

**SOCIAL ROLE VALORIZATION (SRV) A STRONG VOICE OF
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Abstract

Without any question, it can be said that since the 1960's the principle of normalization have had a profound influence on the development of services for persons with disabilities. Actually, at first 'Normalization' was defined by letting it only for persons with mental retardation but further it is extended to all persons with disabilities. We can see the clear distinction between the definitions of 'normalization' given by Nirje and by Wolfensberger. As distinguished from Nirje's definition which emphasizes both 'means' and 'goals'. In Wolfensbergers reformulation the goal of normalization are twofold. Normalization was first formulated in 1969 by Benjt Nirje having the ideas of normal rhythm of life. After the formulation of 'normalization' various books, articles and other publications and the topic have been written and disseminated. Of course various authors interpreted it in various ways often, made wrong interpretations. Social Role valorization (SRV) is the name given to a concept for transacting human relationships and human service formulated in 1983 by Wolf - Wofensbeeger as the successor to his earlier formulation of the principle of normalization."

Key Words: Social Role, Valorization, Disability.**Introduction**

Without any question, it can be said that since the 1960's the principle of normalization have had a profound influence on the development of services for persons with disabilities. To a significant extent these ideas have provided a foundation for the reforms of institutional services and the development of

community living movement for person with disabilities in many countries or even in all over the world. "During 60's to 70's the terms 'Normalization' 'Mainstreaming' have become policy slogan for education and services provided to children with special needs. (Zigler and Meuchow , 1979)". The ideas of 'normalization' evolved in Scandinavian countries during 1950's to 1960's originated by Niels Erik Bank Mikkelson who is known as father of normalization, was the pioneer of deinstitutionalization movement in Scandinavian countries. He implemented his ideas of 'normalization' at first in Denmark during 1950's to 1960's. But the normalization Principle as a concept was developed and articulated by the Swedish scholar Benjt Nirje and given its first statement in print in 1969 in the report of president committee on mental retardation. (The committee was constituted by US president J.K. Kenedy in 1962) As Nirje defined "*Normalization means making available to the mentally retarded patterns and condition of everyday life which are as close as possible to those of mainstream of society.*" (Nirje,1969)". Actually, at first 'Normalization' was defined by letting it only for persons with mental retardation but further it is extended to all persons with disabilities. Approximately at the same period Wolf - Wolfensberger brought the concept of 'Normalization' to USA with some amendments. The amended version of 'Normalization' by Wolfensberger (1972) is "*Normalization refers to utilization of means which are as culturally normative as possible in order to establish / or maintain personal behaviour and characteristics which are as culturally normative as possible.*" (Wolfensberger, 1972)". We can see the clear distinction between the definitions of 'normalization' given by Nirje and by Wolfensberger. As distinguished from Nirje's definition which emphasizes both 'means' and 'goals'. In Wolfensbergers reformulation the goal of normalization are twofold

1. Environmental Normalization 2. Client normalization

Unfortunately, after a few years of its formulation, 'Normalization Principle' was widely 'misunderstood' and misinterpreted by public as well as professionals both. The misinterpretation of 'normalization' created many misconceptions about 'the principle of normalization. Nirje accepted that due to its simplicity Normalization is misunderstood by society. He has clarified some misconception in his paper 'Setting the Record Straight'. Some common misconceptions are as follows:

1. Normalization means making people normal.
2. Normalization ideas are Scandinavian concept and inapplicable elsewhere.
3. Normalization is culture specific
4. Normalization is an ideal concept but impractical. (Nirje 1985)

The misinterpretation of 'Normalization ideas motivated one of its pioneer Wolf- Wolfensberger and created a ground for development of Social Role Valorization theory.

Birth of Social Role Valorization:

Normalization was first formulated in 1969 by Benjt Nirje having the ideas of normal rhythm of life. After the formulation of 'normalization' various books, articles and other publications and the topic have been written and disseminated. Of course

various authors interpreted it in various ways often, made wrong interpretations. Wolfensberger tried to deal with frequent misconceptions and even perversions of normalization, often due to the ease with which the term 'normalization' itself could be (and was) misconstrued or misapplied (Osburn ,1998,2006).These misconceptions resulted in an evolution in thinking which shifted the term 'Normalization' to social role valorization. Another big boost to the conceptualization of Social Role Valorization was the work being done by Wolfensberger and Susan Thomas at his training institute on two human service implementation tool : PASS (Program Analysis of service system) and PASSING (Program Analysis of Service System Implementation of Normalization Goals). PASSING incorporates moatly SRV concepts while still using the earlier Normalization Language (Osburn 1998, 2006).

In order to communicate new concepts new terms always needed. In 1983 Wolfensberger coined the new term 'Social Role Valorization' instead of normalization accordingly. At one hand it overcomes many of the historical and other problems that had always plagued with the term 'Normalization' on the other hand it is based on two additional discoveries that are highly relevant to the essence of its meaning (Wolfensberger, 1985).

1. In modern French human service context people had begun to use valorization in order to signify the attachment of value to people. In Canadian French pacifically the tam 'Valorization Sociale' had been used to teach the normalization principle since 1980 (Wolfensberger 1991). 2. In both French and English the tam Valorization has its root in Latin word 'Vallere' mean 'to value' or 'accord worth' Hence the work 'Valorization' elicits very strong positive connotation that clearly correspond to the concept it is meant to convey.

Also since Social Role Valorization in an uncommon term, people are more likely to listen to definition and explanations of it rather than attaching their own preconceived notion to it as they had tended to do with the work normalization (Wolfensberger 1985, Osburn, 2006, 1998).

What is social role valorization?

Enhancing the perceived value of the social roles of a person or class is called Social Role Valorization. Thus, "*Social Role valorization (SRV) is the name given to a concept for transacting human relationships and human service formulated in 1983 by Wolf - Wofensbeeger as the successor to his earlier formulation of the principle of normalization.*" (Lemay. 1995, Wolfensbelger 1983). Social role valorization is a dynamic theory which has regularly been refined since its birth by its originator Dr. Wolf-Wolfensberger. When articulated first in 1983 SRV were defined as "*the enablement, enhancement maintenance, and/ or defense of social roles for people-particularly those at risk.....by using as much as possible, culturally valued means*" (Wolfensberger, 1983). Again with advancement of technology and with the help of researches in various subjects Wolfensberger defined Social Role Valorization as

"The application of what science can tell us about the enablement, establishment, enhancement, maintenance, and/ or defense of valued social roles for peoples". (Wolfensberger & Thomas, 1999). The most recent definition of SRV given by

Wolfensberger is: *“The application of empirical knowledge to the shaping to the current or potential knowledge to the of a party (i.e. person, group or class’ primarily by means of enhancement of party’s competencies and image so that these are as meek as possible positively valued in the eyes of the perceivers (Wolfensbelger & Thomos, 2005)* Simply, Social Role Valorization is an ideology of human services based on the proposition that the quality of the life increases as one’s access to culturally typical activities and setting increases. Applied to individuals with disability especially in the case of mental retardation, SRV fosters deinstitutionalization and the development of community based living arrangements.

Ten themes Of Social Role Valorization

Social Role Valorization is based on the following 10 themes:

- a) The role of (un) consciousness:** This theme says that Individual organizational and societal unconsciousness sustains societal devaluation of on individual or a group of individual and SRV aims to raise consciousness about the social devaluation in human services in society
- b) The dynamics and relevance of social images:** Historically attached roles to devalued people influence role expectancies about them and their social valuation. SRV examines these processes and the adoption of strategies that will convey positive messages.
- c) The relevance of role expectancy and role circulatory to deviancy making and deviancy unmaking:** Role expectancies and role circulators’ are among the most powerful influence and control methods known. SRV identifies the means by which these influences operate and how they can be used to convey positive or negative role expectancies.
- d) The power of mind sets and expectancies:** Mind sets and expectancies largely control the perceptions of, and behaviour towards people. SRV develops many strategies about how to influence mind sets and expectancies positively.
- e) The concept of relevance, potency, and model coherency of measures and services:** In order to be effective in promoting valued social roles, services have to be relevant to significant needs and potent in the sense of being effective in addressing them. Model coherency refers to the extent to which what a service does and how it does is fit with the significant needs of service users.
- f) Personal Competency enhancement and the developmental model:** The assumption of developmental model is the importance of the enhancement of competencies particularly for devalued persons having impairments.
- g) The importance of inter personal identification between the valued and devalued people:** Access to the ‘good things’ in life is more likely to be afforded to devalued people if valued people see themselves as being like them and having things common with them.
- h) The power of Imitation via modeling and interpersonal identification:** As Bandura explains imitation is one of the most powerful learning mechanisms. SRV is

concerned with how the power of modeling and imitation serve to promote socially devalued behaviours.

i) The importance of personal social integration and valued social participation especially for the people at risk of social devaluation: Segregation from the valued society is a major wound experienced by devalued people and it reinforces negative social beliefs about those groups. SRV provides a set of rationales which supports social integration of devalued people in valued participation with valued people in valued activities which take place in valued settings.

j) The conservatism corollary: Devalued people experience vulnerability in which the likelihood of negative things happening to them and the harmful consequences of those experiences are much greater than for valued people. SRV examines vulnerability and puts forward strategies to respond to it. The basic premise of Social Role Valorization is that people are much more likely to experience “good things in life” (Wolfensberger, Thomas & course, 1996) if they hold valued social roles than if they do not. As Osburn (2006) describes. “*The major goal of SRV is to create or support socially valued roles for people valued social roles that person is highly likely to receive from society those good things in life that are available to that society and that can be conveyed by it or at least the opportunities for obtaining these.* Osburn (2006)” Some examples of good things in life are: being accorded dignity, respect, acceptance, a sense of belonging, an education, and development and exercise of one’s capacities, a voice in the affairs of one’s community and society, opportunities to participate, a decent material of living, and at least normative place to live and opportunities to work and self-support etc. Since Social Role Valorization is based on the perspective of social roles that is, it considers disability from, the social point of view, so, as we see how role theory describes disability.

The role theory includes the concepts of role, role-salience, role-set, role-discontinuity, role strain, role conflict and role ambiguity (Barnartt, 2001)

Statuses

We occupy many positions in society, in sociological language it is known as statuses. A status or position exists regardless of who is in it. The social structure is made of the number, social location, and relationship of statuses to each other. The social structures control entrance into and exit from. Some statuses set hurdles which are so difficult for most people to overcome that they are unlikely to be able to take on that status at all e.g. status to be a president of India. Other statuses require specific qualifications which are difficult but not impossible to meet. For example in order to move in to the status of an engineer a person must be a graduate from an engineering college. Persons with fewer resources such as intelligence, money, persistence are less likely than those with those of more resources to be able to enter that position but it would not be impossible for them to do so. (Barnartt, 2001).

Statuses can be either ascribed or achieved. In the former, the status is given to the person usually at birth, by the society, whereas Achieved statuses are chosen either voluntarily or by dint of not choosing an alternative. Being a ‘Brahman’ is an

ascribed status for an individual whereas 'being a doctor' is an achieved status for an individual.

Roles

Every status has role expectation attached to it which tells an individual how he is expected to behave in that status. *"Roles provide 'scripts' which indicate specific lines as well as more general characteristics the person playing the part must be able to take on and the person can choose the roles in which he or she is engaged in"* (Goffman, 1959)". The culture of the society provides script for 'roles' which are unlikely to be written down but they are passed down from one generation to another. Role expectations include notions about appropriate or inappropriate.

1) Places in which the role can be enacted. 2) Times at which the role should be enacted. For example the 'sick' role should be enacted at either at home or at hospital not in a cricket field. Similarly the 'role' of a teacher should be enacted in day time and not at night usually. Role expectations imply some other roles, which must be attached to it which is known as 'role set'. For example a person must exist in the role of child attached to the person in the role of mother, for role of mother to be enacted appropriately.

Master Statuses

All statuses are not the same. Some statuses are so important in the eyes of society that they are expected to affect all other statuses a person might have. Such statuses are known as a master status.

"A master status is a status which supersedes and dominates all other statuses. Therefore it affects all of the roles associated in person's life". (Schaefer, 2000)

Some examples of master statuses are caste, race, gender etc. Just as any other status a master status also carries with it Role-Expectations for behaviour, emotions, action, cognitive processes etc. *"The role attributes of this master status are expected to dominate all other roles even if, by displaying these characteristics, the person would be enacting other roles deviantly and they are even expected to carry over in to non-role behaviours"*. (Barnartt 2001). Master statuses work as specifiers of how important other roles are expected to be for people in a certain category of that master status. For example the master status of 'sex' specifies that 'work-roles' are more important for men than 'family roles' are and vice versa for women. Master statuses are mechanism of allocation and affect the person's access to other statuses and roles. For example especially in India 'caste' determines precisely what type of occupational role is open for an individual belonging to a specific caste and thus they also specify that all other possible occupational roles are closed.

Conclusively *"master statuses often form the bases for stereotypes, prejudice and discrimination"* (Barnartt, 2001).

Disability from the view point of Role Theory

From the view point of 'Role theory' "disability" is a social status which is assigned by society to a person who may have a physical or mental impairment which is visible or known. The role of 'disabled' expects people with impairments to be passive

dependent, childlike patients. (Albrecht,1992). People with impairments are traditionally assumed to be unbeautiful (Hann 1988). *Some other behaviour expected of someone with a visible disability includes expressing their own emotion while managing the emotion of others in an interaction: reacting to sympathy, public praise, or help with gratitude and deference and accepting that they are under obligation for such sympathy and help. (Cahill & Egglestors 1994).* Many authors argue that since the role of disabled supersedes all other statuses therefore is a 'Master Status' and, thus, becoming a master status, disability, leads to social devaluation of an individual.

Social devaluation

Social devaluation is a social process in which the actual characteristics of the devalued person / or group are only one influence and at time even a minor influence. (Cocks, 2001). The process of social devaluation occurs when any deviant behaviour of an individual or a group of individuals gets 'Master Status' from the perspective of disability, Since 'Disability Status' is a 'master status' therefore persons with disability in our society, are either devalued or 'likely to be devalued' by our society, and..... ".....*People who are societally devalued, or who are at value-risk typically get cast and kept in social roles that are not valued. They may get cast in such roles as a consequence of being devalued or they may become devalued as a result of being perceived to hold such devalued roles. (Wolfensberger and Thomas, 1994)* Since with every 'Master Status' there is some common roles attached to it. Therefore in a similar way, there are some common negative roles, attached to the master status 'disability' which are responsible for social devaluation of a person with disability. Social Role Valorization uses the term 'Wounds' to explain such negative social roles. Some common wounds are
a) The role of non-human, b) The role of menace or object of dread, c) The role of object of ridicule, d) The role of waste object, garbage or discard, e) The role of pity, f) The burden of charity, g) The eternal child or the child once again h) The role 'innocent' i) The sick or diseased organism j) One who in already dead or at least dying. (Wolfensberger, 1994)

SRV includes a striking phenomenological description of the common life experience of people who are socially devalued. The theory uses the term 'wands' the describe these experiences and avoids reinterpreting them in to professional language such as symptoms. (Wolfensberger, 1994)

SRV suggests two major broad strategies for pursuing the goal for devalued people or particularly for the persons with disabilities:

- a. Image Enhancement:** Enhancement of person's social image in the eyes of others,
- b. Competency Enhancement:** Enhancement of the personal competencies of the devalued person.

Enhancement of both is necessary in rehabilitation of person's with disability because *"a person who is competency impaired is highly at risk of suffering image impairment and a person who is impaired in image is apt to be responded to by others in ways that delimit or reduce the person's competency. But both the processes work equally in the reverse direction. That is, the person whose personal social image is positive is*

apt to be provided with the experiences, expectations and other life conditions which are likely to increase, or give scope to, his her competencies and a person who displays competencies is also apt to be imaged positively.” (Osburn 2006)

The Importance of Social Role Valorization:

SRV is not a value system or ideology nor does it prescribe or dictate value decisions but SRV makes a big point of how positive personal and cultural values can be powerfully brought to bear if one wishes to pursue valued social roles for people.

(Osburn, 2006)

Michael Kendrick, from Massachussets Dept. of Human Services has explained the importance of SRV in his article ‘Some Reasons Why Social Role Valorization is Important’ which are briefly as under:

1. SRV identifies social devaluation as a critical human experience and tendency.
2. SRV raises consciousness and concern about the fate of socially devalued person.
3. SRV invites and provides a way for individuals to take a stand against social devaluation.
4. SRV specifically calls upon socially valued persons to ally themselves with socially devalued persons.
5. SRV recognizes and seeks the primacy of profound values change.
6. SRV illuminates the complicity of societal structures, agencies, and systems in the transaction of social devaluation
7. SRV proposes positive strategies of program and community change.

The depiction of social reality by SRV is substantially consistent with established social science, research and empiricism.

6. SRV embraces a highly realistic sense of human nature.
7. SRV act as a safeguard against and extreme of fur than or social devaluations.
8. SRV presents a response to the human degradation of social devaluation that in life giving.(Kendrick,1994).

Conclusion

Normalization and Social Role Valorization are widely acknowledged as having strongly influenced reforms to services for persons with disabilities particularly services reforms for persons with Mental Retardation. Although more than three decades old but still today these ideas are strongly influencing the services reforms for persons with disability. According to Osburn “*SRV is a social science theory and is thus in the empirical realm. It rests on a solid foundation of well-established social science theory, research, and empiricism within fields such as sociology, psychology, and education and pedagogy, drawing upon multiple bodies of enquiry such as role-theory, learning theory, the function and power of social imagery, mind sets and expectancies, group dynamics, the social and psychological processes involved in the unconsciousness, the sociology of deviancy, and so forth. SRV waves this body of knowledge in to an overreaching, systematic, and unified schema.*”

(Osburn, 2006)

References

- Barnartt, S. (2001) Using role theory to describe disability, *Research in social science and disability* vol.-2 pp-53-75,Elsevier Science Ltd.
- Chappell, L.A., (1997), From normalization to where?,In 'Disability Studies: past, present and future' (Ed. Barton, L. & Oliver, M.) The disability press, Leeds,pp-49-62.
- Cocks, E. (1997). Building safeguards into the development of services. In P. O'brien & R. Murray (Eds.), *Human services: Towards partnership and support*. Auckland: Dunmore Press.
- Cocks, E., & Stehlik, D. (1996). History of services. In J. Annison, J. Jenkinson, W. Sparrow, & E. Bethune (Eds.), *Disability: A guide for health professionals*. Melbourne: Thomas Nelson Australia. pp. 8-33.
- Cocks, E. (2001) Normalization and Social Role Valorization: Guidance for human service development, *Hong kong Journal of pshychiatry*, 11(1), pp-12-16.
- Flynn, R. J. (1994). Evaluation of service quality with PASS and PASSING: A review of research, 1980-1994. Ottawa: University of Ottawa.
- Flynn, R. J. LaPointe, N., Wolfensberger, W., & Thomas, S. (1991). Quality of institutional and community human service programs in Canada and the United States. *Journal of Psychiatry and Neuroscience*, (16) (3), pp.146-153.
- Kendrick, M. (1994), Some reasons why social role valorization is important, *SRV-VRS: The international social role valorization journal*, 1(1), pp. 14-18.
- Lemay, R. (2006). Social Role Valorization Insights into the Social Integration Conundrum, *Mental Retardation*, 44(1), pp. 1-12.
- Martin, B. (2006), SRV& NVA; Valorising Social Roles Through Nonviolent Action, *The SRV journal*, 1(2), pp. 25-33.
- Nirje, B. (1969). The normalisation principle and its human management implications. In R. B. Kugel, & W. Wolfensberger (Eds.), *Changing patterns in residential services for the mentally retarded.*, Washington, D.C.: President's Committee on Mental Retardation. pp. 179-195.
- Nirje, B. (1985). The basis and Logic of the Normalization principle, *Australia and Newzealand journal of developmental disabilities*, 11, pp-65-68.
- Nirje, B., Perrin, B., (1985) Setting the Record Straight *Australia and Newzealand journal of developmental disabilities*, 11, pp-65-68.
- Osburn, J. (2006). An overview of Social Role Valorization theory, *The SRV journal*, 1(1), pp.4-13.
- Thomas, S. (1994), A brief history of the SRV development, training, and safeguarding council, *SRV-VRS: The international Social Role Valorization Journal*, 1(2), pp. 15-18
- Wolfensberger, W. (1983a). Social role valorisation: A proposed new term for the principle of normalization. *Mental Retardation*, (21) (6), pp.234-239.
- Wolfensberger, W. (1992). A brief introduction to social role valorization as a high-order concept for structuring human services. Syracuse: Training Institute for Human Service Planning, Leadership and Change Agency.