The 'Undisclosed' Subject of Normalization

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Abstract

The article is an attempt to present one of the most known concepts of disability, which, since the 60s of the 20th century, has been a significant and frequent subject of theoretical analysis as well as has been the hint in constructing the social policy or the organization of the welfare system for the disabled both in Poland and all over the world. In the article the American model of normalization will be presented and its deconstruction. Disclosing the problems concerning the theoretical assumptions of the concepts of this model allows for perceiving the way in which society constructs the subject of a disabled person.

Keywords: *disability, normalization, 'Undisclosed' Subject*

Introduction

In social sciences, the notion and conception of normalization have been present since the 1960s. This is one of those conceptions which have been exerting a significant influence upon the determination of the directions of research, social policy and the organization of the system of support, in particular, in the case of individuals with intellectual disability both in Poland and in foreign countries. In the course of the last fifty years, normalization has been defined in various ways. Therefore, as expressed by Eric Emerson, we are facing a situation 'in which there is not a single notion, or a set of principles, concerning normalization', but rather the entire space of normalization (Emerson, 1992, p. 1). Particular definitions possess common characteristics, but they differ in dependence upon the theoretical premises adopted by their authors, or, even, in terms of a political

attitude in a given country. The notion and foundations of those conceptions were developed in the Scandinavian countries. One of the authors of the conception of normalization was the Danish politician, Niels Bank-Mikkelsen, the head of the Danish agency, working in the field of the provision of assistance for individuals with intellectual disability. It was thanks to him that, in 1959, in Danish legislation (Danmark: law, 1959), the following postulate appeared: '...providing individuals with intellectual disability and learning disorders with the possibility of living their lives in a manner as similar to the 'normal life' as possible' (Bank-Mikkelsen, 1969, p. 59). The following 'founding father' of normalization was Bengt Nirje (1970; 1976; 1980; 1985). Nirje developed the principles of normalization, in which he indicated that, simultaneously with diagnosing an intellectual disability in the case of a child, there takes place the process of distorting his or her life experience in connection with the child becoming subjected to the actions of special-purpose rehabilitation establishments. Into the fundamental characteristic of the institutionalized rehabilitation environment, the author included the following ones: the daily rhythm, the weekly rhythm and the annual rhythm, not taking under consideration individual preferences, segregation connected with sex, restrictions in learning to know the normally-applicable economic standards and facilitating measures in the environment (Nirje, 1980, pp. 31–49; 1985, pp. 6–68). Both Nirje and Bank-Mikkelsen also supported the idea of the integration of individuals with an intellectual disability, but the integration, in their opinion, is of secondary importance in comparison with the issue of normalization. The discussed approach to normalization is defined in the literature as the Scandinavian model, and it was negatively assessed by the German psychologist from the University of Nebraska, the USA, Wolf Wolfensberger (1980a). Wolfensberger, considered to be the author of the second model of normalization, defined as the American model, subjected both the approach of Nirje and that of Bank-Mikkelsen to a critical assessment as ineffective, because of 'striving to achieve the normal conditions of life only.' Wolfensberger (1980a; 1983) put forward the changed interpretation of the Scandinavian model of normalization and based this model upon the conceptions of citizens' rights and contemporary social-political ideals present in American society. As a result of that, he brought about the transformation of the model of normalization from actions the objective of which was the creation of conditions the same as those possessed by other people (Wolfensberger, 1972, p. 8) into a conception consisting in '...the application of measures maximally compatible with the norm of culture in order to initiate and/or maintain the behaviors and the characteristics of an individual compatible to the highest possible degree with the standards of the culture.' In the author's opinion, the principle of nor-

malization ought to be referring to taking advantage of normal environments, expectations and procedures 'for setting and maintaining behaviors which are as normal as it is only possible in terms of culture' (Wolfensberger, 1980b; Dubois, 1988). Wolfensberger also emphasized that the methods taken advantage of in normalization ought to be compatible with general standards prevalent in society (Wolfensberger, & Glen, 1973a; Wolfensberger, & Glen, 1973b; Wolfensberger, & Glen, 1975). Such a view made it possible to see disability in a new light; no longer are we dealing here with perceiving disabled individuals solely in the categories of a problem, but we notice the failure of society in the scope of guaranteeing such individuals the same rights and opportunities as those which are taken advantage of by other citizens.

As can be seen in the American model, the participation of intellectually disabled individuals in accordance with accepted norms is regarded as the most important marker of human dignity, as a manner of combating discrimination and building an integrated society, by, e.g., Peter Mittler (2000), Tony Booth and Mel Ainscow (1998); as a manner of gaining respect, equality and membership of a group by, e.g., Gary Thomas and Andrew Loxley (2001).

However, there arises a question concerning the justifiability of those assumptions, because, in accordance with this model, people who fail to integrate may experience difficulties in being 'appreciated'. Society may be treating them as other, and, speculatively, as 'inferior'. Therefore, it seems that the view put forward by Wolfensberger, in spite of its undeniable significance for the practice of rehabilitation, may be burdened by a significant flaw connected with the generating of an ever greater depreciation of disabled individuals, negative attitudes towards them and the greater social stereotyping of them.

In spite of the 'flaw' referred to above, consisting of difficulties in the appropriate view of the subject of normalization, the conception itself has not been subjected to a critical assessment for several years. The reason for that was the popularity of normalization, and its author, Wolfensberger, and also the role played by normalization in practice, and, first and foremost, in designing the system of services for the benefit of disabled individuals. A certain background for the discussion concerning the assumptions of the American model of normalization appeared simultaneously with the introduction of the social model of disability (Marks, 1999; Yates, Dyson, & Hiles, 2008). The principles disseminated in this model made it possible to notice that approaches focused upon the assimilation and adjustment of disabled individuals to society are not appropriate. In connection with that, the opinions promoting the social approach to disability came to be accompanied by those critics of normalization, indicating the necessity of taking actions

preventing the removing of individual differences between people, a tendency to homogenize, ensuring normality by equality in order to gain social acceptance. The critics referred to above and including, e.g., Hilary Brown and Jan Walmsley, pointed out the fundamental terror of normalization, namely, the assumption that compatibility is 'the condition of admission' to society. They emphasized that normalization in the American view assumed the rigorous conditions of normality and was more compatible with the ideals than being 'just neutral' because of a defined social value (Brown, & Walmsley, 1997). In connection with the above, in normalization, being 'other' was less demanded than being 'normal', and, therefore, the obligation of a disabled individual was to take actions aiming at becoming 'someone different than they are' (Morris, 1991). Apart from that, as emphasized by Andrew Culham and Melanie Nind, normalization in the American view required those 'other' individuals to become adjusted to an environment different from their own. It required becoming adjusted, and not discussion, or even questioning the patterns of thinking and policy which contributes to the negative perception of them (Culham, & Nind, 2003).

As a result of the critical assessment of the foundations of normalization, Wolfensberger adopted a different strategy, because he abandoned the term 'normalization' and introduced a new notion, 'social role valorization' (SRV) (Wolfensberger, 1980 a; 1980 b; Wolfensberger, 1983; Wolfensberger, & Thomas, 1983; Wolfensberger, & Thomas, 1988). The objective of such an attempt was to avoid the interpretations of the notion of normalization, as being controversial from the point of view of morality, and to indicate 'actual intentions' behind building normalization. These actual intentions were, in Wolfensberger's opinion, of cultural character. In reference to the 'new conception', Wolfensberger wrote that social role valorization is the name adopted for the notion of managing interpersonal relationships and social services. Social role valorization is the systematic model of supporting actions (Osburn, 2006, pp.4–13; Race, 1999; Race, & Carson, 2005). As pointed out by Susan Thomas, social role valorization is, as a matter of fact, one of the most extensively presented schemes of social services (Thomas, 1999). The reason for that is that this conception determines the principles and strategies of determining services and the means of practical actions. The principal objective of social role valorization, in Wolfensberger's opinion, is 'creating' or 'supporting' socially appreciated roles for people in their society, because, 'if an individual is in the possession of appreciated social roles, it is likely that he or she will receive so-called appreciated, valuable things in life, things which are available to this society and which may be passed on by them, from this society, or, at least, he or she will obtain an opportunity to gain those things' (Wolfensberger, 1983). The

degree of unanimity concerning the issue of what good things in life are, is a high one. Among the most important ones, there are home and family, friendship, possessing dignity, respect and acceptance, the sense of belonging, education, and also developing and practicing one's own capabilities, the right to have a say in the issues of one's own community and society, the opportunities connected with participation, the decent conditions of existence, at least the normative conditions of residence, opportunities to find a job and financial independence. In his theory, Wolfensberger indicates the two main strategies of social role valorization: (a) improving the social image of people, and also (b) increasing their competences, in the broadest meaning of this word. Improving the image and increasing competences result in a positive or negative cause-and-effect relationship. An individual who is not in the possession of competences has a negative social image, and this negative image results in being treated in such a manner which restricts and diminishes his or her competences. When an individual who has a positive social image and has several positive experiences and also such conditions which increase his or her competences. For this very reason, an individual who is in possession of social competences, also has a positive image and enjoys social acceptance. The conception of social role valorization within the scope of improving an image, or increasing competences, puts forward actions in the realm of four separate social levels, and that means at the following levels: individual (of an individual), basic social groups (of a family), social medium range systems (of a neighbourhood, local communities and provided services) and also within the realm in general range social systems (of the entire system of services, society and state) (Thomas, 1999; Wolfensberger, 1980 a; 1983; Żółkowska, 2015).

Discussion

As can be concluded from the above-presented contents, the analysis of normalization and its continuation in the form of the conceptions of social role valorization makes it possible to disclose problems connected with the theoretical assumptions constituting the foundations of its conceptualizations. These are noticed within the area of subjectivity and the status of an individual subject. As can be noticed researching the contents referred to above, in normalization social influences, which exert impact upon an individual, restrict 'social competences', assign roles and shape the behavior of an individual, and, subsequently, the manners in which these competences and behaviors influence the social perception of devaluated groups, are placed emphasis upon. Social conditions determine the

extent of the self-identification of an individual, personal competences and behaviors, and, in turn, the competences in one's possession, the manner of presenting oneself and the behavior of an individual determine social activities. This results in the need for normalization in order to interrupt this cycle, ascribe appreciated social roles and ensure appropriate personal competences, resulting in positive social representations and relationships, in other words, this is about the replacement of a negative cycle with a positive one.

In connection with such assumptions, there arises the question: how is an individual/ man understood in the conception of normalization? As already mentioned above, it exists, first and foremost, as the embodiment of socially-created roles and competences, which it subsequently presents in the social sphere. An individual acting as the subject is undisclosed and understood as the product of social influences, which caused the possibility of adopting Wolfensberger's claim that 'disabled individuals are not disabled, that retarded individuals are not retarded, and that each and every disabled individual may do little less than everything, and be little less than everyone, if only he or she has received a sufficient expected role, and an opportunity (Wolfensberger 1983, p. 97). Albeit the author of this hypothesis himself maintained that emphasizing it did not reflect his actual views and that it was the work of the 'excessively zealous advocates' of normalization, this hypothesis shows the manner in which normalization conceptualizes man and the processes of his socialization. For this very reason, perhaps, we do not feel amazed by the fact that this view was sufficiently common for Wolfensberger (1983) to feel obligated to disprove. A more detailed analysis reveals that the claim being discussed is based upon assumption rather than upon precise experiences. It can be concluded from this claim that we deal here with man with 'some kind of disability', which makes it difficult for him or her to do little less than everything and 'to be little less than everyone', and that means, as a matter of fact, to be someone 'not disabled'. Therefore, we deal here with the rather 'indirect' implication of presence in the theory of an individual with significant disorders, which take place pre-conceptually, within the frameworks of biological 'reality' (Żółkowska, 2015). Therefore, a paradox appears. The initially-determined subject with significant and unquestioned 'disabilities' is undisclosed (at least, until the state of this subject becomes a controversial one). However, the existence of those, not encompassed by the conception, 'biological disabilities, is controversial in terms of normalization in connection with its assumptions relevant to priority. We remember that in normalization social influences are the most significant ones. Therefore, it is not possible to introduce the significant (biological) explanations of 'disability', which would substitute the importance of social influences upon which this theory is

based. Therefore, the presence of 'a disabled individual' is not clearly present in this theory, and, if need arises, it is freely added to the rest of it. The undisclosed character of the subject in relation to social forces which exert influence upon this subject results in the formulation of conclusions which have to be added to the conception and which are as follows: the socialization of competences, behaviors and roles is of such a large extent and is so effective that each and every 'disability' is conceptually absent (and that there is the possibility that 'disabled' individuals are not 'actually' 'disabled'). In connection with that fact, attempts to solve this problem consist in the adoption of the conceptual assumption of the existence of an individual with disabilities which exist prior to socialization (Culham, & Nind, 2003).

Conclusions

The analysis of the presented contents gives rise to the conclusion that the problem of normalization consists in its assumptions relevant to the construction of an individual and of society, the assumptions which theorists are unable to either question, or to disprove. Such a situation, according to Julian Henriques and other people, is quite frequently observed in social sciences, because 'some norms have become the part of our common-sense based perception of reality to such a large extent that we have forgotten that these are the result of production' (Henriques, & others, 1998, p. 22).

Therefore, whereas normalization emphasizes the significance of social forces which diminish the value of people and contribute to exclusion, and it is incapable of reaching beyond the scope of the notion of 'disability' or 'difference' as significant, biologically important, within the frameworks of the pre-social conception of an individual. The constructions of 'difference', 'disability' or 'otherness' are not recognized by normalization; albeit they exist (even though in a speculative manner). This is that, to a large extent undisclosed, confidential character of an individual and his or her 'disability' that constitutes the reason for the critical assessment of it claiming that 'in normalization, disability is not referred to as something that might be appreciated for its own sake' (Szivos, 1992, p. 126). Normalization does not promote differences as values. On the contrary, it expresses the negation of the conception of difference in opposition to 'normality' or 'social value'. This is the result of difficulties which are experienced by normalization in relation to the deconstruction of one's own assumptions.

The aim of the presented paper is to show that there is a need for assessment of basic assumptions of the disability conception concentrated upon normalization, because this is still the most important and the most significant conception, in particular, in the practice of rehabilitation. However, I want to attract attention to the fact that accusations against normalization are in concord, to a degree, with some of the views of critics of the social model of disability. For instance, Bill Hughes and Kevin Patterson are of the opinion that concentrating solely upon social influences in the 'production' of disability 'passes on the body-related aspects of disability to the reactionary and oppressive discursive space' (Hughes, & Patterson, 1997, p. 328). In turn, Dan Goodley emphasizes that developmental disorders, conceptually differentiated from socialized disabilities, are treated only and exclusively as medical or psychological problems which can be 'eliminated or rehabilitated' (Goodley, 2001, p. 209). For the functioning of disabled individuals, it is also of importance what people themselves struggle with in relation to 'the truth', which defines them, what kind of behavior they display, how they are shaped for the purpose of managing their own lives. Therefore, it is important how they create their own subjectivity, and what kind of problems they encounter in this sphere, because it is through the identification of this struggle rather than through determining what is good, and what is not good for them, what is normal, and what is not, that important challenges for special education emerge. It is about creating space for 'struggle for subjectivity', the space which will be encompassing both disabled individuals and everyone who is involved in research into these issues, because we have to remember that both parents and teachers, those in charge of upbringing and therapists alike, also exist in the relationships of power, subjectivity and self-government. Therefore, they ought to be provided with the opportunity to understand the forces which shape, among others, disabled individuals, but which also shape those referred to in the previous sentence, their identity and also their own actions. I hope that the remarks contained in this paper will open a new space for the subjectivity of disabled individuals, and that it will encourage those who are inclined to collaborate with them to research these problems and find their own solutions to them.

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