In this article, the authors Carroll, Petroff and Blumberg report their findings based on a study completed on pre-service teachers’ (i.e., those studying to become teachers) participation in a university course with individuals with intellectual disabilities. After the semester, 12 pre-service teachers who took the course were interviewed and their experiences evaluated. This scholarly article is intended for teachers and other people who are interested in ‘inclusive’ education at all academic levels. It gives the reader an in-depth look at: the course, the pre-service teachers who participated in the program, and at the effects of social integration and participation (Wolfensberger, 122-124) in the lives of the students with a disability. The purpose of the article was to convey the impact of the course on pre-service teachers and how their perceptions about ‘inclusive’ education for people with disabilities were affected.

According to the authors, the class, called the Great Conversations (GC) course, is “an inclusive post-secondary class” (p. 351). It focuses on the great conversations of the liberal arts and sciences, and is designed to promote “academic interactions” between students with intellectual disabilities and their “typical peers” (p. 352). The GC course is a non-credit course taught by professors from different disciplines. It is part of the Career and Community Studies (CCS) program, a four-year curriculum for young adults, ages 18 to 25, with intellectual disabilities (p. 354). The program was designed by The College of New Jersey (TCNJ) based on their Education Department’s stated interest in education ‘inclusion.’

The participation of the pre-service teachers was voluntary, and a variety of strategies were used to recruit them. Participants varied in their level of education and their grades. According to the article, participants included (a) graduate special education majors, (b) secondary education undergraduates, (c) special education undergraduates, and (d) secondary education majors (p. 356). Their degree of previous contact with people with intellectual disabilities also varied from no experience to few experiences, to personal experience. These variations might account for the mixed reviews of the participants’ experiences, although everyone agreed on the powerful experience of the course and its tremendous impact on their previously-held assumptions (p. 362).

After the GC course, 12 of the 18 pre-service teacher participants agreed to be interviewed. The main thoughts gathered from the interviews suggest that people with disabilities can learn alongside their age peers, can participate in a challenging curriculum, and can benefit socially from the content of the GC course (p. 362). However some concerns were presented by the interviewees. For example, Pam felt that lectures were not always delivered in a comprehensive way (p. 359). Bridget, another student, felt that the non-CCS students (i.e., the students without disabilities) engaged in stage-hogging and did not allow other students sufficient opportunities to participate (p. 360). Group work, for some, contributed to social loafing, and for others, led to social facilitation (p. 361). Other interviewees identified confusion in their role as a teacher or a student (i.e., were they in the course to be a student or to act as a teacher?) (p. 361). Some suggestions for achiev-
ing effective ’inclusion’ were also identified by the interviewees. They included (a) knowledgeable teachers with training in educating people with varying levels of abilities, (b) effective and engaging instructional strategies (e.g., group discussions and PowerPoint slide shows), (c) flexible curricula, and (d) seeing people with disabilities as individuals rather than a group, and so forth (pp. 355-362).

Generally, the pre-service teacher participants left the course satisfied and open to ’inclusive’ education. They affirmed that they benefitted from the program in various ways. Many reported being more comfortable with people with intellectual disabilities and that many preconceptions they might have harbored were dispelled. They all saw the CCS students as students and individuals just like them, and stated that they no longer defined people with disabilities by their disabilities. The pre-service teacher-participants thus reported a change in their attitudes and perceptions. This change in mind-set allowed them to identify with the students with disabilities, and see their similarities rather than their differences. According to Wolfensberger (1998), this self-identification is referred to as “interpersonal identification” (p. 118). The GC course, through “social integration and participation,” enhanced the image and competencies of the individuals with disabilities. The CCS students, by actively participating in a challenging college course, were perceived more favorably. They gained valuable skills which allowed others to perceive them in the role of college students. This valued role will increase their likelihood of attaining the good things in life (Wolfensberger, 120).

Although the students with intellectual disabilities were not interviewed, their experiences as perceived by the pre-service teachers were described in the article. Their knowledge and analytical skills improved, thus allowing them to interact intelligibly and socially with their peers without disabilities (p. 360). Based on these descriptions and on the teachings of Social Role Valorization (SRV), we can deduce that the impact on the students with intellectual disabilities was a positive one. The title of the course, “Great Conversations,” as well as the integration and participation of students with impairments in a college course, are both image and role valorizing. According to SRV, image can be enhanced through personal appearance, activities, language, setting and groupings (Wolfensberger, 64-69). The image enhancement is credited to the fact that the students with intellectual disabilities are “juxtaposed” to presumably positively and socially valued pre-service teachers and higher education students in the context of a college education. This course and the program also convey the valued social roles of college students, friends, community members and great conversationalists (Wolfensberger, 30). Based on the study, these role expectancies were aptly fulfilled by the CCS students. According to Wolfensberger, “expectancies are a core element in the role concept,” both in the minds of the perceiver, as well as the person who occupies the role or is cast into a role (p. 26). The CCS students were placed in a college environment, they were perceived by their teachers and fellow students as capable college students, and thus they largely fulfilled the expectations of the role. They performed as college students and consequently changed the perceptions of those who had doubts as well as strengthened the perceptions of those who had cast them into the college student role. The students themselves, propelled by these heightened perceptions of their expected role, acted in ways which confirmed these role expectations, until the role become part of their identity. This continuous cycle between “role expectations and role performance” is referred to as a “role feedback loop” (Wolfensberger, 26).

This article references contemporary research. The sources for the authors’ claims are based on participants’ personal experience as well as the authors’ analysis of the study. The authors do not define “inclusion” or “inclusive” education. However, the CCS students’ involvement and their
contribution to the course suggest that they were not just physically present but active and valued participants, which is reflective of SRV teachings on integration (Wolfensberger, 123). The article is logical and well organized. It flows and gives readers insight into all aspects of the study (e.g., the choosing of the participants, the method used to conduct research, the participants’ experiences and the authors’ analysis). However, readers would have benefitted if the authors had included different views; for example, the personal experience of the students with disabilities and the experience of the other students who attended the college but not this particular class. The authors have credibility: they are associate professors at TCNJ and experts with experience in the field of ‘inclusive’ education. I found no previous reviews of this particular article on the EBSCO database nor in a general web search. However, another article reiterates some of the barriers and effective strategies to inclusive education. According to Forlin, Loreman, Sharma and Earle, the appropriate education of pre-service teachers and their attitudes about working with people with intellectual disabilities play a major role in promoting ‘inclusive’ education (p. 207). This sentiment was echoed by Pam and Bridgette, two of the participants, who believed that barriers are societal and attitudinal. The former stated that the difficulties encountered by the CCS students were a result of the lesson presentation and delivery, while the latter stated that the success of inclusion was “situational” (pp. 359-360).

As a student of the Developmental Services Worker program at Centennial College in Ontario, Canada, this research will be helpful when I have the opportunity to teach people with intellectual disabilities. I can reflect on this article and build on the pre-service teachers’ suggestions for successful integration. Moreover, as I promote the benefits of an ‘inclusive’ education, I can use this article as a tool to advocate effectively for my future students. According to Pam, one of the interviewees, “students are students whether or not they have a disability” (p. 351). The outcomes of this study suggest a feedback loop between social integration and participation, image and competency enhancement, interpersonal identification, and valued social roles.

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The citation for this review is


Reviewed by Susan Thomas

Perske has devoted the recent part of his life to the plight of mentally retarded people—here called persons with intellectual disabilities—when they come in contact with the criminal justice system. Such persons are in grave danger there because they may confess to crimes they did not commit, and then get very badly treated in prisons; some have even been subjected to capital punishment. In this article, he explains the ideas of the eugenic alarm and social Darwinism era (late 1800s-early 1900s) that interpreted mentally retarded persons as the dregs of society, and how this led to the massive growth of institutions of very bad conditions. He then explains the mid-20th century service reform movement (which he attributes almost entirely to parents, and in which normalization is not mentioned), and how it led to retarded people living ordinary lives integrated into society.

The next sections of the article are devoted to what Perske sees as improvements in the treatment of mentally retarded persons when they are taken into police custody and/or come before the courts. He cites improved decisions over such persons by judges, decisions now marked by taking time to understand the person, and empathy; heightened awareness by police of various kinds of impairments, and of the behaviors that these can generate, particularly behaviors that might be misunderstood by police and/or get an impaired person into legal trouble; a lowering of the number of false confessions by handicapped people; a move towards electronic recording of police interrogations so that these might be available for analysis and review; and a move in the US to legally ban the execution of mentally retarded persons. He also notes that people concerned with the welfare of handicapped people, and law enforcement groups, are now trying to work cooperatively together so as to avoid police mistreatment of handicapped people, and avoid their being arrested and convicted for crimes they did not commit.

Much of what Perske reviews underlines the reality of the heightened vulnerability of societally devalued people, in this instance people who are not at all smart and who are therefore more subject than others to influences, pressures and temptations that put them in jeopardy of false arrest and false convictions, including for very serious crimes.

Without using any language of SRV, Perske points to several strategies that are concordant with SRV that he believes have contributed to this “coming out of the darkness.” One is efforts to increase awareness among police officers about what he calls “disability,” about some of the peculiar behaviors associated with “disabilities,” and about the reasons why mentally retarded people especially may confess to crimes they did not commit. This is an example of trying to raise consciousness about an issue. He also cites the importance of empathy on the part of both judges and police officers with handicapped persons brought before them, which is consistent with the SRV theme of interpersonal identification. However, nowhere does he talk about the roles of handicapped persons and how this may play a role in what happens to them in the criminal justice system. For instance, are such persons known as neighbors, family members, hard-working employees, etc., or only as suspects, convicts, perhaps even persons trying to “use” their impairment, or even fake an impairment, in order to escape the consequences of their acts?

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A Note on the Word ‘pedagogy’

The noun ‘pedagogy’ has ancient Greek origins, as well as French roots back to the 16th century. Pedagogy typically refers to the art, science, work or occupation of teaching. More figuratively, it had also been used in the past to describe any instruction, discipline or training; as well as an actual place of instruction, such as a school or college. The related noun ‘pedagogue’ (Latin paedagogus) can describe a schoolmaster, teacher, assistant teacher or (an obsolete usage) schoolroom.

Pedagogy bears relevance in Social Role Valorization and PASSING to the developmental model and competency enhancement, to helping a societally devalued person learn and become more competent, especially with the aim of that person thus becoming more able to acquire and maintain a valued social role or roles. Much is known about how people learn, and though some of these concepts are briefly covered in an SRV workshop, much more can be profitably studied and used on behalf of helping vulnerable people to learn.

Pedagogy was also a favored concept of Dr. W. Wolfensberger in regard to his development of new training workshops as well as to the leadership development and formation of new workshop trainers and change agents.

Historically, the Greek roots of the noun refer to a common practice in ancient Greece, and later Rome, of a slave or servant being given responsibility for a wealthier family’s children, taking the children to and from school, watching over their conduct, providing discipline; and in later Roman practice actually providing some instruction to the children. The Greek words comprising pedagogy meant ‘boy’ and ‘leader,’ as in leading boys to school, but later came more generally to mean leading boys in instruction.

Related words include pedagogal, pedagogic, pedagogical, pedagogism, pedagogist and (the short-lived) pedagoguette.

Source information from the Oxford English Dictionary

Reviewed by Joe Osburn

This book is the most recent of four on which Kröber & Van Dongen have collaborated. In it, they make a case—almost a plea—for the establishment of “inclusion” in the Netherlands, a project they believe is necessary if their country is to get beyond and replace what others have called its longstanding “apartheid policy” against its own intellectually disabled citizens. More than a decade ago one outside observer urged the Dutch to hold a national debate on “inclusion,” noting that “... care of the intellectually disabled is ... fifteen to twenty years behind that found in the civilized world” (Kristiansen, 2000). According to data cited by the authors, nearly a third of such people (i.e., 32,000 of 103,000) are incarcerated in institutions, causing another Dutch observer to liken his nation to “a developing country.” The impulse to separate out and segregate such people apparently still prevails in the Netherlands, and this is the challenge that Kröber and Van Dongen clearly take up, and perhaps revive, in this book.

They lay out a well-reasoned, somewhat technocratic argument for a national “inclusion” policy and, by extension, also for deinstitutionalization and community-based services in the Netherlands. Their book may be seen as an important conceptual contribution to Dutch change agentry efforts on behalf of these issues. They cite a number of inclusion studies, including one of their own which they report in this book, as well as definitions and position statements on inclusion emanating from various national and international disability related organizations. From these sources, they extract 58 factors they believe are most crucial to the success and failure of inclusion efforts by care organizations. These success factors are too numerous to mention here, but all would be expectable by most people generally familiar with inclusion processes, e.g., legal mandates, supportive services, social networks, access to settings, and so on. These factors are also expansive in scope, impinging on the law, public monies, service administrative structures, direct support mechanisms, and—perhaps most importantly—the conventional attitudes of most everyone in The Netherlands who would need to be involved in putting them into place. Taken together, they would entail a rather major transformation in the status quo and necessitate cooperative efforts among multiple parties in order to actualize them.

In a general way, this book is addressed to the entire Dutch society, but most particularly to its intellectual disability “care organizations,” i.e., formal human service agencies. This target audience is understandable given that one author is a consultant to care organizations and the other a director of one. It is translated into English, probably because most Dutch people also speak English, and as well, probably to increase its access (and marketability) internationally. However, focusing on Dutch care organizations seems unlikely to garner a substantial readership among similar organizations outside The Netherlands that have already at least rhetorically adopted inclusion. In the US, Canada, Australia and the United Kingdom, for example, laws, funding mechanisms, service provisions, public education efforts and other formal structures to support and even mandate inclusion have been in place for quite some time now and thus are more established, advanced and taken for granted.

Yet, its relatively tardy arrival on the “inclusion scene” does not render this book totally irrelevant to potential audiences elsewhere. For example, even those for whom the inclusion issue has long been settled one way or another may find their own notions about inclusion broadened by the conceptual model articulated by the authors.
And, what is more to the point for us, reviewing this book provides the opportunity to extract some SRV-relevant points for the edification of our own SRV Journal readers.

A general fact about translations is that some are better than others. Simple literal translation often loses or distorts meaning conveyed in the original. Idioms and aphorisms are notoriously difficult to translate and often rendered incomprehensible in the process. Not being a speaker of Dutch, I cannot say to what degree such problems affect this translation, but it seemed generally sound to me, with only a few editorial glitches (i.e., incomplete textual citations and reference omissions), and some instances of somewhat stilted phraseology causing momentary pauses over the intent of a particular wording. However, this relatively minor complaint is offset somewhat by the occasional phraseological gem. For example, one such expression that I found both new and of potential future use was an apothegm rendered as “they’ve learnt to cut their coats according to their cloth” (p. 138), referring to the adaptability of certain poor and lowly people. Another was the authors’ reference to “the law of the restraining head start” (p. 21), which they pose as a major dynamic suppressing greater openness to change in their country. In this context, they mean that putting mentally retarded people in institutions has become so established as the official and normative way of “caring” for them as to greatly restrain the development of any alternatives to it. They refer to an “institute (i.e., institution) paradigm” being deeply ingrained throughout Dutch culture, widely accepted as the proper way of doing things, and maintained largely by its own inertia. Their aim in this book is to counterpose a “support paradigm” as a means of achieving inclusion.

As explained in SRV literature and teaching, many different meanings get attached to the term “inclusion,” and some of these are incompatible with SRV and even with each other; therefore what gets called “inclusion” ought not simply be equated with either SRV or what SRV means by real integration. In order to avoid confusion or incoherency when one engages in efforts toward role-valorizing integration, it would be more precise to speak consistently in the idiom of SRV rather than that of “inclusion.” This often overlooked bit of SRV teaching is an important caveat vis-a-vis this book: readers should take care not to “read SRV into” it. I make this point because “inclusion” as rendered here is quite expansive and calls for any number of measures that accord with strategies and actions implied by SRV. But it most emphatically is not SRV. Nor is it simply SRV by another name. Valorizing the roles of a party does not constitute even a minor theme in the book. There is no (explicit) advocacy of valued roles. The notion of roles comes up at all only less than a handful of times. In fact, there is no mention of SRV anywhere in the book. While appropriate in terms of the point being made here, this omission causes one to wonder if perhaps the authors were unaware of SRV.

Somewhat frustratingly, Kröber and Van Dongen do not offer their own incisive statement of what they themselves mean by “inclusion.” Instead, they rather circuitously state that “where we speak of inclusion we refer to the platform of ‘Stichting Perspectief’.” However, rather than explaining what that organization’s perspective on inclusion actually is, they tell us that “the concept of inclusion resulting from this [organization] largely matches Schalock’s operationalization” (p. 34). This they do provide, at least in part, as follows:

People have valuable personal and social networks in society. They use facilities meant for everyone. People live in society with people with whom they feel connected. Children and youngsters follow broadly accessible, regular education, which contributes to their development. Everyone is educated in fields in which his or her interests and ambitions lie. People have respected activities or occupations in society and feel they are appreciated employees.
People participate in and contribute to the social, cultural, religious and recreative life (concerts, cafes, clubs, churches, associations, sports events, etc.) in society. They use welfare and health facilities in the local community. People have the same rights, opportunities, and responsibilities as other citizens, also in the areas of marriage, having children, voting, sterilization, organ donation, euthanasia, etc. [italics added]

If Kröber and Van Dongen cited this quote accurately, they have adopted for themselves a very mixed operational definition of inclusion, one which incoherently combines elements of the good things in life (as advocated by Social Role Valorization) with facets of the “culture of death” so avidly promoted in Dutch society. Sterilization, organ donation and euthanasia are indeed legally protected rights now “enjoyed” by all Dutch citizens. One might safely infer that that ominous etc. tacked on at the end of the above quote tacitly endorses such other “rights” in the Netherlands as to be aborted before birth and to be suicided-by-physician or starved to death after being born. Indeed, the advocate Wesley J. Smith has noted that:

Bureaucracy has trumped morality in the Netherlands. How else can one explain a country where, when doctors admit publicly that they commit eugenic infanticide, the leaders’ response is not to prosecute them for murder, but instead to urge that guidelines be created under which future baby killings can openly take place? (March 2005)

Death-making by the above (and yet other) means is explicitly identified in SRV training and literature (e.g., Wolfensberger, 1995, 1998) as one of many common wounds inflicted upon societally devalued people. If the society in which such people live has normalized a common “right” to be made dead, its vulnerable and devalued citizens will not only experience that right, but be prioritized to do so. In 2002, The Netherlands became the first country in the world to legalize the “right” of terminally ill patients to die by so-called euthanasia. This right has since been extended to pretty much anyone who says they want to die and to those who have doctors who think they should die. Thus, people who are sick, elderly, handicapped or otherwise devalued will disproportionately be expected and encouraged to exercise this right, or will have others exercise it upon them. Further, it will be portrayed as a blessing and a mercy for them because they lack or are losing their “quality of life”–which brings us to the next point.

The authors make matters worse by their uncritical acceptance of the “quality of life” concept. In asserting that “inclusion is an important component of quality of life” (p. 33), they are hitching onto a malevolently seductive ideology. Judgments that some people actually have low or even no “quality of life” is a literal death sentence for them. Yet, this phrase itself is scattered throughout the book. To give the authors the benefit of the doubt, they–like most other people–may be unaware that “quality of life” as a descriptive term morphed from its original usage in the 1960s (in the US) as an index of general ecological conditions into its present day usage as a legally and medically accepted reason for making people dead. However, this history and its implications for devalued people was compellingly reported by Wolfensberger nearly two decades before this book was published. Wolfensberger called “quality of life” a “hopeless term” (1994)! And, I believe, he meant hopeless in more ways than one. For one thing, it has generated a mare’s nest of hopelessly futile formulas for measuring whether certain human beings have enough quality in their life to warrant their continued existence; for another, it signals an absence of ultimate hope—a kind of anti-hope—in those who invoke it to justify their death-makings.

The aforementioned normalization of “quality of life” ideology and concomitant processes of life-ending measures in The Netherlands (and elsewhere) illustrates in the clearest possible way
a quintessential difference between SRV and normalization. The latter aspires to providing living conditions “at least as good as the average citizen.” If the average citizen gets awarded a “right” to euthanasia in The Netherlands, then Dutch advocates of the normalization principle, and of Kröber and Van Dongen’s inclusion, could not logically opt out of it. Not so for SRV adherents: SRV aspires to the good things in life, of which being made dead is not one.

Some may think it unkind, if not unwarranted, to criticize a book whose authors seem genuinely determined to do right by mentally retarded people. Kröber and Van Dongen obviously devoted considerable thought and scholarly effort to producing this work, which itself is an effort to drag their fellow countrymen forward into a more positive vision of their handicapped compatriots. They bring to bear much empirical data and technocratic logic demonstrating the rightness of “inclusion” over segregation, and are to be commended for a good faith effort. It is simply unfortunate from my perspective that they do not speak at all to the grave dangers to mentally retarded people that lay barely beneath the skin of their adopted version of “inclusion.” Perhaps, they did not recognize these dangers or under-appreciated them. Or, perhaps, they believe that “inclusion” is the answer.

ENDNOTES

1. Kristjana Kristiansen, a professor at the Norwegian University of Science and Technology in Trondheim, Norway, has long taught and promoted normalization ideas, and maintains ties with like-minded colleagues in Europe and elsewhere.

2. That is, “personal social integration and valued social and societal participation.”

3. Nor is normalization per se mentioned, but there is (on p. 59) one very brief reference to Nirje (1969) as well as to Wolfensberger’s classic book on the principle of normalization (1972).

4. Perspective Foundation, described as a Dutch organization that conducts “quality of life” evaluations.

5. A reference to the so-called “Groningen Protocol.”

6. Such as air quality, clean water, variety and abundance of food, sanitary conditions, and the level of public health and health care experienced in common by the population in a particular locale.

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Reviewed by Marc Tumeinski

FROM the article abstract:

Although people with intellectual disabili-
ties (ID) are increasingly expected to relo-
cate from traditional institutional care to ‘regular’ neighbour-
hood housing facilities and socially integrate in these neigh-
bourhoods, little is known about how they are perceived and appreciated as neighbours. This paper reports on interviews carried out with 30 neighbours without ID who were neighbours of small-scale care facilities for people with ID. Interviews addressed the neighbours’ everyday experiences of neigh-
bouring in general, and neighbouring people with ID in particular.

The article is relevant to, and worth reading and analyzing from the perspective of, the Social Role Valorization theme of personal social integration and valued social and societal participation (PSI/VSP). In his text A Brief Introduction to Social Role Valorization, Wolfensberger described PSI/VSP as requiring “(a) valued participation, (b) with valued people (c) in valued activities that (d) take place in valued settings” (Wolfensberger, 1998, 123). In longer Social Role Valorization (SRV) training events, and in other publications (e.g., Lemay, 2006), PSI/VSP is clearly tied to the necessity of a devalued person having socially valued roles, preferably broad bandwidth valued roles (Wolfensberger, 1998, 31).

Below are several questions and points, drawn from my reading of the article, which would be worth considering both in terms of teaching SRV and PSI/VSP—in longer SRV workshops and in PASSING workshops, as well as in related trainings—and in terms of applying SRV and PSI/VSP.

• What is entailed in the role of neighbor (in the residence or domicile role domain; cf. Wolfensberger, 1998, 30), in regard to: responsibilities, behaviors, expectations, privileges, image and competency enhancement, integration and participation, access to the good things of life, etc.? (Wolfensberger, 1998, 25, 44; Wolfensberger, Thomas & Caruso, 1996)

• In the study reported in the article, neighbors who were interviewed described the barrier of high turnover among staff and among residents of the ‘small-scale care facilities,’ thus making it more difficult to sustain the role of neighbor and any neighbor-to-neighbor relationships. High turnover, and physical-social discontinuity (Wolfensberger, 1998, 19), are issues raised in SRV training and application. What can be done about this prevalent pattern in services? What non-programmatic issues (Wolfensberger, 2012; Thomas, 2012) contribute to turnover and discontinuity? What can help to reduce staff turnover? What can help to reduce discontinuity for the people served? Are services willing to work on these issues, to take necessary steps and to commit sufficient resources?

• Neighbors mentioned some barriers to the neighborhood visibility of adults with impairments, including:

* Features of the physical settings of group residences that are atypical (e.g., high fences) as well as the absence of expected features (e.g., driveways, gardens) which could provide opportunities for interaction (e.g., Wolfensberger & Thomas, 2007, R1131 External Setting
Appearance Congruity with Culturally Valued Analogue). What can be learned from looking at the culturally valued analog (Wolfensberger & Thomas, 2007, 30-31) of home in regards to this issue? For example, how can services and staff, even fairly inexpensively, create areas (e.g., gardens, patios with seating, outdoor benches, etc.) in residential settings that invite interaction with neighbors? What sorts of things can adults with impairments (with any necessary support) do around home and neighborhood that might create occasions for interactions with neighbors (e.g., yard work, grilling on the barbecue, washing the car, going for a walk, etc.)?

* The adults with impairments spending most or more of their time in segregated activities arranged by a service organization.

* Spending most or more of their time in groups with other adults with impairments, making it more likely that they would be perceived as part of a group rather than as individuals (Wolfensberger & Thomas, 2007, R2211 Competency-related Intra-service Recipient Grouping-Size; R1231 Image Projection of Intra-service Recipient Grouping-Social Value).

* Neighbors also mentioned a difficulty in how to perceive staff: Are they neighbors? How should we treat them?

* One common concern was around a (perceived) difficulty in engaging in small talk with adults with impairments, e.g., often neighbors felt such conversations were one-way. This brings up the importance of competency enhancement (e.g., learning in typical ways in typical settings with typical people how to carry on small talk, especially through modeling and imitation) and of how people with impairments are supported to spend their time (e.g., are they actually doing things and engaging in roles and activities that would be of interest to others to hear about?).

* Neighbors described part of their expectations of the neighbor role as being able to ask a neighbor for help in small-scale matters, which necessarily involves a certain expectation of reciprocity. This was a matter of balance: asking for too much or asking too often was seen as going beyond the role of neighbor. Neighbors however felt it difficult to ask staff or the adults with impairments for help, partly because they did not know them well enough. As well, neighbors had low expectations of reciprocity from adults with impairments. They also felt discouraged from offering to help (e.g., to accept a delivery) because staff were always present and took care of all such necessary tasks. In light of the above, servers would do well to consider their own roles: are they doing things that are barriers to personal social integration and valued social and societal participation (Wolfensberger, 1998, 122-124)? What might they do differently that would invite contact and positive interactions? Again, the culturally valued analog of home and of neighborhood would provide a good starting place to consider this issue.

* Neighbors reported on fairly regular incivilities (e.g., noise from large agency vehicles and motorized lawnmowers, parking issues with agency and staff vehicles, traffic nuisances, etc.) which created further barriers to PSI/VSP. This would seem to be a fairly obvious and not insurmountable obstacle for services to address. Some of it would perhaps naturally be minimized if the numbers of socially devalued people grouped together in residential settings were kept small (Wolfensberger & Thomas, 2007, 133-136, 333-337).

* The article emphasized the key role which staff could play in mediating interactions and relationships between neighbors and people with impairments. Is this something servers can become
better prepared to do? What would be relevant competencies, skills and habits for servers (e.g., listening, observing, clear communication, etc.)? What would be relevant mindsets and expectancies for servers to hold? And so on.

• Finally, the article indicated that the desire to spend time with neighbors is typically motivated by a human desire for company, but the neighbors interviewed saw spending time with adults with impairments who lived in the neighborhood as more rooted in a duty to do good for disadvantaged people. This is understandable, and perhaps is not necessarily a bad place to start from—it may even be a value that servers can capitalize on to the benefit of devalued people—though not to be satisfied with. A related problem is neighbors perceiving themselves as volunteers for impaired people rather than simply as neighbors.

The above points can provide good starting material for reflection and consideration, to those teaching SRV and those trying to apply SRV. We welcome your comments, questions, strategies and success stories—as well as lessons learned from ‘failures’—in supporting PSI/VSP, specifically around the valued social role of neighbor.

ENDNOTE

1. My thanks to Jane Sherwin for bringing this article to my attention.

REFERENCES


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THE CITATION FOR THIS REVIEW IS


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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:


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


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