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EDITORIAL

As long as people with a mental handicap were stored in large institutions it was well-nigh impossible to do otherwise than underestimate considerably their latent abilities in social coping skills and the degree of personal independence they could attain. The subsequent move into the open community has introduced powerful new factors affecting our static picture of mental handicap. In the community there are an infinite number of hitherto inaccessible opportunities for learning and practising non-institutional living which have now become available to former "patients" many of whom are resident in Group Homes.¹⁾ Yet those opportunities are not always fully accessible, not always fully utilized and not always incorporated in a scheme of developmental education which would explain to the slow learner, reassure and guide him. Responsibility for such weakness in approach must be shared between people in immediate charge and their seniors, who will of course and with some justification plead lack of resources which permits them no more than establishing numerous well equipped and well staffed Group Homes. But the hesitancy in or the avoidance of using all relevant opportunities for learning and the inconsistent approach in utilizing offered opportunities are not adequately explained in this way.

To a great extent the variety of individual interpretations of Group Home living consisting of different mixtures of hostel accommodation and family home, training and care provisions has been advanced by giving much freedom to local management. Depending on their enthusiasm, vision, experience, readiness to experiment and to take risks, and by adhering to the guidelines of Normalisation, managers succeeded in establishing many very creditable Group Homes. Ratings on a scale of acceptability would, no doubt, show a remarkable general trend towards high ratings whereas a fairly crude dichotomy of "good" or "bad" appeared to supply adequate and fair descriptions of even upgraded wards in hospitals. Whilst it would probably be very difficult nowadays to find more than a handful of "bad" Group Homes it is obviously impossible to guarantee everywhere the same high degree of competence, devotion and perspicacity needed to pursue well defined aims in spite of setbacks and obstructions. If Group Homes were to be judged not alone by the home atmosphere enjoyed by all residents but also by the degree of personal independence attained by them as a consequence of a deliberately applied methodology at the Home, then few Group Homes would manage to obtain high ratings.

How will residents learn to look after themselves, their home, their belongings even to a small degree if contract labour from outside takes on all the chores of cleaning the house, maintaining the lawn, and if cooked meals are delivered? How are adults to learn to take responsibility for their actions if they are treated like children and are sent to bed at a predetermined time regardless of the interesting and instructive TV programme in progress? How are they to learn anything about quantities, prices, money, social behaviour, if all the food is bought in bulk and they have no opportunity to go shopping for domestic purposes? How are they to acquire knowledge of risks and how to safeguard against them, if glass jars, electric gadgets, boiling kettles, microwave ovens etc, are kept out of reach? Why is none of the residents permitted to keep his own savings book so that he can acquire appropriate financial skills? Why must all residents permanently experience canteen queuing up skills in their own home besides learning them at work, when their social competence could be increased by acquiring family mealtime skills?

There are, of course, always very good reasons put forward for these "negative" practices but these reasons are not very convincing when rules are applied indiscriminately to everyone and they are even less convincing when other Group Homes get on quite comfortably without having to rely on these or similar inhibitory arrangements. The perennial answer "We have far more difficult/incompetent people to look after" just won't wash. If the answer were "We do not want them (the residents) to run risks nor risk our (the staff's) professional careers nor the novel approach (normalization) of living outside institution walls", it would indicate an understandable attitude, though too traditional to fit in with the demands of today.

Even the presence of "positive" practices can be perplexing in view of the many shades of "normal" approaches adopted by the various house fathers/mothers. They are responsible for conspicuous cleanliness in one Group Home, but also for untidiness in the other home; for the neat appearance of the residents here, and for the sloppy get-up there, and for a wide range of "normal" ways of serving meals to the many residents of the Group Home when it is difficult to maintain the "family group" pretence. They decide that residents can get up on Sunday morning when they choose, but residents at the other Group Home must adhere to the "rules"; here they can dispose of their spending money freely, there they have to account for it; in this place they are excused from household chores because they are working "outside", but in the other place they share in household duties after working hours; — these are variations of the normal living pattern of small family units, and they can become institutionalised routines for the large number of people in a Group Home, not because particular practices will help in developing some independence and sense of responsibility in the residents but because the routine is convenient, justifiable and, one suspects, suits the personal life style of the responsible house father/mother.

"It suits me" must not become the hidden persuader for adopting unproductive "normal" practices in hundreds and hundreds of "normal" Group Home principalities organised to the best of the houseparents' knowledge and beliefs. Even at the risk of offending the majority of diplomated, qualified and experienced staff one has to point out, that neither examinations passed nor years of service guarantee the correctness of a particular approach. The new environments we have opened up for mentally handicapped people have produced increased responsive-

ness and better functioning, and thus much knowledge taught and experience acquired under totally different circumstances are now considerably less valid than only a few decades ago. In favourable conditions and with adequate nurturing people with a mental handicap will be able to spring a few welcome surprises on us and we must therefore search to introduce additional factors which might help in this process.

The introduction of the operational philosophy of Normalization has not only opened up new perspectives but provided an easily understood, down to earth practical approach to daily living which is manageable (at least in its initial stages) and is socially widely approved. Guided by the principle "Let everything be normal" and by the firm belief of management and staff: "We are normal, therefore everything we do and we like is normal and so it should be the same for people in our care", a wide range of normal standards is introduced in the Group Home, irrespective whether they serve, hinder or confuse. Not every kind of normal living supports developmental work in the most suitable and effective manner and decisions will have to be made what to select and what to reject. The concept of Normal Living as applied to the Group Home, is only a blurred target which needs to be brought into sharp focus if our efforts are to have maximum impact. By focusing on the further development of the individual human being living there — and not merely on how he lives there — we reaffirm that the task is to enable him to attain the highest level of independent functioning he is capable of. This must become the first commandment in any guidelines for management, and practices, rules, regulations and the choice of this or that way of living will have to be judged and adjusted to serve this paramount aim. The absence of a statement in job descriptions and in the outlines of principles of Group Home work in the UK and in Europe generally, defining the educative role of staff, is responsible for creating staff attitudes and practices which are too often limited to adequate feeding, cleaning, occupying mentally handicapped people and, generally, to making and keeping them happy. A worthwhile job indeed, but surely only a step in the right direction. Simply laying down in writing that Group Homes have to collaborate with other agencies concerned with the further development of m.h. people, e.g. Social Education Centres, Adult Training Centres, etc. in an active and consistent way, is not sufficient, since it is necessary that Group Homes themselves take on a formative role which exceeds by far its present ambience. There are difficult and controversial issues involved far too complex to be left to the judgments of isolated Group Home leaders and it is therefore also high time to get down to the task of evolving a Code of Practice for developmental work in Group Homes which, even if it has to be frequently altered to keep pace with new experiences and insights, will provide a basis for more effective work than can be done at present.

FOOTNOTE

1) GROUP HOMES: In this context the term refers to "hostels", "half-way houses", "family group homes" etc. usually catering for groups of adults in excess of the size of a family unit, and with full staffing during the day and mostly during night as well. These Group Homes may include special training facilities for a small proportion of residents, but the majority do not receive full or even part time training on the premises. To some extent there is a risk that the size, constitution and management of Group Homes will make them liable to become displaced ward units of institutions.