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Joyleen Thomas
Manager, Better Practice Project.
INTRODUCTION

Why a Handbook about valued roles for people in receipt of community support?

Helping a devalued person to find or keep a valued social role is the most important goal of any organisation or individual who cares about a devalued person or group of people.

The Better Practice Project has been providing support, information, training, resource development, mentoring and consultation with Home and Community Care services in South Australia since 1997. The project helps to develop and support service models that enhance the citizenship, roles and life strengths of the Home and Community Care target groups. These groups include older people, people with disabilities, people with mental health issues, people from diverse cultural and linguistic backgrounds and adults with other vulnerabilities.

A series of Handbooks have been produced by the Project to assist staff to think through the issues that relate to supporting people in a way that achieves these objectives.

This handbook helps to explain one of the key concepts that are crucial to helping people who require support to have a good life in the community — the importance of valued social roles.

The handbook explains what we mean by valued roles, why they are important, and how we can prevent the loss of roles, preserve and strengthen existing roles and assist people to find new roles. Supporting valued roles is something we can all do, in any job or place in community life. We can also assist people to avoid being perceived and treated in negatively valued roles. Whether we see someone for an hour a week, or live with them 24/7, there are actions we can take both big and small, that can support a person to maintain valued roles. Valued roles help people who are vulnerable to be accepted in the community, to experience a sense of belonging, and to be able to contribute according to their strengths.

When people are not supported to have valued roles in the community they can often find themselves being seen as a burden, a menace, sick or dependent, or sometimes even considered sub-human or better off dead. These are negative or devalued roles.

A recent report, Fact or fiction? Stereotypes of older Australians, summarised research on age discrimination in Australia. They found that many older people are subjected to jokes about ageing (the role of being an object of ridicule) and feel they are a burden on friends and family because of the issues associated with ageing. Older people in the media are most often portrayed as frail, weak, victims or in poor health. The most common words Australians use to describe the portrayal of older people in the media are forgetful, slow, frail, vulnerable, burden, grumpy and sick.
I would say these (deepest needs) include the need to know we have lived a useful life and that we have responded as well as possible to the needs of others, contributing to their wellbeing in whatever ways we can. Those are the great satisfactions of a life well lived.

This is an important point to ponder when we think about what is fulfilling for us, as well as for the people who may need our support to have a good life in the community.

For people to get the chance to develop to their fullest, people who care about them must also grow and expand their ideas about what is possible.

The importance of valued social roles was recognized by Dr. Wolf Wolfensberger and developed into the theory of Social Role Valorisation. We acknowledge here that much of the theoretical framework for this Handbook is drawn from Dr. Wolfensberger’s work and this is elaborated on more fully in the tribute at the end of the Handbook.

A 2009 Report SHUT OUT: The Experience of People with Disabilities and their Families in Australia found similar experiences for people with disabilities. Submissions identified exclusion and negative social attitudes as critical issues. The consequences for people of having these devalued roles in the community were evident.

People with disabilities and their families, friends and carers reported daily instances of being segregated, excluded, marginalised and ignored. At best they reported being treated as different. At worst they reported experiencing exclusion and abuse, and being the subject of fear, ignorance and prejudice.

What is our vision for people who need support to have a fulfilling life in the community? It is about having opportunities to be contributing citizens and community members. As we work in various ways to support people to live in the community, how can we go beyond just meeting basic needs, and in whatever small way, assist people to fulfill their deeper needs? As Hugh Mackay says in his book The Good Life:
Do you feel unsettled and even outraged by the kind of ageism and discrimination described in such reports? Have you observed the devaluation and marginalisation of some groups of people in your community and in your work? Are you concerned about how difficult it is for certain groups in our society to get a decent life? This Handbook invites you to imagine an alternative life for people who may be marginalized in our community.

If our vision is that all people can experience the good things in life, especially those who are marginalised in our community, then we propose that the chances of this occurring will be increased if we support people to gain and maintain valued social roles in the community. Through valued roles there is the opportunity to experience a lifestyle that others take for granted, where life has meaning and purpose, where people are accepted by other community members, experience a sense of belonging and are able to make a contribution to society. This is often referred to as ‘the good life’.
Often the concept of a ‘good life’ is seen as too personal and subjective to define accurately. However, it is possible to identify the elements of a “good life” that bring together a range of universal things that the vast majority of people would desire.

There is generally broad agreement in Western cultures that the good things of life typically include such things as having a home, spending one’s time meaningfully, loving and being loved, having a range of relationships, contributing, having control over things that matter, safety and financial security. The importance of the deep feeling of belonging and acceptance is a human need and thus is shared by all. The feeling of deep fulfillment that comes from having a love relationship of trust, respect and deep liking is a gift, human to human.

While there will always be some differences across cultures, religions and personal values, we are often too quick to point out the differences instead of focusing on the remarkable similarities we humans share.

The following are 17 core things that research across various cultures have shown that the vast majority of human beings would associate with a good life:

1. A family or an equivalent intimate group
2. A place to call home
3. Belonging to an intermediate but still relatively small scale social body e.g. tribe, clan, neighbourhood, local community.
4. Friends
5. A transcendent belief system
6. Work, especially work that can be invested with meaning
7. A reasonable sense of safety and security
8. Opportunities that enable one to discover and develop abilities, skills, gifts and talents
9. To be viewed as human and treated with respect
10. To be dealt with honestly
11. A reasonable assurance that one will not be a victim of gross injustice
12. Being treated as an individual
13. Having a say in important decisions affecting one’s own life
14. Access to places of normal human interaction
15. Access to many of the ordinary activities of human social life
16. Being able to contribute and have those contributions recognised as valuable
17. Good health
Positive Psychology also addresses the concept of a good life, but is concerned less with these practical needs and more with how one spends one’s time. Martin Seligman defines a Good Life as: “using your signature strengths to obtain abundant gratification in the main realms of your life”. He then goes on to extend that aim, saying if we want a meaningful life, it is also about using your signature strengths and virtues in the service of something much larger than just your own gratification. This fits in with Hugh Mackay’s point that one of our deepest needs is the need to know that we have lived a useful life and responded as well as possible to the needs of others.

Using your strengths to benefit others comes from the opportunity to have contributing roles. It is important to open up our idea of contribution when thinking of life in this way. It might be difficult for some to imagine how a person with severe dementia or a severe disability can contribute to society, however there are many ways that people can contribute through their presence and through the thoughts and feelings that they invoke for others. For example, they may teach others patience and gratitude, encourage intergenerational interactions and appreciation, educate others on what can be done in spite of a disability, inspire others and promote compassion and acceptance in the wider community.

Seligman’s three levels of happiness:

**THE PLEASANT LIFE**
**Pursuit of positive emotions**
Creating pleasant experiences increases positivity which creates resilience.

**THE GOOD LIFE**
**Pursuit of Engagement**
Being fully engaged, working to our strengths, actively learning, participating in decision making, being respected and envisioning a future.

**THE MEANINGFUL LIFE**
**Pursuit of a purpose higher than oneself**
Contributing to something truly meaningful to ourselves and to others. Speaks to a larger sense of purpose.

The Australian Unity Wellbeing Index is based on average levels of satisfaction with various aspects of personal life including:

- Your health
- Your personal relationships
- How safe you feel
- Your standard of living
- What you are achieving in life
- Feeling part of the community
- Your future security.

This index arose out of a dissatisfaction with using only economic indicators to measure our well-being, and extensive research found that these seven areas are the important indicators of how individuals see their well-being.
Martin Seligman’s more recent theory moves more towards this idea of wellbeing also. He postulates that there are five key elements that contribute to wellbeing, illustrated in this diagram.

So as you can see, there is much research that has and is being done on a good life, a meaningful life, happiness and wellbeing. Whichever way you prefer to conceptualise a good life, supporting valued roles is a strategy for getting more of these things in people’s lives.
Some definitions of ‘roles’ are:

“Roles are a socially defined combination of behaviours, functions, relationships, privileges, duties and responsibilities that are widely understood and recognised within a society”.

A role is the function assumed or part played by a person in a particular situation.

“The concept of social roles provides a way to name people’s interdependencies. Roles identify the ways that people belong to each other, participate in exchanges with each other and expect reciprocal responsibility from each other. They identify the contexts in which people learn skills and perform skillfully and the areas of life where people can experience satisfaction and earn status.”

Social roles are identified as a socially expected pattern of:

- Behaviour
- Responsibilities
- Expectations
- Privileges

**ACTIVITY: What are roles?**

Think about some roles you occupy and name the associated behaviours, responsibilities, expectations and privileges in the table below;

<table>
<thead>
<tr>
<th>Role</th>
<th>Behaviours</th>
<th>Responsibilities</th>
<th>Expectations</th>
<th>Privileges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>Speaking in front of a class</td>
<td>To keep children safe</td>
<td>To educate children</td>
<td>School holidays</td>
</tr>
<tr>
<td></td>
<td>Working one on one with children</td>
<td>To teach the curriculum</td>
<td>To work collaboratively with parents and</td>
<td>Maternity leave</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To provide structure and discipline</td>
<td>colleagues</td>
<td>Great working hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>To be professional, polite and appropriate</td>
<td>To be contributing to children’s growth and</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>development</td>
</tr>
</tbody>
</table>

NEGATIVE ROLES

Most people have some roles that are not valued — we can have roles, such as “black sheep of the family”, or “troublemaker”, “reckless driver”.

Sadly, for people with disabilities, older people and other vulnerable groups in our community, their lives may have been filled with more negative roles than positive roles. This is one of the consequences of being seen as different from the rest of the community in a way that is not valued. This is what Wolfensberger calls _devaluation_. Devaluation results in many negative life experiences for older people, people with disabilities and other marginalised people, including rejection, segregation and being seen in negative roles.  

Wiersma states that, “Functioning in social roles signifies the person’s integration in his community.” So if a person is in valued roles they are likely to experience positive integration into his [or her] community. However, negative roles could lead to the experience of rejection and segregation from the community. These statements help us understand that when we are socialized into roles, we are learning the expectations held of us through being in these roles. This occurs throughout different life stages and social circles. The process of communicating role expectations and adopting roles is socialization. The people who surround us convey expectations of us and we respond to those expectations, especially from those with authority in our life. That authority may come the strength of relationship, such as with parents, or with the status, such as teachers or doctors. This process of socialization is one which all of us share and is, generally, a healthy and helpful process. However, for some this process can be disrupted by isolation or the experience of unusual environments as well as lowered expectations because of a label that tells us and those around us that we are different. In other words, people might be socialised into roles that are not positively valued through the low expectations of others, for example, the role of eternal child for someone with a disability.

People may choose or achieve roles (e.g. husband, volunteer bus driver, doctor). Roles might also be ascribed to or imposed upon the person (Aunty, sick person). Roles can play a large part in someone’s life (e.g. being a mother or our occupation), while others are less significant in the time they take up (e.g. recreational netball player, voter). Roles can be both positive/valued (Mayor, business owner) and negative/devalued (bogan, unemployed).
POSITIVE ROLES

On the other hand, positive/valued roles are what make life worth living. Valued roles come in many forms:

- Relationship roles (family member, friend, spouse, neighbour, cousin)
- Work/occupation roles (colleague, supervisor, receptionist)
- Education roles (student, classmate, library monitor, camp go-er)
- Community roles (club member, sporting team member, community choir member)
- Leisure and interest roles (gym member, patchworker, golfer)
- Cultural roles (elder, church member)
- Citizenship roles (voter, local council member, neighbourhood action group)
- Household/Residence roles (home owner, tenant, gardener, cook).

It is through these valued roles that we increase the likelihood that we will gain access to the good things in life, as outlined in the Good Life section.
WHAT ARE ROLES?

MAJOR ROLE DOMAINS

We have roles in many different areas of our lives. The diagram below depicts major role domains.\textsuperscript{18}

The following table illustrates these major roles domains with positive and negative examples\textsuperscript{19}

<table>
<thead>
<tr>
<th>Common Role Domains</th>
<th>Positive Role Examples</th>
<th>Negative Role Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationships</td>
<td>Wife, husband, parent, grandparent, friend, brother, sister, son, daughter, aunt, uncle, fiancé</td>
<td>Old maid, orphan, black sheep of the family, loner</td>
</tr>
<tr>
<td>Work / Education / Occupation</td>
<td>Worker, employee, colleague, supervisor, apprentice, employer, breadwinner, business owner, student, scholar</td>
<td>Scab, dole bludger, bum, special needs student, illiterate, bully, burden to class</td>
</tr>
<tr>
<td>Community</td>
<td>Community activist, club member, volunteer bus driver</td>
<td>Pest, Know-it-all</td>
</tr>
<tr>
<td>Leisure and Interest</td>
<td>Choir member, sporting team member, music-lover, dancer, book-lover, musician, athlete, competitor, coach, fan, cheerleader</td>
<td>Bad sport, loser, weirdo</td>
</tr>
<tr>
<td>Cultural</td>
<td>Pastor, philosopher, church member, elder</td>
<td>Foreigner, stranger, sinner</td>
</tr>
<tr>
<td>Citizenship</td>
<td>Voter, tax payer, public official, citizen, jury member</td>
<td>Prisoner, menace to society, troublemaker, queue jumper</td>
</tr>
<tr>
<td>Household/Residence</td>
<td>Home owner, land owner, tenant, gardener, cook, good neighbour</td>
<td>Homeless, bad neighbour</td>
</tr>
</tbody>
</table>
Roles happen on a continuum of value and it might be useful to think about it in the form of a bell curve. On one end are those roles highly valued by society and at the other end are those that are negatively valued. In the middle of the bell curve are those roles which are very typical and common.

The role of a client is an interesting one. It is a typical role and people with a valued status move in and out of this role. For example, they might be clients of hairdressers or accountants. The role of client however moves towards the negative end of the continuum when someone is a client for everything for all of the time. For example, a person who is a client of a group home as well as a day service as well as a weekend recreation service is in the role of client 24-hours a day; this would be considered to be at the negative end of the continuum. In this instance, the role of client becomes identity defining; that is to say, it occurs at the expense of other aspects of the person’s identity.

It is also important to clarify the difference between clients of typical services and clients of paid human services. Few people in society would strive to become clients of a charitable program, whereas many people would aspire to become clients of a travel agency or famous dress designer. The following example shows the contrast in how someone is perceived when they are in the positively valued role of ‘client of a private cleaner’ compared to ‘client of a human service’.
WHAT ARE ROLES?

EXAMPLE

In the following example, we can see the contrast in how someone is perceived when they are in the positively valued role of client of a private cleaner compared to client of a human service.

A lady supported by a community program clearly saw that the continuance of a care worker assisting her with tasks such as shopping, would lead to her neighbours continuing to see her as sick, dependent and needy whereas, her health was in fact improving. She also recognised that there are different expectations for people receiving human services. She felt that going on with this service gave her a poor image and could rob her of her dignity. She stated that she would be seen differently were she to use the services of her private cleaner.

ACTIVITY: Moving to More Valued Roles

The Bell curve is a useful way to think about enhancing or building on people’s current roles. For example, how could we support someone to move one of their roles from the more negative end of the spectrum to the more positive end? How can we build on their image and competencies to help make their roles more valued?

For example:

- From “The dependent son” to “The helpful son”
- From “Housing trust tenant” to “Good Neighbour”
- From “Scrapbooker at a day service” to “Scrapbooker at a regular scrapbooking class”

One way of assisting someone to move into a more valued role is to expand their skills. For example, can you think of another common role which could be enhanced through developing somebody’s skills to be a more valued role?

USING A ROLES LENS

Keep in mind as you progress throughout the handbook that you can support roles on a small or large scale, depending of course on the time you have with a person. If you are only supporting a person for an hour a week, you might want to reflect upon the most important roles you are there to support, however small they may seem. Being a homeowner? Gardener? Grandmother? Daughter? Family historian? Homemaker?
STRENGTHS-BASED PRACTICE AND POSITIVE PSYCHOLOGY

Role theory aligns closely with the ideas of positive psychology and strength-based practice. A number of shared concepts between these fields include the idea that human beings reach their potential when we:

- that the purpose of support is to support valued roles and the skills to be in valued roles
- that the role of a support worker would shift from ‘doing for’ to one that facilitates, enables and spots opportunities for valued roles
- that how well support is offered could be measured by how well a person performs in a role, how embedded they are in that role, how many doors open as a result of being in that role and how many freely given relationships develop as a result of the person being in a valued role.

EXAMPLE

A disability service discovered the interest one man had in bushwalking. He was fit and appreciated the environment. However, they decided to take him bushwalking during the week, when no bushwalking clubs operated. He was using his strength, but he wasn’t connecting with likeminded people. He was filling time, rather than developing a role with opportunities for social interaction beyond the service relationships. It was only when someone took the leap and “bent over backwards” for this man, that the activity was shifted to a weekend. He was able to join a bush-walking club where he was appreciated and made new friends.

Role theory aligns closely with the ideas of positive psychology and strength-based practice. A number of shared concepts between these fields include the idea that human beings reach their potential when we:

“a) consciously create environments that facilitate strengthening existing talents and attributes;

b) build positive emotions that lead to positive actions;

c) accept the power of positive imagery on the human psyche to effect the changes we want in our lives.”

An understanding of the importance of roles is essential in true strengths-based practice. It will mean not just an emphasis on the strengths of the person but also on what roles those strengths can lead to. An understanding of valued roles can open the possibilities of opportunities for relationships and participation in valued activities.
WHY ARE ROLES IMPORTANT?

Valued roles within the community provide people with the best opportunities to achieve the good things in life.  

As mentioned at the beginning of this book, there are at least 17 different things which contribute to a Good Life for most people, but we want to focus here on three broad areas that can be enhanced through preserving and attaining valued social roles:

The importance of roles is the way in which they can address all three of these needs for people.

**Acceptance**  

People relate to each other almost entirely on the basis of the social roles that they fill.

Although many of us would like to believe that we relate to people fairly equally based on their intrinsic human worth, the reality is that we talk about people largely based on the roles they hold. The first thing people often ask you at a party is “what do you do?” Your role gives you the best opportunity to build rapport with people.

**EXAMPLE**

A person with an intellectual disability who is working in a supermarket approaches you energetically and says “Hi, how are you today?” Then another person with an intellectual disability approaches you, also very energetically, but as a pedestrian on the street and asks the same thing, “Hi, how are you today?”

**REFLECTION**

Do you think you would respond the same way to both of these people? Chances are the person working in the supermarket would get a more comfortable response and conversation from the majority of people, and this is because they are clearly in a role which we recognise and therefore we accept their question as appropriate. These kind of ordinary social interactions are so important to our sense of connectedness and acceptance from the community around us, and it is primarily through our roles that we get to experience these exchanges.

“Positive big roles are a strong defense against being socially devalued on account of other reasons.”

**Contribution**

The more a person has “big” roles that are highly valued, the more tolerant others will be of negative roles, characteristics or behaviours.

“Positive big roles are a strong defense against being socially devalued on account of other reasons.”

**Belonging**

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**Contribution**

The more a person has “big” roles that are highly valued, the more tolerant others will be of negative roles, characteristics or behaviours.

“Positive big roles are a strong defense against being socially devalued on account of other reasons.”
Stephen Hawking knew by the time he was eight years old that he wanted to be a scientist and chose physics. Stephen was interested in studying the universe. He attended Oxford University and received his PhD in 1966 from Cambridge University. By the time he was 35 years old, Hawking was Cambridge’s first Gravitational Physics professor and received the Lucasian Professor of Mathematics award. Stephen Hawking has also published a book called A Brief History of Time: From the Big Bang to Black Holes. When Stephen Hawking was 21 years old, he was diagnosed with amyotrophic lateral sclerosis (ALS), also known as Lou Gehrig’s disease. This disease attacks the nerves that control a body’s voluntary movements. It affects walking, speaking, breathing, swallowing, etc. At the time of his diagnosis, the doctors gave Hawking two years to live. Hawking has defied this time frame and is still working. Today, Stephen cannot move much at all, has trouble holding his head up, is dependent on someone else for most things, and cannot speak, though he doesn’t let it stop him. He now uses a special computer that displays the text he types and speaks what he types with an electronic voice.

This illustrates how a positive role can outweigh a disability in terms of being positively perceived by society. While this is an extreme example, we see many examples of this happening for people with disabilities who have typical work and community roles, and the many benefits that these bring in terms of acceptance and relationships.

“Valued roles can be even more powerful than a person’s impairment in shaping the attitudes of others.”

26
People need a sense of belonging. We all need to be recognized as having a place, a respected place. There is no worse fate than to be rejected from society.

Humans are social beings and need to interact with one another and feel that they belong.

Roles give people a mental handle as to who a person is and how they should relate to them.

For example, knowing someone is a waiter/waitress, a mayor or a volunteer bus driver gives you a picture of how that person fits into their wider community. And it helps the person themselves feel like they belong somewhere.

People need a sense of belonging. We all need to be recognized as having a place, a respected place. There is no worse fate than to be rejected from society.

Humans are social beings and need to interact with one another and feel that they belong.

Finding a sense of belonging:

- is a sense of knowing who you are and where you fit
- means having meaningful relationships
- is not the same as being “in the community” — presence does not necessarily lead to participation
- means having a chance to contribute
- takes time and effort
The process of social inclusion can be understood as being like an iceberg. Some people who have been devalued only ever have the opportunity to be witnesses to life where they observe the world through television or through a window. While opportunities to be out the community (such as a regular trip to the local shops) enable community presence (to see other and be seen) there may be little engagement with others in the community. A person may join up at a local community centre for a music appreciation course for a term and get to know others there and be known, However, if as a result of this they are invited to join a community choir, they have the opportunity to form longer term relationships and the potential to feel that they belong.

The process of deinstitutionalisation has enabled people with a disability, people with mental illnesses and, to some extent, older people to be more present in society. However, to fully participate and belong requires overcoming the barriers, stigma and discrimination that cause people to be excluded.

As the SHUT OUT report details, many Australians with disabilities are now largely free to live in the community. However, where they were once shut in, many people with disabilities now find themselves shut out. People with disabilities may be present in our community, but too few are actually part of it. Many live desperate and lonely lives of exclusion and isolation.

There may be a place for governments in supporting social and economic participation, and promoting positive attitudes towards people at risk of being devalued. But for people to fully belong, the community as a whole must embrace people. This is more likely to occur when we support people to have valued roles, and when our efforts focus on strengthening families, communities and the informal networks around the person.
WHY ARE ROLES IMPORTANT?

JOSCELYN

Joselyn has a passion for children and so volunteers at a Creche at her local leisure centre. A few weeks ago she was going to be away so Joselyn’s mum assisted her to ring the two other volunteers for that day to let them know she wouldn’t be there. One of the ladies said they were so happy she rang because they would have missed her and worried if she didn’t arrive. Joselyn found a role in which she is more than just present and participating — she found a place to belong.

CONTRIBUTION

- **Roles affect every aspect of our lives**

Our roles play a large part in who we relate to on a daily basis, where we go, our schedules and activities, the respect and autonomy we enjoy, our participation in the community, where and with whom we live, what our income will be etc.

It is also our roles which give us a means through which we can contribute to society. If we don’t have many positive roles, we are not going to get those opportunities for contribution and this can lead to just “filling time” which doesn’t give people a sense of purpose. Many people at risk of being devalued are in the role of the client for much of their time. This means they are most often recipients, and don’t always get the chance to give back. Giving and receiving (reciprocity) is part of the fabric of life and as workers, we need to remember that people always have something to give.
ACTIVITY: *Tasks and Roles*

Have a think about your day and make a list of some of the key things you do in an average day and what roles these tasks can be attributed to;

<table>
<thead>
<tr>
<th>Task</th>
<th>Role</th>
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<tbody>
<tr>
<td>Get up and dressed for work</td>
<td>Employee</td>
</tr>
<tr>
<td>Get child fed and dressed for daycare</td>
<td>Mother</td>
</tr>
<tr>
<td>Talk to husband over breakfast</td>
<td>Wife</td>
</tr>
<tr>
<td>Drive to daycare and work</td>
<td>Driver, law abiding citizen</td>
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<tr>
<td>Work</td>
<td>Employee, colleague, friend</td>
</tr>
<tr>
<td>Lunch break — pay bills, meet friend at cafe</td>
<td>Citizen, friend, customer</td>
</tr>
<tr>
<td>Board meeting presentation</td>
<td>Board member, public speaker</td>
</tr>
<tr>
<td>Client meeting</td>
<td>Support person, advocate</td>
</tr>
<tr>
<td>Pick up child from daycare</td>
<td>Mother</td>
</tr>
<tr>
<td>Go to shops and prepare dinner</td>
<td>Housekeeper, mother</td>
</tr>
<tr>
<td>Share dinner with family</td>
<td>Family member</td>
</tr>
<tr>
<td>Attend yoga class</td>
<td>Gym member</td>
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Now try to list the daily tasks of someone who may spend their days in a nursing home/day centre/group home/at home, unemployed. What roles do you think would dominate their day? How many positive roles do you think they get to experience? And how many opportunities do you think these roles give them to contribute to society?

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<th>Task</th>
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WHY ARE ROLES IMPORTANT?

“The more valued roles that a person has, the more reasons for the person to get out of bed each day.”

BEN

Ben had been unemployed for a few years, largely due to a range of mental health issues and constant struggles with drug addiction. He lived alone and did not often leave the house, finding himself watching TV for most of each day. His uncle Leroy had just embarked on some home renovations and was spending his Saturdays plastering, painting and doing as much of it himself as he could. Leroy invited Ben to come and help him with his renovations, pointing out that he had experience laboring and had also polished his Mum and Dad’s floorboards in the past, which was the next step in Leroy’s plan. Ben agreed, and soon began the routine of staying at Leroy’s house the night before and cooking Leroy and his family dinner, a passion of Ben’s which he didn’t get to share very often since living alone. The following day they would work hard on the house, chatting about all sorts of things that had never come up in conversation before. Ben felt connected to and accepted by Leroy, and his knowledge and opinions on the work they were doing were highly respected, which gave him a real sense of contribution.

While who we are shapes our roles, our roles also shape who we are.

“It is through our roles that we develop a sense of purpose in life.”

In his book ‘The Good Life’, Hugh Mackay talks about one of our deep needs as humans is to know that we have lived a useful life and that we have responded as well as possible to the needs of others, contributing to their wellbeing in whatever ways we can.

We can often be fooled into thinking someone has a good life when they have all their obvious needs met, have a place to live, and are the recipients of lots of services or things. We might expect they should be more grateful or happy, but they might not be fulfilled. People like to feel like they contribute to the wellbeing of others, rather than always receiving from it. That sense of purpose comes from people feeling they have lived a useful life through their contribution to others.
ERNIE

“In my working life, I was an electrical engineer for the Melbourne rail. I was in charge of a few hundred people on the big construction works.” Upon retirement, it would be easy for someone like Ernie to feel like they had lost meaning and purpose to their life. However, Ernie and his wife Ena didn’t let anything of the sort happen to them. “We retired to a small country town, so we got very involved in the community. I became the chairman of the local Red Cross. I was also the local opp shop handyman, where Ena also volunteered. We were involved in the rowing club, footy club, blind auxiliary, and the hospital appeals auxiliary. We held a German festival every year to raise money for the hospital. I was on the local high school board and on the local shire council too, so I kept very busy. I’ve also been a blood donor since I was 40, and have donated 129 times! I kept giving blood until they found out I was too old — about 75 I think! Oh, and I was also a director for the Lutheran Laypeople’s League for 22 years and would travel to Adelaide for meetings. In my spare time at home, I cleaned up and made a park land area on the land we lived on. It was a couple acres, so I planted hundreds of native trees and shrubs on there to revegetate it.”

There was no risk of these two becoming bored! Their lives were filled with meaning and purpose through the contribution they made to their community.

After over 10 years of living in the country, the couple felt they could no longer manage the property they owned, so moved to Adelaide to be closer to family. Even today, Ernie cites several roles that he still holds in his current community, a Retirement Village in Adelaide. “I do some work in the village with the men’s shed recycling centre, we collect bottles, cans and newspapers from around the place, and raise $3000-4000 per year, which goes towards the improving the village. I spend an hour every morning there, sorting the recycling. But we sit down and talk, that’s the important part of it. The friendship that develops seeing those people every day, it’s a great source of information about what’s going on around the place. Companionship is the most important thing at the shed.”

“I’m also a rubbish picker upperer! Today coming home from my daily walk, I picked up a lot of litter. I’ve always done that since I lived in the country, we won tidy town competitions back then, and so I still do it now. It’s part of being a good citizen.” Ernie is a great example of how contributing to his local community creates a sense of meaning and purpose in his life. “I enjoy working and I enjoy achieving results. I really enjoy my life.”
ROLE COMMUNICATORS

How society see people and their roles is shaped by their physical and social environment. People generally live up (or down) to what is expected of them.

If someone is seen in a restaurant kitchen wearing a white hat and apron, with kitchen hands and waiting staff, giving instructions about making the hollandaise sauce smooth and plating up food then you would reasonably expect the person to be in the role of a chef.

Expectations of roles are formed by:

Role Communicators

SETTINGS
Where people spend their time

LANGUAGE
How people are spoken about and to

GROUPINGS
With whom people spend their time

ACTIVITIES
What people spend their time doing

PERSONAL APPEARANCE
What people look like
There is an old saying that people are judged by the company they keep and this is particularly true for people who are at risk of being devalued.\textsuperscript{39} When people are separated from ordinary life and are instead grouped ‘with their own kind’, the effects of this involuntary segregation are twofold. Firstly, it cuts people off from making friendships, connections and contacts that could help them get along in the real world. Secondly, their image is damaged. This could occur if, for example, they are part of a group and therefore not recognised as individuals with unique interests and abilities. This action confirms a negative view of people. Instead, the community associates them with all the other people in that grouping and it reinforces the idea that all such people “belong together”. In contrast, when people at risk of being devalued are part of a group of people who are perceived as competent, vigorous, moral, distinguished and who occupy positive roles, their image and possible role expectancies are enhanced.\textsuperscript{38} These environments also need to convey accurate and positive messages to them and to others about what role they are expected to fill.

**Action Implication:** when faced with a decision about where someone might be in a role, choose the most valued option.

### ACTIVITY: How Settings Communicate Valued Roles

Rank order the options for settings in which to perform this role, from least to most valued

<table>
<thead>
<tr>
<th>Role</th>
<th>Rank from least to most valued</th>
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</thead>
<tbody>
<tr>
<td>Artist</td>
<td>Backyard, day service, studio</td>
</tr>
<tr>
<td>Cook</td>
<td>Institutional kitchen, 4 star restaurant, home business</td>
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### Groupings and Relationships (or Social Context)

Where people spend their time does a lot to construct our perception of them, and also constructs their sense of what is expected of them. Concerts, sporting matches, galleries, and local parks are places enjoyed by ordinary people in society and are therefore valued by society. Conversely, settings such as nursing homes, hospitals and group homes tend to be associated with “sick” and “dependent” roles. A dirty environment also reflects negatively on the people in it. All this means that people at risk of being devalued are going to be image-enhanced and role-enhanced if they live in the same kinds of places, are schooled in the same settings and spend time in the same public places as people with a valued status. Their environments need to convey accurate and positive messages about their age and optimistic messages about their capacities for growth and development.\textsuperscript{38} These environments also need to convey accurate and positive messages to them and to others about what role they are expected to fill.
EXAMPLES

“What I didn’t like was when we were put together with people the same age — like a retirement village. When I was in hospital in a normal ward with people of all ages it was fine. I had a young girl next to me and could chat with her. Then they shifted me to rehabilitation before I went home and I was placed in a geriatric ward. The attitude of the staff was completely different. In the general ward, we were all treated as people. In the geriatric ward, nobody talked to you. That’s why I hope I never have to be in one of those places again. I go and see my sister-in-law in a nursing home and look around and sometimes that same feeling is there.”

“I was in a cafe with some friends one day and a large group of people with various different disabilities and capabilities came in with their clearly distinguishable carers and sat down to have a drink. My friends and many other people in the cafe couldn’t take their eyes off this group of people, as admittedly, the sheer number of them made it difficult not to notice them. Meanwhile, I noticed a little later that outside there was another lady with a disability sitting in a wheelchair at the table with what looked like her family or a group of friends. This woman did not receive any negative attention from my friends or others in the cafe and the whole picture looked much more natural and normal than the other group inside, who definitely presented as more odd, more different and even unapproachable due to the nature of their grouping.”

“It is easier to see people as individuals if they are not removed from the wider community and not grouped with other people who may be devalued.”

ACTIVITIES

What people spend their time doing affects the way others see them and what roles they are assumed to be in. Seeing someone actually perform a role is very compelling for the observer and how they might respond to the role incumbent. For example, if someone is seen out doing their grocery shopping and paying their bills, there is an assumption of capability, of “homemaker” and of “independent”. If someone is seen delivering mail, they are assumed to be in the role of “Postie”. If someone is out weeding their garden, they could be assumed to be a “homeowner” or “good tenant”. Alternatively, a young person who sits inside all day watching TV may be seen as a “dole bludger”.

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PERSONAL APPEARANCE

In society, it is easy to quickly categorise people according to their personal appearance. If we see someone who is unshaven and in dirty clothing we are likely to place them in a certain category. We may label them as “dero” or “homeless”. However, if this same person was clean shaven and wearing fresh clothes, it is more likely that we would think of them as a “good citizen” and somebody that we could talk to or befriend. While this may seem superficial, it is a reality we cannot deny. Too often people with a disability are dressed wearing clothing that is ill-fitting, out of fashion or immature for their age, and this along with issues such as body odor and haircuts can really damage the person’s image and will greatly affect their role prospects.

LANGUAGE

Language is a very powerful force in shaping people’s perceptions of others and people’s perceptions of themselves. If we speak to people using phrases such as “You poor old thing”, “let me put that on for you Darl” and about them using phrases such as “She’s not what she used to be”, “She won’t understand that”, then we are negatively influencing both other people’s perceptions of the person and the persons expectations of themselves. Additionally, the language that surrounds a person gives others clues to their roles. For example, hearing words such as “on set”, “in character” and the “fan club” help you piece together the role of film star.

However, language can also be used to convey positive messages to and about people. For example, using Mr or Mrs, Sir or Madam is often seen as a sign of respect for older persons. Tone of voice and gestures are also part of these messages. Often older people and people with a disability are spoken to in high-pitched, melodic voices, sometimes accompanied by a knowing wink of the eye to an onlooker, both of which communicate that this person is perceived as being in a child role, either due to being young, never having grown up or going through their second childhood.
MY NANA
by Martha

My Nanna is an amazing woman. She was the head midwife at one of the biggest hospitals in Melbourne throughout her working life. She would always get bunches of flowers from families whose babies she had delivered, as she was such a warm and loving lady who was always able to maintain a sense of calm in potentially stressful situations. Well that is what Mum tells me anyway. Nanna would never boast about herself like that.

She doesn’t work anymore, but she still has so much knowledge about women’s bodies, babies and the whole birth process. I find it fascinating to sit and listen to her talk about the stories of all the different families she worked with over her career. Before we know it several hours have passed and we have drunk way too many cups of tea! Nanna’s tea always tastes better than anyone else’s. I think it is her special antique tea pot. She has had it as long as I can remember. And her famous coconut biscuits help too.

Sometimes we walk down to the park and feed the ducks together. It is something she has done with us kids since we were little kids and we all still like doing it, even though we are in our 20s now. Spending time like that with Nanna is always rejuvenating for the soul. There is never a sense of hurry and she always has time for us, which can be so rare in this day and age. I always come home feeling more relaxed and like I have finally slowed down enough to smell the flowers! Nanna has this way of helping you appreciate your life and everything in it.
My Grandma
by Belinda

My Grandma has dementia and is living in a nursing home now. I try to still visit her regularly but she’s just not the same anymore and it hurts me to see her like that. She is in a wheelchair as she has one hip that doesn’t work properly anymore. She needs help with eating, getting dressed, toileting, pretty much everything really.

I know she likes it when we visit as she always has a smile on her face when we walk in, but she is difficult to have a conversation with these days. She does talk, but it’s usually just rambling about things that happened in the past. One of the nursing home staff members always brings us a pot of tea to share when we visit. She lets my Grandma pour it, but half of it always ends up on the table as she has become very shaky. They have a cooking group on Thursday at the nursing home and they always make my Grandma’s old biscuit recipe, as she can’t make them by herself anymore. I thought that was a nice gesture.

My Grandma really likes it when we take her for walks. Her face lights up and she natters about this and that the whole way there. Most of the time I can’t even understand what she is saying as I am behind her pushing the wheelchair, but she seems to be having a good time. I usually bring some old bread as Grandma still likes to throw the ducks some food. We often sit there for quite a while in silence and I tend to contemplate life. I just wish she didn’t have to suffer like this anymore. I want the Grandma I know and love back.
It is important to distinguish valuing a person, from supporting a person’s valued social role in society. One may truly love an older person, as Belinda above clearly does love her Grandma, but do nothing to prevent that person from being cast into the role of a child, or of a sick, diseased organism that is interpreted as being near death. Martha helps to dignify Grandma as a worthy person who has a lot to give to those around her, and to continue to interact as granddaughter to grandmother. In contrast Belinda’s pity for her Grandma is in fact destructive, as it inadvertently further devalues Grandma. Unfortunately, it is not uncommon for people (whether they be family members or workers) who love a person to inadvertently participate in casting them into negative roles.  

“ One of the first steps in getting other people to be less devaluing is to get them to approach the person with devalued characteristics in a non-destructive fashion. In most instances, people will only be brought to do that if they can be helped to see the person in positive ways, which primarily means in positive roles.  

Therefore, one of our most powerful tools is to use language to help others see the people we work with in more positive ways.
ACTIVITY: Language and Roles

John wants to volunteer at the local community garden, and a worker is exploring the possibilities for John. There are two possible ways if approaching this:

A. ‘Hi, I am from XYZ Service, ringing on behalf of a client who really likes gardening. Do you think there might be space for him to join your group? He’s no problem, really.’

B. Hi, I am ringing on behalf of John who is a keen gardener. He is very passionate about gardening and has been a home gardener for the past 6 years. He is wondering whether you have vacancies in any of your gardening groups at the moment?

What are the role messages that are conveyed in these two different ways of making the approach?

ACTIVITY: Images and Roles

A pamphlet for care assistance has a photo on its front. It is of a worker cooking for a woman who is sitting next to her in a wheelchair. This suggests that the elderly woman is having things done for her. The photo highlights her frailty and casts her into a negative role. How could this photo be rearranged to ensure that the woman in the wheelchair is portrayed in a positive role?

MISCELLANEOUS IMAGERY

Television, newspapers and film tell us that the majority of people in society are independent, healthy and beautiful. There are very few positive depictions of frail or elderly people for example, in the mass media. Sometimes negative images are subtle and unconscious but can still be harmful. Advertisements, brochures and websites must be examined carefully to ensure that images are portraying positive roles for people who are at risk of being devalued. Images can also be conveyed by the history of a service, service names, logos and funding sources. For example, when aged care services are funded through the Department of Health, it could imply that all older people are sick.
ROLE COMMUNICATORS

Margaret spends her weekdays from 9-5pm at an **office** (Setting)

She spends her days **working on a computer, talking on the phone, and attending meetings** (Activities)

She shares the office with other employees who share an interest and talent in social policy (Groupings)

She wears a **collared shirt, jacket and skirt** to work every day and blow dries her hair every second day (Personal Appearance)

Her colleagues ask her for advice on their work and also chat to her socially. In the office you would hear phrases such as:

“**Margaret what do you think about the recent proposal?**”

“**Margaret, have you put your footy tips in for this week?**”

and you might hear language cues such as

“**executive**, “**Department of Human Services**” and “**policy framework**” (Language)

In combination, the setting, the activities, the groupings, the image and the language used all help embed Margaret in the valued role of employee.

Alan lives with **other people who also have dementia**, but who he may not have anything else in common with (Groupings)

Alan wears mainly **tracksuit pants and slippers** (Personal Appearance)

Alan is spoken to loudly and slowly for fear he may not understand. In the nursing home you would hear phrases such as:

“**Alan it’s dinner time now, you’ve got roast beef and vegetables tonight**”

“**Today we are doing paper maché, won’t that be fun!**”

and you might hear language cues like

“**dementia unit**, “**therapy**” and “**the feeds**” (Language)

The combination of these role communicators suggest that Alan is child-like and dependant on others to do everything for him.

Let’s take two examples that show the power of role communicators:
How can we embed someone in a valued role using role communicators?

When we understand the power of role communicators, we can start to understand how very difficult it is for people to break out of a negative role because of the role communicators. Similarly, an understanding of role communicators guides us about those things we need to think about in order to embed someone in a positively valued role.

When we are trying to embed someone in a positive role, we need to ensure that all the role communicators are consistent with the valued role for it to be convincing, both for themselves to feel authentically in the role and for others to perceive them this way. Even one inaccurate role communicator might shake the perception and therefore the expectations held of that person.

Let’s look at Margaret, the previous example. Let’s say that the setting, activities, groupings and language were the same as written above, the only difference being that Margaret wore tracksuit pants, ugg boots, a flannelette shirt and a beanie to work every day. Despite all other indicators pointing to her being a valued employee, the management and her colleagues would probably start to question whether Margaret is truly one of them, whether Margaret takes the role seriously and whether she is cut out for the work.

Another example could be if you are trying to build on someone’s interest in art and embed someone in the role of an artist. You might invite a group of people who are interested in art to get together once a week to paint (grouping). They might all speak to each other using art-language, such as technique, brushstrokes, colour palette (language). They might all look like artists (personal appearance) and of course do the art work (activities). However if the group and the activity is held in a residential aged care facility, it may be difficult for people to expect them to be serious artists. They may not feel like they are artists, they might just feel like they are doing another activity or therapy. It would be difficult for them to make contacts/connections in the art world, and it would be difficult for them to get any exposure to art opportunities/exhibitions that might be going on in the general community.

Alternatively, if you could link one person up with an art group in a community centre, for example, the role communicator of setting would be more appropriate and conducive to embedding the person in a valued role.

Using role communicators is not just about helping someone look the part; it is about helping someone be taken seriously in a role and having others treat the person as if they are in the role, so that the person can learn the role.
To overcome some of the societal barriers, such as ignorance and negative attitudes, that get in the way of gaining valued roles for people, and to embed someone in a role, we need to pay particular attention to the image and competence of the person we are trying to help.

**IMAGE IS IMPORTANT**

“Look the part”

While it may seem superficial, our culture commonly judges people on the image they present. A person being interviewed for a new job, for example, will take special care that their clothes and hair look good. In the same way, a doctor knows that looking neat and clean makes it easier for her patients to trust her. If presenting a positive image is important for people who are already valued by society, then presenting a good image is even more important for people who are at risk of being devalued and rejected. The reason for this is that if we accept that there is a risk that a community member might already have made up their mind (in the negative) about someone with a devalued status, then we need to help them make up their mind in the positive. We can do this by planting positive messages in their minds about someone.

When you think of a social role, all sorts of images (mental pictures) would come to mind that relate to that role e.g. A police officer might evoke images of a uniform, weapon, a police car etc. And conversely seeing those images evokes ideas about the social roles attached to them. Much of this process of perception and association is unconscious. This means the negative images we have largely unconsciously ascribed to people who we devalue can be difficult to change. Therefore, positive imagery and associations for people who are prone to being typecast into negative roles are so important. “When positive images are associated with a party, that party is more likely to be viewed positively and accorded or afforded positive roles.”

We need to be mindful that it is not just the person’s personal appearance that gives messages about someone, but also where they spend their time, what they are doing, who they are with and how people speak to and about them. All of these matters shape how someone is perceived. They shape what is thought of them. That’s because the messages are more than about what roles someone is in. That is, imagery gives information about roles but also other things about a person or group as well and it does so through the same six “role communicators” we saw earlier.

**COMPETENCE IS VALUED**

“Act the part”

Our culture also respects competence. People who are at risk of being devalued may need help to initially learn to do one or two things really well, that other people value. Being competent in something greatly improves the chance that other people will see them in a valued social role.
**MARTIN**

When Martin first moved into a group home, the garden was overgrown. One of the workers saw him pottering in the garden. By teaching him gardening skills and investing in the right tools and plants, agency staff helped Martin improve his competencies. He has now totally replanted the garden and maintains it, a competency others appreciate. Martin has improved his image and his competence, with support from people who practice SRV. He now has a better chance of being seen by other people in the valued social role of “neighbour”.

There is a powerful feedback loop between images and competencies. If a person possesses a positive image in the eyes of others, they will often be given greater opportunities to move into valued roles and acquire the competencies required to move into those roles. Then the additional competencies they develop from these opportunities allow their image to be further enhanced. The cycle happens the other way also. For example, someone who can’t seem to get a job because they don’t have the appropriate competencies will suffer from a negative image, being unemployed, which further inhibits them getting any more experience in developing their competencies.

Also, because of this feedback loop, as a person’s competencies decline, greater emphasis must be placed on the image and attributive elements that can sustain the value of people’s roles.

**KRISHNA**

Krishna continues to challenge herself daily. “I have been the principal of two different schools but I cannot do the same now” she explains “but I can do other things and accept these changes. I’m not young but I put lipstick on and try and look young in the same way. I do not want to feel inferior. I want to look as I always did. It gives you a lot of strength. We all wanted to be accepted as we were accepted before”.

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ROLE COMPLEMENTARITY: ROLES EXIST IN RELATIONSHIP TO OTHER ROLES

All roles exist in relationship to other roles. For example a mother can only be a mother if someone is in the role of her child. To be an employee there must be an employer. To be a sports coach we need a sports team, and to be a good team you need a coach. This connects with the socialization process described above and can only take place in an environment of consistency and clear expectations.

If we are to assist people to take on valued roles we also need to ensure that we have people willing to take on the complementary roles: employers willing to give people a job, customers willing to purchase goods or services from the business person, teachers willing to teach the student.

DIFFERENT ROLES HAVE DIFFERENT DEGREES OF IMPACT ON PEOPLE’S LIVES

Some roles have a much greater impact on a person’s life than others due to the amount of time they take up, such as parenting or full time work roles. This is known as “role bandwidth”.

Some roles are more prominent or important in people’s lives. For example being a spouse or parent has major responsibilities attached to it, as well as taking up much of our time, they are roles that we cannot easily give up. Our work roles often have a major influence in our lives, in terms of the time spent at work, the level of responsibility we have, the income we earn and the opportunities that may be available to us (e.g. to travel with work or the career development opportunities provided). In contrast, some roles have a more minor influence on our lives, such as being a movie-goer or second cousin twice removed. The degree of importance of and commitment to a role is known as “role salience”.

The experience of a role varies in depth, for example a church goer who has been a member for 10 years is likely to be more embedded than someone who has been a goer for only a few months. A person deeply entrenched in a role is comfortable with the behaviours expected of that role, and takes on the responsibilities of the role. They not only look the part but also act the part. This often occurs over time, but time alone does not necessarily lead to role depth.

Role depth is indicated if, when circumstances around a person change, they continue in that role without reinforcement and, possibly, despite contradictions.

EXAMPLE

An elderly gentleman found himself in high care support due to Alzheimer's Disease after a lifetime in the law profession. His daughter brought in his brief case and legal reference books. He was able to continue in his regular routine each weekday within the residential setting sitting at a table after breakfast, dressed and working on his papers.
Role depth is achieved over time where there are consistent expectations by a range of influential people that the person is in the role. Role depth is also supported where there is a high degree of congruity between the person’s gifts, personal qualities and their role.

The concept of role avidity highlights the importance of roles in people’s lives. It can also be thought of as role hunger, meaning that people very much want to see themselves in socially recognisable roles. The immense need for roles means that most individuals are unable to remain role-less. Therefore a person might prefer even devalued roles to no roles at all. For example, we have seen some people who have experienced rejection and distancing from society embrace the role of being a “menace” even though it is a distinctly unhappy and even dangerous role.

What can be a small role for some people can be a major, life dominating role for others. This kind of role avidity is most common in people who want more social relationships, but do not inhabit roles that allow them to establish or maintain these kind of relationships. Sometimes roles that were once minor for a person can become much more important (more salient) to them if they have undergone other role losses. For example, an older person who has been a home owner may still wish to have the role of “hostess” even if they are not in their own home. A person who has lost their husband (wife role) and can no longer work (employment role) may invest more meaning to their role of churchgoer, attending every meeting, service and talking about every aspect of the church life.

When people become role famished they often find it easier to acquire a negative role than a positive one. Role descent is quicker and easier than role ascent. If we are not ‘employed’ then we are ‘unemployed’. People who are not in the role of “friend” can be placed in the role of “loner”. Those not in the role of an adult are likely to be treated as a child. Therefore it is important for supporters to help prevent people descending into negative roles while they help construct positive roles for people.

Roles need to be culturally, age and gender appropriate. People with disabilities are particularly at risk of being placed in child roles. This is often related to the way in which they spend their time and the people with whom they spend their time. This is one of the many reasons that the role of tenant in their own home or work roles are so powerful. They dramatically alter the perception of the person and their sense of their own identity.

Cameron is a tenant in an ordinary house in his community which he shares with his housemate.
**ASPECTS OF ROLES**

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**REFLECTION**

If people with dementia are at risk of being seen as being in their ‘second childhood’, do you think that activities such as finger painting would be an appropriate activity? What could an alternative be?

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**ROLE DEVELOPMENT/EXPANSION**

It is also important to think about the potential for the developmental stages in relation to a role. For example, students graduate from primary to secondary school and possibly on to University or TAFE. Service may become complacent once a person is supported to take on a role, assuming no further efforts are required. As a result, the person becomes ‘stuck’ in that role, with nowhere to progress to. Even if a role might be less valued to begin with, it might be possible to create the opportunity to progress into a more valued role. For example, if someone started as a dish washer in a restaurant, with the intention that they could eventually become a kitchen hand, this would give the role some development potential. In other words, many roles start out to be quite small, but with opportunities, learning and encouragement can grow into more challenging roles or larger “collections” of small roles.

How does role expansion occur for people who have been denied roles? The key is to understand that there are some roles that enable role expansion. Work roles are one such role as further opportunities for skills and knowledge become available in the work place and social and recreational roles can also emanate from our work roles.

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**ACTIVITY:**

**Appropriate Roles**

So, if an elderly businessman were in the role of a bingo player, how do you think society would perceive them?

What are the things that are likely to lead to a role being ‘appropriate for someone? Place a tick next to the top five considerations.

- Age
- Choice
- Ease of doing
- Personality
- Gender
- Interests
- Cost
- Culture

---

**REFLECTION**

Take the situation in which the main role of a person with a disability is as Committee member, sitting on many disability committees, even to the exclusion of following other interests. ‘Committee member’ is a positive role, however if this person really has an interest in this role, how could this role be developed further?
Role settings

It is important to establish a distinction between playing a valued role within a service setting or family setting and playing a valued role in a broader community setting. If a person’s roles are limited to things like the Boarding House games night organiser, consumer representative on boarding house interview panel, brother, son, pet owner and family joker, they are not getting the chance to interact with people outside of these settings and establish roles indicative of a more typical community life. This is not to put less value on family roles the person may have, as all the roles listed above are still positive roles, but to acknowledge that community roles outside the home and service environment provide another dimension to the persons experience of the good things in life. In fact, when acknowledged, respected and brought to greater attention, the roles people hold in service and family settings can be useful indicators of our strengths and interests that can help lead us to other possible roles outside of these settings.

O’Brien reinforces this when he says that we need to promote consideration of a wide range of roles in multiple settings as a focus for long term action. We need to do this in a way that:

- Promotes positive recognition
- Promotes satisfying interaction
- With citizens in settings outside services.

Recognising strengths to expand roles

Andrew had been largely unemployed since suffering from a back injury which inhibited him from continuing his 20 year career as a landscape gardener. He experienced discrimination from potential employers due to his epilepsy, which prevented him from being able to hold a driver’s license. This was used by many employers as a reason for being knocked back, even for jobs that required no regular or daily driving as part of the role. Andrew had always experienced depression, but these constant knock-backs sent him into an even deeper depression. His marriage had broken down and his children had moved interstate. He felt that he had very little worth living for, other than his children.

His counsellor was able to help Andrew see that in addition to his role as a Father, he had one more very important role in his life that he had been overlooking. He was a son. And was essentially the primary carer for his ageing mother, whom he visited regularly, coordinated appointments for and supported in a meaningful and loving way, to maintain her own roles.
ASPECTS OF ROLES

as Mother and Grandmother, despite health problems of her own. Slowly, Andrew began to recognise the importance of this role and started to see his own skills and strengths in this context. Although he still suffered from a very debilitating depression which severely affected his motivation and confidence, Andrew eventually made the decision to go back and study counselling himself. He completed the course, which essentially increased his competencies associated with a strength he had never considered to be a strength before.

HOW MANY ROLES IS ENOUGH

One dynamic that has proved beneficial is the multiplying effect of roles. Each role provides an opportunity to develop further roles. It is tempting as we embark on strategies to assist people gain positive roles to relax once one or two roles have been achieved. However, it is also important when supporting people to take up valued roles that we continue to work with the person until the role is deeply embedded. Some people may prefer to have a number of smaller roles, whereas others may prefer to hold a few depthful roles. Either way, we need to ensure we don’t relax prematurely, but continue to work on assisting people to gain more roles or to enhance the role depth of their chosen roles.

EXAMPLE

Tom lived in a group home where he had the single role of garbage bin ‘puteroutera’ once a week. Tom loved this role because it was all he had! And woe-be-tide if anyone else put the bins out. What was sad is that the staff did not recognise Tom’s preparedness and need for more roles, which is one reason he placed such importance (saliency) on this one role.
The opportunity and ability to choose is important for people who are devalued and have been wounded, as in many cases such people will have had this right taken away from them.

It is important for a person's image to be seen to have appropriate rights and autonomy. It is also important for their competencies to use the skills that are involved, e.g. researching options, evaluating the opinions of others, weighing up the advantages and disadvantages, forecasting the impact of a choice etc. To perform many valued roles in the community a person will require the skills to make choices.

If we accept that people with a devalued status are disadvantaged in many areas of life and are more easily judged as worthless, then we are likely to face dilemmas around choice. A helpful guiding principle is that we want to assist people who have been devalued to make choices which enhance their:

- image and status
- typical experiences
- valued roles
- possessions
- individuality
- relationships
- use of time
- learning opportunities
- participation in community life

In other words, a guiding principle is that choices made by vulnerable people should not lead to even greater harm to themselves, given all that they already have to deal with.

**What should we do if there are conflicts between a person’s choice and the above guiding principle?**

A number of situations which cause dilemmas arise. What if a person's choice apparently conflicts with the above principle? For example, a choice might degrade their image, lead to a loss of skills, or lead them to take on a negatively valued role.

Another scenario is that many people would accept that if a person with a disability chooses sheltered work, then that is a fine choice as the person has chosen this career path. However, has the person just chosen what they know is available to them? Have they really been given the opportunity to dream big and consider options that no one else has considered for them? It is interesting to note that anecdotally, many people with a mental illness have listed volunteering in a second hand shop as their next career goal. Do a disproportional amount of people who have a mental illness really happen to have a passion for ‘op’ shops? Or is this something they have picked up as an “achievable step” or told is “within their capabilities”? Is it simply a result of having frequented ‘op’ shop environments a great deal? Have they been led to believe that they are not good enough to work in a more valued retail setting?
There are a number of points which may be helpful when thinking about choices:

• Good practice does not prescribe the choices which people should make. Within our culture valued people make choices every day, which are not always the same over time or the same as other valued people might make. Yet these choices are generally within a culturally valued range, which covers a wide spectrum of valued options. We can offer vulnerable people choices without having to offer devaluing options to choose from.

• The idea of “bending over backwards” suggests that we take particular care with those who have been devalued to ensure that they are offered the most valued options from which to choose. In situations where a valued person may be able to choose to do something devalued and not lose their status in the community, for a devalued person such a choice may move them further to the margins of society (e.g. if a person dresses strangely).

• People who find themselves well down the wounding pathway may be so demoralised that they are no longer able to make choices which are in their own best interests. They become aware of being an alien in a valued society and of being a burden on others who care for them. Devaluation and wounding is a process “done to” people by society, it has nothing to do with the inherent worth of that person. However, it can influence that person’s perception of their own worth.

• Good practice stresses the importance of consciousness, and this is not just important for human service workers. People and their families and friends, need to be conscious of the devaluation process and the impact which it may have on their lives. They need to understand the power of valued social roles and the importance of making choices which will lead them to be more valued in the eyes of others, the consequences of their choices, and allow them to make informed decisions, not just ‘choice for choice’s sake’. Staff also need consciousness about how much they already influence the choices of people.

• For those people who have a limited ability to make choices because of physical or mental impairment, we need other guidelines to assist those who are making choices on their behalf. It is obviously preferable for a person who is making such choices to know the person well and to be able to articulate what they think the person would have wanted. However, this is not always possible. In these situations the principle of preserving the person’s “dignity” may be helpful. Dignity implies respect for who the person is rather than what they can do. This includes the person’s history and past contributions, as well as their life strengths and qualities which others have admired. This also recognises that while the need to make choices is important, so too are other needs, like dignity, respect, and belonging.

**Competing principles**

Good practice principles are not clear cut and will inevitably conflict in any one situation. What may be good for a person’s image may not assist their competency, and vice versa. For example, using a prosthetic device may not be image-enhancing, but may assist a person to participate more fully in the community and therefore increase their competency.
In a residential setting, we should set the table and prepare the food so that it will be well presented, but it may be better for an older person’s competency to get involved, even though the result may not look so good. Anyone attempting to seriously use these principles will be constantly facing such conflicts. We therefore need to not only take into account the expressed preferences of the person but also have the ability to think through what is best for a particular individual, what are their most fundamental needs, and what are the biggest image and competency risks in their lives. If our recommendation based on their vulnerabilities is at odds with the person’s expressed preference, we then need a process to work this through with the person. A typical process would be one that we might use with a family member when we believe they are going to make a choice that is not in their best interests.

**Applying the principles of choice**

It could be useful to think about the labels commonly associated with a particular devalued group when weighing up the risks around which roles are appropriate for a person, and which may be best to avoid.

**EXAMPLE**

A person with a mental illness who has been homeless on and off for several years, decides that they have a passion for the environment and would like to work in a recycling centre.

**REFLECTION**

For someone like Ernie, who was mentioned earlier in the book, who lives in a well presented retirement village and runs the recycling centre there, this role may not pose a threat to his image at all. However, for someone who has been homeless and lived on the streets and suffered from some mental health issues, being associated with ‘garbage’ may further damage their image in the eyes of others. If the person’s needs include acceptance, dignity, respect and having a positive reputation, then this would mean that a role involving working with garbage may need a re-think. In this situation, perhaps this person’s passion for the environment could be harnessed in another activity which would be more enhancing of their image. They could be presented with such ideas as planting trees, environmental advocacy, bush care and revegetation, working in a nursery or other options which don’t have the same risks around image degradation.

**REFLECTION**

What would you consider to be the image risks for a person with a disability who has an interest in working with animals? With these risks in mind, what choices could you present to them as ways to pursue this interest?
HOW CAN WE ASSIST PEOPLE TO HAVE VALUED ROLES?

There are four key strategies at the core of assisting people to have valued roles in our community: prevent loss of roles, strengthen existing valued roles, find new roles and avoid negative roles.

1. PREVENT LOSS OF ROLES

The first step is to identify the existing valued roles that people have and ensure that these roles are not taken away. There are three key ways that people can lose valued roles in their lives, and all of these are usually done unconsciously, so it is important to increase our awareness of how this can happen so that we can prevent it from happening.

a) Roles can sometimes be unwittingly taken away by the human service system or wider societal trends.

EXAMPLE

If someone needs some additional help with their cleaning, it doesn’t necessarily mean they need all their cleaning done for them. Taking over this may actually be taking away someone’s role as homemaker.

b) When we help people make changes in their lives, we can sometimes inadvertently take away their roles.

EXAMPLE

The role of a family member for a child in foster care might be lost just because they turn 18 and are expected to leave the family home.

An older person may lose their role of being an employee due to reaching society’s generally accepted retirement age.

According to the report Fact or fiction? Stereotypes of older Australians, this kind of discrimination is quite common;

"I wanted to continue working — I was told ‘we don’t have suitable roles and duties for you anymore’ and that took me 12 months to get over. I had to have counselling because I thought that I still had a lot to offer and I still want to work therefore it affected my self-esteem." (65+ years) 57

b) When we help people make changes in their lives, we can sometimes inadvertently take away their roles.

EXAMPLE

The mother of a young man who acquired a head injury while traveling overseas was very aware of the importance of the potential loss of roles. Immediately her son returned to Melbourne to a high care ward in a hospital she arranged for all of his friends to visit. She kept contact with them and, although some fell away, was able to keep a strong network of friends with her son as he gradually regained consciousness of his world. His sense of being a young man with friends his own age was a critical part of his rehabilitation.
HOPE SPRINGS

The ambulance siren was a piercing reminder that things were dire — Roma had been feeling a little below par for some time and then to have a ‘turn’ at her favourite club was most embarrassing. People running, being attached to beeping machines, breathing impeded and oxygen flowing — days were a blur as she lapsed in and out of consciousness.

Family she had rarely seen anxiously hovered around her bed and talked in hushed tones with white clad doctors and attentive medical staff. People talked about her but not to her. She had no idea if she was long for this world but eventually she rallied enough through a blurry haze to know with certainty that she wasn’t in Heaven but hopelessly dependent on a few for so much.

When she was able to comprehend she was informed that her heart was worn out and at her age (89) the bottom line determined invasive intervention was not an option. So with a bag full of medication she was sent home to ‘weather the storm’ knowing that lightning could strike at any time — in fact her heart is a ticking time bomb.

Initially the news paralysed her and she just let herself go. Family rallied like never before — more visits on weekends, food coming out of her ears and advice from all corners on what she should or should not do. However the more family took over the more determined she was that it was her life and she would live it how she wanted. Suggestions of residential care were cast in the out box, the assistance she was having with personal care was abandoned, she was happy to have the local chemist pack her medication and she surrounded herself with workers who were no nonsense type people who got on with a job without fuss and favour.

Her card buddies were called and they began visiting her home to play and as she became stronger they took her to their homes to spread the hosting assignments. She reengaged links with her painting group initially going for an hour to watch and talk and as she built up stamina stayed the whole time. She is now a weekly participant and painting like she had no tomorrow.

Her quick wit is back, she is calling the shots and her family have stopped offering unsolicited advice. Her prognosis is still the same but it is now almost a year since the sirens sounded impending doom. Roma is a living testimony that hope springs even in the worst of situations.

REFLECTION

Often our first instinct when someone is in crisis is to rally round and help. How might we do that in a way that protects people’s roles? How do we know when to pull back and help people reestablish their roles?
HOW CAN WE ASSIST PEOPLE TO HAVE VALUED ROLES?

Strategy: Using Role Cues

Some people have severe limitations to their ability to continue to perform roles, as a result of physical impairment, inability to communicate verbally or cognitive impairment. However, roles are about ‘being’ as well as ‘doing’. A person is a brother or aunty regardless of what they are able to do in that role. So when we speak about the importance of preventing role loss and preserving important roles, it is worth being aware that the role doesn’t always have to be in the same form that it once was. An older person may have had many roles that they can no longer perform but it may be possible to have “role cues” that can remind people of the roles that people have held. Role cues are physical objects and visual reminders that remind the person and others of the role.

EXAMPLES

• The lawyer surrounded by his or her legal books
• A champion bowler with trophies for his wins
• A bushwalker with photos of their walks
• A gardener with some of her prize plants and flowers.

All of these are visual reminders of their former roles and valued activities which can spark positive memories and rich conversation with others.

ACTIVITY: Preventing Loss of Roles

How could we prevent the loss of the following roles and help people to feel more connected to past roles that they can no longer “Do” but can still “Be”? Brainstorm some role cues for the following ‘Being’ roles;

• A footballer
• An artist
• A university professor

2. MAINTAIN AND STRENGTHEN EXISTING VALUED ROLES

Where people already have valued roles, we can focus some of our efforts on enhancing and strengthening these roles. The bell curve from earlier in the handbook is a useful way to think about this activity. How can we move this role further to the valued end of the spectrum?? Strengthening roles can also increase the possible benefits people might get from these roles through increasing the depth of that role.
MARY

Mary has found ways to stay connected with her daughters and granddaughter, even when she can no longer easily leave the house. She has regular phone contact with one of her daughters (who lives in Papua New Guinea). Another daughter visits and cleans Mary’s house, as she doesn’t like sitting still to talk. After she leaves, “I can’t find anything” jokes Mary.

Mary has also embraced technology to stay connected with her family. Her newlywed granddaughter is living in London and Mary uses her mobile phone to text her. “Last night I sent her a message saying: ‘I am thinking of my favourite married people’. The message connected me to her. It is not a physical thing. It is all about feeling that you belong to the outside world and that you are not alone, even if you don’t leave the house”.

“I meet with my other daughter to go to the market. I don’t leave the car. I only sit there and watch people going up and down. Even if I am not physically walking up and down the market lanes, I can see people and I feel alive and part of life.”

In both of these stories, a new skill was learnt which consequently strengthened their roles. In the first story, learning to cook strengthened the roles of ‘daughter’ and ‘sister’. In the second story, embracing new technology strengthened the role of ‘grandmother’, allowing Mary to stay connected to her grandchildren. Skill development is essentially a strategy for increasing competence, which as we have established earlier in the handbook, is one of the two key ways that roles are embedded.

Strategy: Learning a new skill

Often learning a new skill can strengthen an existing role. Learning a new skill increases confidence in the role and also shows others that the person is competent.

EXAMPLE

A young woman with a disability was the oldest sister in a family, with a number of quite young children in the family. This role was able to be enhanced by teaching her to cook, so that she could assist her mother around the house in a way that would generally be expected of a young adult in that situation. So her role of sister and daughter were strengthened by her contributions to the household.
HOW CAN WE ASSIST PEOPLE TO HAVE VALUED ROLES?

Strategy: Adding Additional Functions to a Role

Roles can also be strengthened by adding additional functions. For example, an older person who volunteers by cooking meals for their church food parcel program, through cooking the meals at their own home and dropping them at the church, might be encouraged to add to their role by staying to help sort the meals and distribute them throughout the week. This would help increase the time the person is spending in their role of ‘volunteer’ and give them additional opportunities to interact with others and deepen their role. Another example might be a person with a disability who is in the role of ‘football fan’, who already goes to the local football every week and interacts with other fans there. Perhaps they could be assisted to add the function of selling the raffle tickets, to further enhance the role.

The following story shows a man who has, under difficult circumstances, added additional functions to his role of ‘husband’ to strengthen the role and enrich his life.

FROM JACK TO A KING

As I stepped through the door the fragrance hit me and immediately my senses took me back to my childhood in the country where my dad had planted a row of gorgeous roses on our side fence to hide the corrugated iron. As I hurtled off to school ‘that smell’ was a reminder that all was well with the world — that somehow that my day would be sweeter for having passed that way.

On that day I saw that ‘sweetness’ in a thoughtful gift from a loving husband: Jack had obviously intentionally picked and arranged the glorious ‘Papa Meilland’ roses in a crystal vase for his lovely wife Lorna. Lorna had recently moved from their unit into a residential facility close by and Jack had brought her home as he did each day to share time together in the privacy of their own home.

In past years, Lorna loved her roses but now they didn’t even raise a cursory glance as she sat in the room without much recognition or interaction with either Jack or her surrounds. Jack later told me how different life was for him now — loneliness was an every present bedfellow and routine was the order of each day as he plans for Lorna’s daily visits.
Jack told me how he fell in love with Lorna when he lodged with her parents while visiting Adelaide from his home in Mildura. That love blossomed and flourished in the ensuing years and now the patient and thoughtful Jack is there for Lorna through thick and thin, still loving her even though she has difficulty expressing her love in return.

The latest project on Jack’s agenda was to buy some new clothes for Lorna and he had procured brochures from a local boutique where Lorna used to shop. Jack told me that Lorna had always been proud of her appearance and he wants to keep her looking ‘good’. The owner of the boutique had been wonderful as she assisted Jack and had allowed him to bring home clothes for Lorna to try on for size — all of the clothes spoke of quality and style. Jack told me that the new clothes had brought a smile to Lorna’s face and a tilt of her head as she admired herself in the full length mirror so it had been worth the effort.

Now some three years down the track Lorna is still looking attractive and Jack is still the attentive husband but he has realised that in order to care for Lorna like he did, he needed to get a good balance in his own life to keep him keeping on. These days as an 89 year old, he looks at least 10 years younger and this he has attributed to the workout he has twice weekly at his local Gym which includes strength based exercises. Since ‘working out’ he hasn’t had any falls and feels ‘as fit as a fiddle’. He has also purchased a laptop and when Lorna visits home he loads up photos of dogs and other visual images so they can sit side by side and watch together. For Valentine’s Day he made Lorna a card on his computer of photos of them through the different phases of their life and the female residents where Lorna resides were moved to tears by his card of love.

Jack has also been an encourager to other blokes in the village where he lives who also support wives with dementia. He arranges meals out, trips to watch the Crows and participates in snooker, table tennis and cards.

It would have been easy for Jack to just ‘bide his time’ when Lorna moved to residential living but he grasped the hand he has been dealt and gone from being a ‘Jack to a King’ from loneliness to a life worth living.
HOW CAN WE ASSIST PEOPLE TO HAVE VALUED ROLES?

Strategy: Using Role Cues

Role cues can also be useful in strengthening existing positive roles. In the above story, Jack’s valentine card to Lorna is another example of a role cue, a kind of visual reminder that she is in the role of ‘wife’.

Particularly when people may not have had many positive roles at all in their lives (eg. people with a disability), using role cues can increase their connection with those roles, strengthening those roles and possibly increasing their role depth.

ACTIVITY: Role Clues

How might we use role cues (visual reminders) to help strengthen the following roles for people?

- An aunty
- A basketball fan
- A pet owner
- A grandmother

3. FIND NEW ROLES

“If we start with filling time, all we’ll get is activities. If we start with filling roles, then time looks after itself.”

For people who have not had the opportunity to develop many valued roles, then we need to search for new roles that reflect the person’s strengths and interests. We will talk in a moment about planning processes that can help you to think about possibilities for helping people to find valued roles.
When Krishna moved from India to Australia, she began to explore her new Australian home and the differences between the cultures. In Australia, families lived apart; in India, families live together. Krishna noticed the Indian population were also used to having servants — someone to talk to as well as someone to do the basic household things. As a result, many of the people who moved here didn’t have those skills. “It is very lonely here. I used to help taking my grandchildren to the school every day, but this did not fill my whole day. Then I thought, what am I going to do with my day?”

When Krishna’s friend suggested she should try some community work, Krishna began to understand how Australian communities are built. She then decided to meet the need she could see so plainly — to help the Australian Indian community here with basic skills and to help counter the loneliness. The idea started small — she met 5 seniors and they started an association. The association now has 400 members. Krishna worked for 10 years as president of the association before handing the reigns over to a new person but she still offers her support and advice.
Strategy: Identifying your talents

In the book *Go with Your Talent*, Luk Dewulf points out that “every person, irrespective of their nature, history, background, and other limitations, both physical and intellectual, has talent.” He also acknowledges that it is often difficult to identify our own strengths/talents, as “Talent becomes visible in activities that you complete effortlessly and that give you new energy.” Often we will be the last to realise that we have done something special. Dewulf identifies some characteristics of talent in action, which can help us figure out what our talents/strengths might be. He asks us to think about one or more situations which meet at least five of the following six criteria;

- They are situations that you look forward to
- They are situations through which you experience real enjoyment
- You think that what you do in these situations is nothing very special, even though others tell you that you do it very well
- You can still do what you do, even in difficult circumstances or when you are feeling not so good
- During these situations, the time seems to fly by
- When the situation is over, you may feel physically tired but you are also mentally refreshed, with much more energy than you had before.

Dewulf also points out that having talent does not mean that you have already acquired the right behaviour or found the right context in which your talent can blossom and become Talent in Action.

**Talent in Action = Talent + Behaviour + Context**

Our job is to help people identify their talent, develop the behaviour (competencies/skills) for that talent, and find a context in which they can carry out that talent in the form of a valued social role.

**Strategy: “The Power of 10”**

This is a brainstorming tool that can be used in two ways.

1) There are unlimited resources in our community that can enable us to match the strengths and interests of a person with the assets in our local community. Look at the many clubs, organisations, churches, community groups and businesses in your area. In each of these settings be challenged to think of at least 10 roles that someone could take on as part of that group. That will lead you to potentially thousands if not millions of opportunities!
ACTIVITY: *The Power of Ten*

Name one club/organisation/church/community group/business in your community:

Now brainstorm 10 roles that someone could take on there:

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ACTIVITY: *Building on Talents*

Think of a talent or an interest that someone has. Create ideas for 10 activities that might flow from that talent or interest. Name the roles that are associated with that new activity.

Talent or interest: .............................................................................................................

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<th>Activities</th>
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HOW CAN WE ASSIST PEOPLE TO HAVE VALUED ROLES?

Strategy: Roles Based Planning

Ramsey outlines a valuable approach called roles-based planning which provides a systematic approach to identifying what valued roles may be possible for people and how they might be supported. It is a thoughtful means of personal planning that:

- Starts with the dreams and interests of each person
- Ensures each person has been provided with sufficient information and direct experience to make informed decisions about their future — including potential negative outcomes associated with their choices
- Applies critical thought to how each dream or interest can be pursued in ways that will help each person be seen as a valued, contributing citizen, and optimise their opportunities for developing friendships
- Identifies and attempts to overcome the negative impacts of societal stereotypes upon people with disabilities
- Identifies and responds to each person’s most pressing needs and barriers to success as part of the planning process; and
- Shifts focus from filling time with activities to thoughtfully and thoroughly pursuing valued roles and relationships within the community

In short, it is intended to help people achieve the good things in life and be seen as valuable, contributing citizens.

The following are some questions which may help guide the planning process:

**What is the person’s history and what are their interests?**

- When do they seem most alive and engaged?
- What is a good day for the person?
- What are their interests and passions?
- What do others most appreciate about the person?
- What are their skills?

**What are possible valued roles for this person?**

- Relationship roles
- Work roles
- Education roles
- Community roles
- Cultural roles
- Citizenship roles
Which is the most important role with which to begin?

- Which will have the most profound impact?
- Which will meet the most pressing need?
- Which will open up the most opportunities?

What is involved?

- Where does this role take place?
- Who are the people involved?
- What activities are performed as part of this role?
- What language is associated with the role?
- What is needed for the person to look the part?
- What skills and competencies are needed to perform the role?

Action Plan — work out who will do what to support the person taking on this role.

4. AVOID ENTRY INTO NEGATIVE ROLES

Finally, it is much easier to prevent entry into negative roles, than it is to reverse it.

If we are aware of the negative roles that people are at risk of entering, we can direct some of our effort at preventing this.

For example, older people risk entering the sick, patient and invalid roles when they start to experience an increase in health problems. Good health regimes can help prevent this, as can protecting people from being perceived as better off dead and being associated with images that signify death.58
The following two questions help to engage our personal values in situations where we are wanting to support people to have valued roles:

- Do you really want the people you know to experience the Good Things of Life?
- Are you prepared to do what it takes to make that happen? 59

Here are some points to keep in mind which help us to think outside the square when looking for valued social roles for people.

- **Have high expectations about what people are capable of and what is possible**

People generally do what is expected of them. This can create vicious circles of low expectations for people at risk of being devalued. But high expectations can help people learn and change.60 Often we don’t even need to state our expectations to people, because the expectations we have of people show through our actions, through how we speak to them, what they are asked to do and the way people around them behave and talk about them.

People’s abilities can be surprising!

**EXAMPLE**

An older Japanese woman living in a house for people with dementia teaches a young staff member the complex etiquette of a Japanese Tea Ceremony.61

- **Believe in growth**

“No matter how disadvantaged or disabled or old, everyone has the ability to learn, change and grow.”62

It follows that people who believe this obviously hold high expectations for people at risk of being devalued. If a person is not becoming competent, is not learning new skills, the fault may lie in the teaching. Everyone learns best with material and activities relevant to real life, enough time, good instructors, good role models and real reasons to learn.63

**EXAMPLE**

Joan works with a group from the community who assist people with dementia in high care residential services to knit. The staff said they would never be able to but they can! They are now making knitted rugs for overseas aid.
ACTIVITY: Learning and Growth

Think of one person for whom it is hard to imagine that they could continue to learn and grow. Perhaps you find yourself thinking “Oh, they will never change!” or “They are not capable of learning such and such”. Now think again about the messages above.

“Everyone learns best with material and activities relevant to real life, enough time, good instructors and real reasons to learn... If the person is not learning new skills, the fault may lie in the teaching.”

How can you embrace your underlying belief in growth to come up with some different ideas to support them to learn and grow?

• Be conscious of the assumptions we are making

Be inquisitive about people’s past or current roles, but don’t assume that this is necessarily what they want now. Some people want to maintain the roles they have always held, but others might be happy to relinquish those past roles, in order to make room for new roles.

• Look for possibilities rather than barriers

Brainstorming techniques encourage us to put forward a range of possibilities, without initially critiquing them or shutting them down due to barriers. This allows us to dream big and opens up the scope of what is possible.

• Recognise this work requires artfulness and creativity

“The solution is as likely to come from your imagination as from your rational mind. It’s not a matter of designing programs but of creating visions; not of following protocols but of fulfilling dreams: believing that a woman who has been isolated could still have friends, or that a man whose life has been controlled could still escape and be free. Trusting that vision means learning to hope. This work is not about “fixing” people so they fit into society. You need to come at the question from another side: finding the place, or the way, that people do fit.”

• Practice positive persistence

Ask people. Don’t wait for that extraordinary person to come along — consider whether ordinary people hold the key to showing others hospitality and friendship.

• Search for the person’s ‘ticket’ out of isolation. Find that one special attribute that could help facilitate a meaningful connection.

Sometimes we need to think outside the square in terms of what a ‘strength’ or ‘skill’ can look like, especially when they can’t recognise it themselves.
CAM CAN
The business created around a young man’s skill of waiting.

The idea of a ‘waiting service’ came about while we were undergoing renovations at home. We were impatiently waiting for an appliance to be fitted and the tradespeople insisted they could only come during the week. We had no remaining annual leave to sit by and wait. It was then that Marc, Cam’s step-father, experienced the “Eureka” moment.

Cam was sitting on the couch, again waiting patiently. Marc recognised this as being something that Cameron had done perfectly well all his life. Cam waits for someone to help him with meals, for assistance to dress, for people to pay attention to him — he has waited for everything!

Marc thought that we could build on Cam’s capacity to wait and took the idea to Cam’s Support Crew who discussed how waiting could be turned into a small business that would make sense to Cam and the rest of the world. Cam’s support crew created CAM’ CAN & Associates — a personal waiting service.

“YOUR TIME IS MY BUSINESS”
CAM’ CAN & Associates is run like any other small business — it now has a coordinator, a website, business cards, flyers and promotional items that are left with new customers after each job. CAM’ CAN & Associates has now been operating for over two years and continues to expand. Cam now has numerous customers as a result of return business from customers of waiting services for whom he regularly washes cars, provides weeding, yard tidy and watering services. He also has a contract filling vending machines one day each week and works at the local yacht club providing boat washing and cleaning services to the Power Boat section.

Cameron also supports other vulnerable people in his local community. Many associations have been developed with organisations around Perth and business opportunities continue to grow. CAM’ CAN & Associates will soon be providing services to customers of a major retail organisation in WA.

The rewards: Cam’s Crew recognise that one of the major strengths supporting CAM’ CAN & Associates are Cameron’s support workers. Great care is taken in appointing the right people to support Cam in the work he does. Customers who engage CAM’ CAN & Associates are very keen to support his business and are a wonderful source of new customers as they make recommendations to others.

The greatest reward is seeing the changes in Cam since he started his business. Cameron is now a young man with responsibilities who is excited about his work. His business provides him with the opportunity to meet new people and engage in work he enjoys. He stands tall and proud. Problematic behaviours from the past are no longer an issue, he is happy, busy and earning an income. His life is not being wasted. He has become a valued and contributing individual — the community is finally giving him a fair go.
We wish to pay tribute here to Dr. Wolfensberger for his development of the thinking that has informed the content of this handbook. His work recognised the importance of valued social roles for vulnerable people in our community as the key opportunity to gain the good things in life.

“Dr Wolfensberger had a strong commitment to people made vulnerable in a society where individualism, utilitarianism and hedonism reign. He made a huge contribution to people with disabilities. He was a visionary, a devastating analyst and honest critic.”

Much of Wolfensberger’s work has been concerned with ideologies, structures and planning patterns of human service systems, especially concerning persons with intellectual disabilities and their families, but also relevant to many other groups at risk of marginalisation in our community. He has authored and co-authored more than 40 books and monographs, and has written more than 250 chapters and articles. He completed a philosophy degree, and a Masters and Ph.D. in psychology. From 1973 until his death in 2011, he was a Professor in the School of Education at Syracuse University, Syracuse, New York State, and the Director of the Training Institute for Human Service Planning, Leadership and Change Agentry there.

Dr. Wolfensberger was the originator of Social Role Valorization theory and he was the foremost propagator of normalization in North America, building on the work of Bengt Nirje. These concepts strongly influenced disability policy and practice in the US and Canada. He was widely recognized as a major contributor to the field of intellectual and developmental disabilities in the 20th century had a reputation for being a stirring and controversial speaker.

In 1999, seven major developmental disability organizations in the US proclaimed Dr Wolfensberger one of the 35 parties that had been the most impactful on “mental retardation” worldwide in the 20th century. Dr Wolfensberger’s work was also recognised by the US magazine ‘Exceptional Parent’ as one of the great seven contributions to the lives of people with disabilities, along with Salk and the polio vaccine, braille, Americans with Disabilities Act and the wheelchair.

“Many people who have disabilities have benefited from his work in a change in focus from disability as a medical issue, or captives of care to one where a good life means living with others and in settings that are normally valued in our society. His work was instrumental in the deinstitutionalisation of thousands of people with disabilities. It has informed disability advocacy. I am aware that in his own life he personally modelled compassionate service to ‘needy people’, a much used Wolfensberger phrase. Love him or not, Dr Wolfensberger’s work..."
is lasting and cannot be ignored. He inspired many people, practices and policies, whether some are aware of that influence today or not.”

Many people who have been influenced by the teaching of Dr. Wolfensberger mourned his passing in 2011. We hope that this handbook will help another generation of thoughtful people to benefit from Dr. Wolfensberger’s insights on the importance of valued social roles for people at risk of devaluation.

*Ronda Held and Joyleen Thomas*

**More about Social Role Valorisation (SRV) Theory**

Dr Wolfensberger’s most recent definition of Social role Valorisation is: “the application of what science has to tell us about the defense or upgrading of the socially-perceived value of people’s roles”.

To find out more about SRV Theory and training opportunities in Australia visit [www.socialrolevalorization.com](http://www.socialrolevalorization.com). This site contains introductory articles, publications for sale and information about current workshops.
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