A Brief Introduction to Social Role Valorization – an approach to Creating Effective Respite Programs

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Adapted from Dr. Wolf Wolfensberger
Our Society Today Places High Value On:

- Wealth, Material Prosperity, and Material Goods
- Health & Beauty of Body
- Youth, Newness
- Competence, Independence, Intelligence
- Productivity, Achievement
- Individualism & Unrestrained Choice
- Hedonistic/Sensualistic Pleasure
A Working Definition of Social Devaluation

The Attribution of LOW or even NO Value to a Person or Group by:

- Another Person or Group
- On the Basis of Some Characteristic (Usually a Difference)
- Perceived as Negatively Significant by the Devaluer
The Process of Devaluation

- Persons with Devalued Characteristics
- Become Socially Devalued
- Cast Into Devalued Social Roles
- Rejected & “Distantiated”
- Symbolically “Branded” as Devalued
- & Oppressed, Punished, Brutalized
My Most Favorite “Devalued” Person

1. Age
2. Sex
3. Sexual Persuasion
4. Social Status/prestige/role
5. Disability (type/level)
6. Physical form (size, weight, height)
7. Education
8. Financial/Economic status
My Most Favorite “Devalued” Person

9. Race/Ethnicity
10. Physical Appearance
11. Dress/Grooming
12. Living Situation
13. Work Situation
14. Language capacity/dialect
15. Religion/faith/value system/belief
16. Criminal record
Social Devaluation: Some Factors

- Unconscious or Conscious
- Random or Systematic
- To a Person or to a Group
- Universal – Happens All Over the World
- You are not Protected – Everyone Devalues
- People who are Vulnerable can Devalue as well
Devalued Roles

1. Non Human – Animal, Vegetable, Object
2. Menace, Object of Dread
3. Waste Material, Garbage, Discard
4. Object of Ridicule
5. Object of Pity
6. Object of Charity
7. Child – Eternal/Once Again
8. Sick/Diseased
9. Dying, or Already Dead
10. Commodity
Devaluation & Respite Care

- What does it mean for the caregivers and individuals accessing respite care?
- What does it mean for how we think about and create socially valued and responsive services?
What Do People Really Need?

- Choice
- Control
- Permanency & Security
- Individuality
- Relationships
- Privacy
- Passion
- Citizenship
Let’s think about it…

- How does your respite program add to what people really need / or at the very least not impeded it?

Give us an example…..
Common Non-Programmatic Reasons for Doing Things in Human Services

- Legal
- Political
- Funding

Historical

Servers & Other Relevant Actors
Social Role Valorization (SRV)

Wolfensberger’s 1998 SRV Theory

“The application of what science has to tell us about the defense or upgrading of the socially-perceived value of people’s roles.”

Helping people have the good things in life that everyone wants
Roles Exist from Birth to Death and Change as one Ages

Age Range: Child-Teen- Adult- Older Age

Roles: Playmate – Student – Athlete- Hobbyist-
Friend – Worker – Spouse- Parent - Retiree
10 SRV Themes

1. The Issue of (Un) Consciousness
2. Positive Compensation for Disadvantage: The “Conservatism Corollary”
3. The Dynamics of Interpersonal Identification
4. The Power of Mind-Sets & Expectations
5. Symbolism & Imagery Use, transfer, Generalization, & Enhancement
6. Service Model Coherency, With its Constructs of Relevance & Potency
7. Developmental Model & Personal Competency Enhancement
8. The Power of Modeling & Imitation
9. The Power of Role Expectations & Role Circularity in Deviancy Making & Deviancy Unmaking
10. Personal Social Integration, & Valued Social & Societal Participation
1. The Issue of Unconsciousness

The Role of Unconsciousness

- Reasons for this – fear, us/them
- Sugarcoating Reality
- All Social Change Movements are about Consciousness Raising
- So Much of Human Service Practice is Unconscious
- What is your level of consciousness?
The Role of Unconsciousness in respite care

- Are there actions you take or decisions you make in the acquisition or provision of respite care that don’t make sense to you?
- Things you do because “it’s always been done that way”?
- Things you don’t want to change because you don’t want to “rock the boat”?
- When your consciousness is raised do you modify what you do?
  - i.e. deciding how you enroll participants
2. The Conservatism Corollary: Bending Over Backwards

- Typical/Normal/Statistically Common options
- The Normal Curve as an Example
- Thinking Out of the Box and on the positive side of the curve
The “Normal” Curve

Social Role Valorization

Statistically Common

Typical
Prevalent
Expected

Less Common & Negatively Valued

Less Common, But Highly Valued

CONSERVATISM COROLLARY
Do you provide care in ways that reach beyond traditional services?

- A children’s program in an integrated camp setting
- Volunteers who serve as mentors
- A Friday “Senior Men’s Club”
- Pizza and a movie at a local university
3. Interpersonal Identification

People Who Identify With Others Will generally:

1. Want Good Things for the Others
2. Want to be With the Others
3. Communicate Good Things About the Others
4. Want to Please the Others; Do What They Ask
5. Possibly Want to Be Like Them
2 Interpersonal Identification Strategies of Special Relevance to SRV

1. Getting Privileged People to See Themselves in People Who are Devalued/At Risk

2. Getting Devalued People to Identify With Persons of Adaptive Identity, & Look to Them as Models
Strategies for Fostering Interpersonal Identification through respite:

1. Improving the Approachability of Each By the Other (e.g., Less segregation/congregation)

2. Improving the Likelihood That When Contact Occurs it is Experienced As Positive (respite is a break not therapy)

3. Finding & Emphasizing Commonalities Shared By the Parties (e.g. respite providers are matched based on common experiences rather just need)

4. Fostering Each person’s Sense of Responsibility for the Other (e.g. family caregivers and respite providers share the responsibility for and the benefits of the respite)
4. The Power of Mind-Sets & Expectations

1. How People Perceive & Value Each Other
2. What is Good or Bad for People
3. What is the Good Life
4. What People Need
5. How Needs Should be Addressed
Respite provided with positive expectations and mindset may look like

- High expectations of what is possible, but not necessarily traditional!
- A value and belief in the people providing the care
- A value and belief in the capabilities of the people receiving the care
5. The Power of Imagery

- Imagery can be positive or negative
- "Deviancy Image Juxtaposition" – What a mouthful!!
- Factors to Consider- physical setting, grouping, personal imagery, language, activities, other (e.g. funding, logos)
- The Impact of Negative Imagery
- Making a change in imagery can safeguard people
Remember, imagery can be positive OR negative...like this one
Or this one....
Clarity Care offers residents a chance to meet Santa

Clarity Care's very own Santa Claus made an early visit to developmentally disabled adults at a holiday celebration called "CHANCE To Meet Santa" held at the Gruenhagen Conference Center on the UWO campus on Wednesday, December 22nd. Along with food, fun, and festivities, Christmas stockings sewn by "Wisconsin Warmers" were distributed by Santa, filled with gifts including fleece scarves made by UWO students.

The event was part of a new program called CHANCE, a unique collaboration between Clarity Care and UWO student volunteers to provide enrichment programming for developmentally disabled adults. "CHANCE To Meet Santa" was one of the recent offerings along with "CHANCE To Make Cookies," and "CHANCE To Sing Carols," both held earlier in December. For more information about the CHANCE program, contact Kurt Johnson, Director of Program Development at Clarity Care at (920) 236-6560.

Clarity Care is a nonprofit organization that provides services for individuals with limitations or disabilities so they can achieve independent and fulfilling lives in their community. Learn more at www.claritycare.org
BUT! Check this one out…

FedEx
Imagery & Respite Care

- Using caregivers who are enhancing to the person’s image ~ i.e. college student paired with young adults
- Providing care in a valued setting such as a community building, retreat center or one’s home
- Logos and taglines that focus on respite as sign of building strength rather than as a weakness
6. Model Coherency

- Who Are The People to be Served?

- What Do They Need?

- What would ideally meet those needs? Who, when, where & how should those needs be addressed?
Some Typical Major Models Which May Be Encountered in Respite Care

1. Medical: care provided in “swing” units on hospital wards even if someone is not acutely ill
2. Behavioristic: Respite that is given as a reward or punishment
3. Developmental: Respite as an extension of program goals for family caregiver & individual
Is Your Respite Model an example of Model Coherency?

- Are you looking at your audience and asking who they are and what they ideally need?
- Are you creating an environment about people not necessarily programs that ideally addresses those needs?
- We can acknowledge that in today’s economy, even the most coherent models may struggle
7. The Power of Growth & Personal Competency

- Life is about Growth and Competency
- Humans Thrive on challenge, work, meaningful relationships, natural consciousness, commitment to society
- Respite programs identify their missions as such
How do you ultimately define success with respite?

- Is it about getting a break?
- Length of relationship with care provider?
- Number of service hours?
- Number of people served?
- Improvement in health of individual or family care giver?
- Are the soft outcomes as important as the hard outcomes?
What’s your “it”

- What is “it” that you do?
- Who do you do “it” for?
- What impact does “it” have?
- How do you know?
Tell us about it…

In 45 seconds or so ~ tell us

What is **it**?

How do you do **it**?

Does **it** make a difference?

How do you know **it** changes families lives for the better?

• Your elevator pitch should flow like this….
  • Introduction (who are you and your program)
  • What is your service / intervention (i.e. your”it”)
  • How you do it and for whom (inputs and target population)
  • How you know when it’s effective (your outcomes)
  • How you know this to be true (how do you measure it. You may want to say “our data shows us that”… or…”Research has shown that this strategy is effective with our target population because”….)
8. The Power of Modeling & Imitation

- One of many learning methods is imitation
- It costs little or nothing to practice
- The power of mentors, role models
- Positive versus negative imitation
- Other factors influencing Imitation – consciousness, valued roles, inclusion, positive imagery
9. The Power of Roles

- No Devalued Roles

- Feedback Loop – Negative/Positive

- Help People Enter Valued Roles - Factors Determining Role Perception – physical setting, language, grouping, activities, other images
Feedback Loop (+ or -)

Social perception & \textit{expectancy}, stereotype

Conforming role \textit{performance}

Strengthened role \textit{performance}

Strengthened role perception & \textit{expectancy}, even stereotype
The Power of Roles

• Identify roles for yourself

• How do your roles impact the circles of support / relationships around you?

• What happens when you lose a role?
Carrying the Bricks of devaluation
Roles affect every aspect of the respite relationship

- In an ideal situation the family caregiver gets a culturally valued break
- the individual receiving care thrives in the context of the positive relationship
- the respite provider feels the satisfaction of a job well done (receiving as much as he or she is giving)
- and the community as a whole benefits.
10. The Importance of Inclusion, Friendships & Relationships

- What is Life without friends?
- Bought/Artificial Friends
- Freely Given Friendships
- Crossing the River to the Community
- Life with Friends
5 Concepts that are Important in SRV as you Envision Respite Services

✓ Competence Enhancement – What are you doing to increase people’s skills and abilities?
✓ Image Enhancement – What are you doing to image people positively?
✓ Culturally Valued Analogue – What You Would Expect People Who are Valued to Use?
✓ Age-Appropriate/-Inappropriate – What is Appropriate for a Particular Age?
✓ Culture-Appropriate/-Inappropriate – What is Appropriate for the Culture (needless of age)?
Mission and Vision

- Should reflect who you are and what you do (your “it”) in a manner that promotes social value to the people that you serve.

- Let’s look at an example…