. What follows is a sampling of service practices that arose out of Normalization/SRV training, evaluations, and writings.

2.1 THE RISE OF AN UNPRECEDENTED QUANTITY AND VARIETY OF FORMAL COMMUNITY SERVICES TO SUPPORT COMMUNITY LIVING

The last quarter-century has seen the rise of a wide variety of publicly supported services, particularly in the area of disability, where there has been an unsurpassed expansion of such services. Conceivably, this growth could have proceeded along the lines of congregate and institutional services, as has been the case in other fields such as aging. An important part of Normalization/SRV thinking has been that community living and valued social participation are only possible with the right enabling supports. Virtually all of the essential community services upon which disabled persons depend for community living have arisen in the last quarter-century and have evolved in accord with broad SRV formulations. While not all community services have proven to be relevant or of high quality, their existence nonetheless is integral to the ability of disabled persons to function within society. It is also worthwhile to note that these services have often been so pioneering in nature that the endless numbers of severely impaired persons now living near-typical lives in communities would have been inconceivable a quarter-century ago. A large part of this technical and professional ground breaking would not have been attempted were it not for the embrace of SRV-concordant strategies and goals.

2.2 DEINSTITUTIONALIZATION

Probably the single most dramatic impact of Normalization/SRV has been the gradual abandonment of public residential institutions as the centerpiece of service delivery. While this phenomenon is by no means equivalent in every case or country, it does seem fair to say that the general direction taken has been unequivocally away from large institutions. Initially this meant the creation of smaller “midi” and “mini” institutions, but, increasingly, even these are coming to be seen as undesirable. The ways in which deinstitutionalization has been carried out have varied from the exemplary to the negligent, yet the principle that persons shouldn’t be institutionalized has itself now become an embedded ethic of the field. Literally billions of public dollars have been diverted from institutions to newly created community services. Unfortunately, the institutional system continues to prosper in other fields as can be seen in the growth of nursing homes and other similar congregate settings.

2.3 SUPPORT FOR PERSONS TO LIVE IN NORMATIVE HOUSING

One of the major teachings of Normalization/SRV that was considered radical at one time was that persons with impairing conditions could and should live in ordinary homes in ordinary neighborhoods. As extreme as that may have seemed when first proposed, it has now come to be the normative ethic for both adult and children’s service delivery. In terms of the overall budget of publicly funded community services, up to 80% of such expenditures are now devoted to some form of community housing. It should also be noted that there currently no longer exists any group or class of individuals remaining in residential institutions that does not have similar persons simultaneously being served somewhere in community housing options. This is a remarkable fulfillment of the initial claim of Normalization/SRV, that is, provided the appropriate supports are available, it is possible for virtually all persons to live in normative community settings.

2.4 INTEGRATED EDUCATION

A quarter-century ago it was routine for persons with disabilities to be denied access to public education, or if they did get education it was most probably offered in segregated settings. Today this overall pattern does not hold. Though not as dramatic or as wholesale as the adult deinstitutionalization, it is still possible to perceive a similar establishment of an antisegregation ethic in this area. Moreover, the field
has seen a growth in the technical proficiency of integrated educational supports with the result that schools now include students whose impairments or conduct would have made education—let alone integration—unfeasible a generation ago. Also noteworthy has been the expansion of generic educational opportunities for adults with disabilities. These have happened not only in the formal adult education realm, but also in informal and vocational adult education opportunities.

2.5 Work, Employment, and Training

While it has always been true that disabled persons have been part of the workforce—often in unnoticed and invisible ways and occasionally in highly stereotypic roles—the conditions faced a quarter-century ago were those of a massive service commitment to segregated vocational programs. The balance in this pattern has been unmistakably shifted in favor of a greater emphasis on decreasing the dominance of segregated employment and training in favor of work in integrated employment settings. This movement gained particularly dramatic momentum in the 1980s and has meant a gradual erosion of the mainstay of segregated vocational programming—the sheltered workshop. Even those whose degree of impairment diminishes the likelihood of their being competitively employed might nonetheless find themselves working subcompetitively in open settings. However, notwithstanding this (recent) trend, supported employment is still not available to large segments of persons in sheltered workshops.

2.6 Integrated Leisure and Supported Community Participation

While leisure may not have attracted the same dramatic interest as have the questions of work and homes, it also has been a context within which the formerly segregated and outcast have gradually been absorbed into the broader patterns of recreation and leisure of our communities. Further, a wide variety of formerly segregated and categoric recreation programs have given way to experiments with integrated programs. Even those areas of segregated recreation that have expanded during this period (e.g., Special Olympics) are increasingly under fire to give way or adapt to the social integration ethic. It is now not uncommon or even remarkable to witness persons with disabilities participating in all forms of integrated recreation and leisure opportunities. Further, these numbers now include persons whose impairments are quite visible and consequential and who require considerable support to participate.

2.7 Use of Generic Services and Resources

The Normalization/SRV theory has from its inception argued for the proposition that socially devalued persons would benefit from the safeguarded use of generic services and resources. A quarter-century ago it was not uncommon, particularly for institutionalized persons, to receive the bulk of their professional medical, dental, nursing, education, psychological, and other services from nongeneric sources. Even persons living in the community tended to use nongeneric services (e.g., “special” education, etc.). These conditions no longer apply in the sense that while there is still the use of nongeneric services, this is decreasing in favor of the use of more generic ones. Nonetheless, there are still many areas where this trend has been very modest, though positive, such as dental services, transportation, and so on.

2.8 Growth of Protective Legislation Services and Other Formal Safeguards

One measure of the worth and value of persons may be whether any efforts are made by their society to assure that they will be treated well. In this sense, persons with disabilities have come from a situation where few intentional protective services and safeguards existed to one where there are now numerous such safeguards. These have been consciously put in place, sustained through time, and had noticeable impact. Such measures include the public declaration of rights, human rights commissions, a variety of laws and regulations, protective service workers, oversight and monitoring mechanisms, advocacy arrangements, litigation, guardianship, quality assurance/enhancement systems, independent investigation, citizen review boards, self-advocacy, and so forth. While these measures often
relate rather narrowly to specific matters of vulnerability or mistreatment, they are collectively strong evidence of a commitment to assure to persons with disabilities greatly enhanced social roles and protected life conditions approaching, if not surpassing, the protections available to ordinary citizens. When such an array systematically masses itself, it is at least prima facie indicative of an institutionalized resolve to stop the mistreatment and neglect of the persons affected.

2.9 THE ROLE OF PERSONS WITH DISABILITIES WITHIN THEIR FAMILIES

The family, even in its present state of debilitation, is a major social institution. This generation has seen the return to their families of countless individuals who had formerly been excluded from everyday family life via the residential institutions. While it was still common a generation ago for such persons to inhabit institutions in their childhood years, this practice has been massively reduced—particularly in public institutions. Further, the vast majority of families are now maintaining their disabled children within the family home and within the family lifestyle. Persons with disabilities are now commonly involved alongside everyone else in meals, chores, outings, visits, vacation, family gatherings, shopping, and so on. It is still typical to see such persons continuing their family ties, even as adults living separately from families. While such patterns had been common for many people long before SRV, the SRV influence has nonetheless been to intensify such integration even where the person’s impairments pose substantial hardships and sacrifice. It is also notable that there has been a growth in family support services for the purpose of keeping families together.

3 INSTRUCTIVE AMBIGUITIES IN THE POSSIBLE IMPACT OF SRV

The preceding brief overview might be thought of as social or cultural changes that have arisen in a direct linear sense from the logic of SRV. One could simplistically see these effects as mechanistically related to the theory. For instance, if the theory called for a given effect (e.g., integration), and one then subsequently sees a push emerge toward integration, then one could reasonably surmise that the theory has been faithfully adopted by the adherents and its predicted effects would materialize in due course. In the many ways already outlined, this has occurred. Yet there is much more to the impact of SRV than has been intended. What follows are some further phenomena that have coexisted with an “SRV positive” impact yet show that SRV has not been adopted in the simple linear sense already mentioned.

3.1 ADOPTION OF SELECTIVE ELEMENTS OF SOCIAL ROLE VALORIZATION

It would seem that most people would concur with the prima facie evidence of a lessening of the social exclusion and perceived deviancy of people who are disabled. This, however, is an overall effect that is not necessarily upheld in particulars or even in major subportions of the aggregate. A good example of this can be seen in special education, where it has become more common for students with disabilities to be able to attend local schools along with their age peers. Nonetheless, it is also common that these students have remained largely socially isolated, poorly taught and supported, segregated, stigmatized, neglected, and so forth. As such, a good amount of what SRV calls for has been de facto rejected even though some important elements of SRV have simultaneously been adopted in the very same example. For instance, some students may be well integrated, the majority may share common travel arrangements to school, some developmental education is going on, some good personal relationships between disabled and typical students are present, and so on.

The lessons from these “mixed” impact situations may be many but certainly one of them needs to be that SRV’s impact is not likely to be coherent, systematic, and unified in practice. It matters not that many of the people involved are unaware, uninterested in, and largely unable to be particularly rigorous and systematic in their use of SRV theory. Such persons do not exist in this instance to become exemplars of either SRV logic or practice and would be quite content to utilize it only inasmuch as it has some pragmatic value. Thus, even though they are resolutely engaged in an exercise that will advance some SRV aims, their
commitment to and clarity about SRV may be highly ambivalent and/or confused. As a consequence, it might be preferable to describe SRV as only partially generating SRV consonant impacts especially within social contexts that only subscribe to fragments of SRV.

This preceding observation nonetheless creates a particular conceptual difficulty as to both the immediate and long-term impact of SRV. If the persons involved in adopting SRV are not even conscious or knowledgeable that they are operating in accordance with SRV theory, is it realistic to see this phenomenon as an SRV consonant impact? This is a particularly acute issue since Wolfensberger has often stressed the importance of consciousness of SRV principles as an anchor of a viable SRV strategy. This problem becomes particularly important over the long term where the systematic holding to SRV goals would require the thoughtful adoption and pursuit of SRV rationales. Certainly, not only are SRV consonant impacts not necessarily reflective of systematic SRV adoption but they may actually only contain minimal SRV compliance.

3.2 PERVERSE, CONFUSED, OR INCORRECT USES OF SRV

Much as in the prior instance, there are many circumstances in which SRV is not wholeheartedly and genuinely adopted. Many deinstitutionalizations conform to this standard of SRV usage in that in many important ways, the life of the person may now be validly social role valorized. Nonetheless, the eventual impact of SRV may be negative. A good example of this can be seen in sheltered workshop deinstitutionalizations where the transfer of such persons to so-called community-based employment amounts to a form of mini-institutionalization, for example, where enclaves are equated with normative employment. In many cases, this is done using SRV language, aims, and legitimacy simply because SRV is the current coin of the realm. Predictably, the use and effects of SRV in such cases will be cynical and perverse. However, even if such action were simply based on confusion or errors about what SRV actually means, the effect on the people served would not be particularly different. Motivation and intent, even if positive, cannot overcome the limitations of incoherent service thinking and models. Well-intentioned people (of which there are always legions) have taken initiatives that are not consistent with SRV theory yet may be equated with it in their own minds. These ill-advised uses can create many regrettable results that could otherwise be avoided. These have included the use of nursing homes as a “generic” service, the “dumping” of persons from institutions in too-rapid deinstitutionalizations, the nondiversion of persons from criminal proceedings in the interest of “natural consequences,” the alienation of a family’s interests in the course of assuring normative independence, the promotion of self-indulgence and promiscuity in the name of freedom, the creation of mini-institutions instead of more authentic homes, and so on.

3.3 WEAK, MEDIocre, NONRIGorous USES OF SRV

The level of difficulty involved in trying to simultaneously maximize the many aspects of SRV theory has created a predictable continuum of impacts that range from “easy SRV” to “very challenging SRV.” For instance, it is relatively easy these days to foster community group membership of pleasant persons with minor disabilities. It might be quite another matter to arrange such situations where the individual may be behaviorally aggressive or inappropriate, unable to communicate, in need of extensive physical assistance, or multiply disabled. If, in addition, the community group was hostile to begin with, soured because of prior failed integrations, or otherwise politicized, the challenge level would go up. Consequently, there may be few incentives to undertake difficult SRV tasks in relation to easier ones. Similarly, some SRV defenses of devalued persons will be of even greater challenge because siding with the oppressed person may sometimes bring the supporter into moral, political, and legal conflict with the authorities or even one’s friends.

3.4 CONTROVERSY, ACCEPTANCE AND RECOGNITION OF SRV

One of the notable impacts of SRV has been its ability to create SRV controversies. Wherever SRV has been taught, promoted, or implemented, it seems to have been to some degree divisive. One element of this
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has been undoubtedly the relative merits of the training and adherents. Nonetheless, the ideas themselves seem to have been inherently challenging (in whole or in part) quite apart from the occasionally provocative nature (or not) of those who have championed SRV. It is noteworthy that the vast number of these controversies seems eventually to have resulted in the SRV viewpoint prevailing. Such an eventual outcome can obscure the processes at work leading to such effects. One of these is the dialectic between controversy and acceptance engendered by SRV proponents to further their aims. In many ways, the impact of SRV has been one of challenging social standards or habits as they relate to socially devalued persons. Since everyone devalues others to some degree, there are no shortages of SRV shortcomings to point out, deny, or otherwise struggle with. Even where SRV proposals have achieved some measure of acceptance, it is noteworthy that SRV itself may not be appropriately recognized as having been a factor in achieving this result. In fact, one of the by-products of many of these controversies seems to have been a desire to achieve SRV consonant effects with as little reference to SRV as possible. Identification with SRV seems to marginalize its adherents, vis-à-vis the mainstream, even though SRV has impacted the mainstream rather substantially. SRV seems to improve society’s treatment of socially devalued persons, yet the process of SRV adoption is very costly to SRV proponents.

A good example of this is the controversy generated worldwide as to whether people could live (normatively) outside of institutional settings. Those who proposed such a notion were initially considered extremists while those who allowed that “there will always be a need for an institution” were seen as more moderate and reasonable. In time, the advocates for SRV were “proven right” in the sense that their theoretical claim was supported by the facts of implementation. Today such a claim would have a greater prima facie validity and would not seem unreasonable because common practice has caught up with this particular element of SRV. It is interesting that in other reasonably similar fields (e.g., mental health, aging, rehabilitation, etc.), such a claim would still be controversial. The point not to miss is that SRV seems to have been effective but at some cost to those who embrace it—particularly at early stages.

A second observation is that SRV seems to have been most seminal at points where it undertakes to correct certain elements of social devaluation that have yet to obtain a “counter status quo consensus” in favor of their change. For instance, SRV adherents were in the early ranks of the antisheltered workshop efforts and later in the “natural supports” reactions to segregationist forms of supported employment. As these social critiques obtained a following, SRV faded from recognition. A similar pattern can be noted in the education “inclusion” movement, the recent relationships/community building genre, the integrated leisure movement, the “supportive living” movement, and so forth.

3.5 COEXISTENT COUNTER-SRV TRENDS

While SRV seems to have made substantial progress in influencing society concerning disabled persons, it would be notably incomplete to let matters rest there. It is crucially important to note trends that either suggest that SRV may be at its outer limits in terms of impact and that there are recent phenomena that are logically contradictory to SRV theory. These trends are numerous. Some of the more obvious are the so-called “community living” situations that are nothing more than mini-institutions; the widespread preference of many expectant parents to forego having a disabled child when advised in advance via amniocentesis; the continued normativeness of segregated leisure and recreation; the deep resistance to integration in schools; the extensive private institutionalization of disabled persons in nursing homes; the automatic use of “do not resuscitate” orders for disabled persons in generic health care settings; the above-average reported abuse of disabled persons; the continued stigmatization of disabled persons; the routine social rejection and social isolation; “job ghettoization” of disabled persons in quasi-integrated settings; and the inability of SRV to impact other fields.

In one sense these are not new “countertrends” so much as the continued expression of a social devaluation that is now only partially under siege from SRV consonant influences. Still, they represent ample evidence that while SRV goals have obtained considerable social influence, that influence has only partially held in check the social devaluation inherent
in people and the social order. Thus it remains an open question whether the currently strong SRV influence will eventually collapse or strengthen beyond this generation. As a consequence of this ambiguity it is useful to see impact at a point in time. If valuations of people and groups can have a renaissance, it is equally true that devaluations can regain ground, for example, the return to institutional “snake pits” after the moral treatment era, neo-Nazism, antisemitism, ethnic hatred, and so on.

A further interesting dimension beyond the previous question of point-in-time balances of social value is the question of whether ground gained during periods of upward social valuations constitute a preventive safeguard or bulwark against future social devaluations. For instance, people who have never worked in “old style” residential institutions nonetheless often create institution-like conditions in community settings—almost a neocustodialization. This would seem to suggest that the deeper lessons of SRV are not well appreciated or understood even though the setting itself may have come into existence because of indirect SRV influences. It may seem unthinkable to some that “old” social devaluations will reappear in “new” contexts. Nonetheless, one might wonder how or even if SRV will have some influence on unanticipated “retro” social devaluations.

3.6 SCOPE AND FOCUS OF SRV INFLUENCE

SRV has been largely influential in the developmental disabilities field and in particular in what North Americans call the mental retardation field. Not surprisingly, its origins are in this field, and its major exponents are from it as well. Even though Wolfensberger has crafted SRV to be recognizable as a more universal theory, it has not to this point had the hoped-for broader impact. It has had less direct impact on the physical disability movement, which sees itself as more organized around the “independence” theme. In mental health its impact has been present, but it has gained greatest acceptance among community mental health advocates, especially those that de-emphasize professional and medical authority and those that favor noninstitutional supports. For instance, many aspects of SRV have had considerable popularity in the United Kingdom with dissident nurses, psychologists, and rights-oriented “consumer” advocates. In Canada many of the most progressive community service advocates in mental health have drawn heavily from Normalization and to a much lesser extent from SRV.

In the aging field, it has had its greatest adherence in Australia with typically sporadic interest appearing elsewhere at the margins of the field. It has not managed to find a substantial presence in the addictions, corrections, psychotherapeutic, medical, psychological, or social work fields or professions and is virtually unheard of outside of special education in the broader education field. It has no substantial citizen movement adherents outside of the developmental disability field, and even there it is often portrayed as the theory of a prior generation of activists, that is, it is said to be passé. Its academic prominence follows similar patterns to its pattern of adoption in the service fields.

None of this per se excludes SRV’s claim to a more universal applicability, but it does point out the very important difference between the theoretical uses and constituency for SRV and the actual historical impact. It is also noteworthy that the uses and prominence of SRV in the aging field in Australia (and most recently New Zealand) is comparatively recent (i.e., 1980s and early 1990s). Also, even in areas where a form of standardized Normalization was widely taught in the 1970s (e.g., Canada, eastern USA, and the United Kingdom), it has not necessarily followed that SRV teaching enjoyed a broad level of popularity. Alternately, SRV has found new audiences not involved in earlier Normalization teaching eras (e.g., SRV in the midwest of the USA in the 1990s, and SRV in Australia in the 1980s). Curiously, even though many have declared both Normalization and SRV to be passé, the level of SRV training currently under way in English dwarfs by a large margin even the most intensive levels obtained in the 1970s or 1980s.

Another related phenomenon is the proliferation of “soft-focus” SRV training and writings evident today, particularly in the developmental disability sector. While much of this teaching and writing does not mention SRV, its content relies heavily on what might be considered “classical” SRV thinking and theorizing. In fact, to the naive, “soft-focus” SRV teachings are
considered equivalent to “hard-core” SRV. Again, in
this instance much of the easier content of SRV is
adopted even as formal allegiance and alliance with
SRV is jettisoned. The two are interrelated phenomena
in the sense that the appetite for “soft-focus” SRV is
substantially related to a rejection of “hard-core” SRV
teaching, that is, a preference for a “softer” packaging
of the SRV message.

Conceivably, SRV could be “rediscovered” at any
point and applied to other areas either theoretically or
practically. Equally, it may simply fade from view as
its current generation of adherents passes away. Yet
these are much too simple prognostications for ideas
that are now largely in the public domain. A plentitude
of other possibilities could, in fact, occur were there
people with an interest. The “whys” of impact remain
obscure even though the effects of SRV can be
described with a certain amount of generality. Since
social devaluation is so intrinsic to human experience,
it remains a quite reasonable path of inquiry to try to
ascertain whether SRV truly impacts on society as per
its theoretical claims.

Wolfensberger has often said in recent years that
SRV is a social scientific theory that itself is dependent
on positive ideology and morality in order to address
social devaluation. In other words, SRV could not have
achieved much alone were it not for adherents who
made value choices in favor of devalued persons and
then used SRV to pursue goals based on these positive
values choices. While SRV does not prescribe such
choices, it does seem to have had the impact of
encouraging people to deal with values issues, that is,
it seems to have had a “values engagement” impact.
This “values engagement” phenomenon seems to be
characterized by at least some people identifying
values as core matters in terms of how people are to be
treated. In fact, the actual values that given people
might specifically endorse may vary widely, yet all of
these people would typically highlight “values in
general” as important. It is noteworthy to add that
though Wolfensberger has claimed that SRV cannot
and does not answer values questions—it is a
social/scientific theory not a value system—never-
theless, this distinction is commonly lost on most
adherents who feel to the contrary that by embracing
SRV—or one of its many “look-alikes”—they have
indeed embraced a guiding philosophy or value system
for services.

4 SRV TRAINING LITERATURE

The major literature on SRV (as distinct from
Normalization) is almost entirely Wolfensberger’s
except perhaps in the UK. The SRV term and
formulation are only briefly summarized by
Wolfensberger in the major professional literature.
Very recently, Wolfensberger (1991a, 1991b, 1991c,
1991d, 1992) has published an expanded monograph
in English, French, Italian, and German. Increasingly,
the SRV terminology seems to be finding usage, but it
is still largely a rarity. In many ways, the
Normalization term and conceptualization remain far
more dominantly present in the professional literature
of the fields where they have had some penetration. It
may be too early (only a decade) to conclude very
much about the eventual fate of SRV, but it
nonetheless seems (to this point in time) to have been
comparatively a smaller ripple than was Normalization.

The Normalization literature is much more abundant
in the 1980s and 1990s than in the 1970s. The
literature on Normalization does not share a common
definition of what is meant by the term. In many cases,
Normalization seems to have meant whatever the
author needed it to mean. The Wolfensberger
formulation has massively overshadowed the earlier
Scandinavian formulations as the most widely cited
authoritative or definitive version.

A notable variation on this general pattern is in the
case of the United Kingdom. In 1981, Alan Tyne
adapted a Normalization monograph by John O’Brien
(O’Brien & Tyne, 1981) that was in itself a paraphrase
of the Wolfensberger definition of Normalization. This
formulation was widely disseminated in the UK and
has gained some prominence as essentially a functional
equivalent of the (earlier) Wolfensberger material even
though it is, in essence, a derivation. Nonetheless, it is
referred to in more recent UK literature as being
definitive for purposes of establishing what is meant
by Normalization. This instance is emblematic of the
general problem of the popular impact of something
called “Normalization,” where the precise meaning of
the term is not necessarily shared. The “Normala-
zation” literature is in fact substantially concerned
with establishing arguments either in favor or against
Normalization—whatever it may mean to the writers.
This literature is notably abundant in the United
Kingdom and Australia and only marginally present in New Zealand and Canada. The USA has produced some academic literature but little popular writings on the subject.

The chief dissemination of the bulk of Normalization/SRV literature has been done by the various training groups who have had a specific commitment to Normalization/SRV training. Perhaps the most substantial of these in the 1970s had been the National Institute on Mental Retardation in Canada (now the G. Allan Roeher Institute). This body had self-consciously abandoned such a mission in the early 1980s but had, up until that point, been a major worldwide influence as well as a significant publisher of Normalization-derived materials. Also remarkable was its pioneering attempt to install a systematic national Normalization training system. This system remained in place until the early 1980s but gradually declined into a handful of poorly networked provincial and local groups carrying on SRV training.

Nonetheless, throughout North America there eventually grew a wide variety of specifically focused Normalization/SRV training efforts. These were quite varied and included both state and more local variants, stretching from Georgia to New Brunswick and British Columbia, and Washington to Indiana and Southern Ontario. None were national—with the exception of the Training Institute, established by Wolfensberger at Syracuse University—though they were all very effectively networked.

In the UK, the Campaign for Mental Handicap Education and Research Association (CMHERA) has operated a nonstop Normalization/SRV training system nationally since the 1980s, and a variety of smaller, more local affiliates have appeared during this period. CMHERA has also served as the major source of Normalization literature for the country. On occasion, CMHERA has facilitated trainings in Ireland.

In Australia there has been a number of state-based Normalization/SRV training efforts since 1980. These, in effect, merged formally as a systematic national effort only recently, though the trend toward this had begun by the late 1980s. New Zealand had no designated training groups until recently but had some relatively consistent efforts to disseminate the ideas during the 1980s.

Only a few articles have been written about these training efforts but it is estimated by this writer that tens of thousands of persons have received some form of in-depth Normalization/SRV/PASS/PASSING training. These training events have been much more the primary means by which SRV has been disseminated and adopted. While there are increasingly large differences between standardized and nonstandardized trainings that have worried many of those involved, this has not, thus far, created separate schools of SRV thought. A single body to coordinate SRV training and development exists for Canada and the USA, and a similar structure has been formed in Australia. Various attempts have been made to craft a similar body under CHMERA in the UK. No unifying international body yet exists to further SRV work, training, and materials, nor has one been attempted. Nonetheless, Wolfensberger’s Training Institute has served as a locus for such contacts as have a number of other individuals.

As a final note, it is remarkable that despite the general evidence of SRV influence and adoption there remains considerable skepticism even among SRV’s strongest allies that the theory has had anything but a marginal impact. Embedded in this is a widespread feeling that SRV’s influence is much too weak given the massiveness of social devaluation. In some locations such as the UK, parts of Canada, and so on, there exists considerable pessimism even about the future of SRV, that is, that its best days are behind it. Naturally, this view is offset by a sense in Wolfensberger and others that the theory will continue to evolve and impact things long after this generation of adherents passes from the scene.
REFERENCES


