

# Wolfensberger's SRV-Related Service Construct of Model Coherency: A Brief Overview of its Evolution, Elements, Uses & Dissemination

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**D**R. WOLF WOLFENSBERGER'S Social Role Valorization-related construct of service model coherency is a significant contribution to the intellectual corpus of human service literature, especially in regard to how services should be structured and conducted. People familiar with his writings and teachings on Social Role Valorization (SRV) (Wolfensberger, 1983a, 1992, 2013), normalization (Wolfensberger, 1972), and PASS (Wolfensberger & Glenn, 1973, 1975) will have had some exposure to model coherency, though not necessarily to the extent necessary for putting it fully into practice. This is primarily because, while the essence of model coherency is not hard to comprehend, it can be quite difficult to actually achieve and sustain a model coherent service. That takes both theoretical and practical understanding of the construct, as well as significant commitment, determination and perseverance to carry it out in reality. Yet it is a concept that is so potentially useful in building and providing adaptive service, that a service that achieves and retains model coherency will be of vastly higher quality and effectiveness in addressing the needs of its recipients than a service deficient in model coherency, as—unfortunately—so many are.

This article draws heavily on Dr. Wolfensberger's work *The Construct of Model Coherency as the Key to Human Service Quality: What Model Coherency Is, and How to Design and Evaluate Service Model Coherency* (in press). He brought the man-

uscript for this extensive (proposed two-volume) book to near-completion just before his death in 2011. It provides the most definitive explanation yet published of his model coherency construct, and is, in our opinion, a document which should be studied and used by everyone who wishes to deepen their understanding of both the nature of human services and of how to assure that a service is genuinely true to the identity and needs of the people to whom it is provided.

## The Evolution of Wolfensberger's Model Coherency Construct

**D**R. WOLFENSBERGER would customarily advance and refine over time just about everything that he conceptualized, taught and wrote. He did the same with his construct of model coherency, and so it is useful to briefly chart the evolution of his thinking about model coherency as an adjunct to normalization and then later to SRV.

In the late 1960s, Wolfensberger spearheaded the introduction of the Scandinavian idea of normalization into North America, starting in Omaha, Nebraska where he was then living and working. In 1968, the Nebraska state legislature enacted a new mental retardation service reform bill. Dr. Wolfensberger was one of the key actors shaping this reform by developing new service standards that shifted money away from institutional services toward a new integrated system

of community services based on normalization ideas. The first written set of these standards was run off on a mimeograph machine: the high-tech pinnacle of duplication in those days (Wolfensberger & Glenn, 1969). One of these standards was called “specialization.”

The idea of specialization is also notably mentioned in two other publications of which Wolfensberger was a major author and editor: *Changing Patterns in Residential Services for the Mentally Retarded* (Kugel & Wolfensberger, Eds., 1969) and *The Principle of Normalization in Human Services* (Wolfensberger, 1972). Both of these books are reckoned among the most important publications in the history of the field of mental retardation. Each explicitly identifies “specialization” as a “cardinal feature” of future (residential) services.

Even so, in all three of these early sources, i.e., the two books and the new standards, specialization is only broadly described, as for example, implying such things as separation of the domiciliary function, smaller and more dispersed settings, and being adapted for serving people with certain characteristics and needs.

However, the document containing the aforementioned Nebraska reform standards formed the basis for the subsequent formulation of a tool for evaluating service quality. The tool was called PASS, for Program Analysis of Service Systems, and was published as a book by Wolfensberger and Glenn (1973). The book is small, but the tool was mighty. It contains 41 criteria or ratings for implementing and assessing normalization and other adaptive service practices. The most important of these ratings is “Specialization,” meaning “that the service provides a coherent program in which a number of variables combine harmoniously so as to meet the specific needs of each client at that particular time of his life” (p. 31). Note the word *coherent* in that definition.

In the 1975 edition of PASS, the number of ratings was increased from 41 to 50, and the description of the “Specialization” rating was expanded and its name changed to “Model Coherency.”

Thus, Wolfensberger’s initial concept of specialization was the conceptual parent of his construct of model coherency. As he explained,

*[O]perators of “omnibus” facilities often discovered that different service recipients were very different from each other, had different needs, and needed or benefitted from different kinds of services or service arrangements. This is how service differentiation and specialization—hence steps toward model coherency ... came about.* (Wolfensberger, in press)

Model Coherency is the most important of the 50 ratings in PASS. For example, Model Coherency is:

- the most highly weighted rating in PASS;
- the rating most closely correlated to a service’s overall quality, meaning that a service’s overall performance on PASS usually closely parallels how it rates on model coherency;
- the rating that most clearly reveals higher level patterns that have significant impact on multiple narrower elements of service quality;
- the rating by which evaluators usually identify the underlying, or overarching, assumptions in a service;
- the rating that lays the groundwork for contextualizing all the other ratings.

The Normalization/PASS training culture flourished in the decade of the 1970s. It was the heyday of PASS, and therefore also of teaching Model Coherency. There were hundreds of PASS workshops, and thousands of participants. And many people learned Model Coherency then. But the pattern of teaching model coherency via conducting PASS workshops began to fade in the early 1980s, and had basically disappeared by the 1990s.

This happened mainly because the primary author of normalization, Dr. Wolfensberger, put aside normalization, and supplanted it with his new formulation of Social Role Valorization, “which he believed was far superior to normalization as a framework for adaptive service. Many of his students and associates who agreed with him also switched over to ... SRV. Even those who did not switch over nevertheless did stop teaching normalization qua Normalization, although some continued to disseminate its ideas under other forms” (Osburn & Caruso, 2011).<sup>1</sup>

SRV was a reconceptualization that very explicitly put valued social roles as the penultimate goal on the way to “the good things in life” (Wolfensberger, Thomas & Caruso, 1996), in contrast to Normalization, which has multiple, less specified, and often variously interpreted goal points. After SRV came on the scene, Normalization pretty much faded away in North America, and nearly everywhere else, except in its Scandinavian homeland where it retains considerable currency. Likewise, almost immediately after Wolfensberger and Thomas published PASSING in 1983, the use of PASS also more or less vanished. [One could say that with the advent of PASSING, PASS passed on.] And, with the passing of PASS, the teaching, learning, and use of Model Coherency also declined—greatly.

The name PASSING was chosen to signal a close connection to PASS, because both instruments are similar to each other in some major respects (e.g., in their multiple weighted ratings structure and application processes). However, there are also big differences between PASS and PASSING besides the fact that one primarily assesses Normalization and the other assesses only SRV. A fundamental difference between the two is that PASSING was intentionally designed to be “easier to learn” than PASS in order to make it theoretically accessible to being used by more people. Why this is important to our topic is that one of the many things the authors of PASSING did to make PASSING easier to learn than PASS

was to not include in it a model coherency rating. Instead, in PASSING, most of the constituent elements of model coherency are teased apart and assessed by separate ratings. So, as PASSING began to be disseminated, PASS itself fell rapidly by the wayside, into a state of almost total disuse. And, right along with it the major means of teaching and learning model coherency greatly diminished and nearly ceased: it was like “no more PASS, no more model coherency.”

However, model coherency did not disappear altogether. It remained on the back-burner for use on infrequent occasions by those who had previously learned it. For example, model coherency was sometimes used as a basis for conducting real assessments on existing services, and also as a guide for planning new services. Also, there were at least two “Advanced PASSING” workshops conducted by Darcy Elks at which model coherency was used in conjunction with the PASSING tool.

For those occasions, Dr. Wolfensberger wrote two separate stand-alone documents for assessing what he called “model coherency impact,” in a form and format that was much more detailed and expansively explained. One of these was a 1993 80-page version, and the other a 120-page version in 1994. These were unpublished and only selectively distributed among workshop participants. As far as we know, they were only used on a very few other occasions, and those were in the conduct of real (i.e., non-practice) evaluations.

The point is that model coherency never was totally forgotten nor fallen into total disuse, but rather that model coherency teaching and use was infrequent, sporadic and in low profile compared to the “heyday” of PASS mentioned earlier.

Just three more important points to make about the evolution and dissemination of model coherency.

One is that what eventually came to be known as Social Role Valorization was already being formulated by 1979. However, this new formulation was not yet being called “SRV,” but rather was still referred to as “normalization.” The new formula-

tion was being taught in three-day introductory workshops structured around “seven core themes of normalization.” It continued to be called Normalization until early in 1983 when Wolfensberger settled on Social Role Valorization as the new name for his new formulation (see Wolfensberger, 1983a), and that new term replaced the term Normalization in the introductory training workshops’ title and content. However, the workshops continued to be structured around the seven core themes, except now they were called the seven core themes of (or for) SRV, not Normalization.

Another factor to be considered here is that the first published edition of *PASSING* (Wolfensberger & Thomas, 1983) was already in press before the new name was coined, so when it came out it, unfortunately, still referred to “Normalization.” This was awkward because SRV was being taught with a *PASSING* book that called it “Normalization.” However, this problem was gotten around pretty well by explaining to *PASSING* users what happened and asking them to simply mentally substitute “SRV” for where they were reading “Normalization,” which they were able to do with no difficulty. And some readers may remember that situation because it continued all the way up until the publication of the 2007 (Wolfensberger & Thomas, 2007) third revised edition of *PASSING*. Dr. Wolfensberger liked to call this edition “The Gold Standard,” because (we hope) he felt it represented the zenith of *PASSING* thought to that point, and not merely because it has an almost gold-colored cover! This last published edition of *PASSING* refers only to Social Role Valorization. It was decided not to change the book’s title to account for the switch to SRV. Partly, this was because *PASSING* was originally an acronym that stood for “Program Analysis of Service Systems’ Implementation of Normalization Goals.” You can see that substituting SRV for the ‘N’ in *PASSING* just doesn’t work, so it’s now just called *PASSING* (with no acronym).

All the while, long before the “Gold Standard” came out, Wolfensberger and Thomas had con-

tinued to advance and enhance the explication of SRV via other publications (articles and books) and in the introductory SRV training materials. One major result of that effort was to expand the number of the core themes of SRV from seven to ten; this came about circa 1995. This is why one may sometimes hear references to “SRV 7” and “SRV 10.” One of the three newly added themes was Model Coherency, and a (ca. 60 minute) module on model coherency has since then been included in introductory SRV training. Even though this module is explicitly a barebones treatment of model coherency, it actually provides the only teaching on model coherency that most SRV-trained people ever receive, and this has been the case since about the mid-1980s.

Lastly, as noted, Wolfensberger’s last major writing effort was his book on *The Construct of Model Coherency As The Key To Human Service Quality: What Model Coherency Is, and How To Design and Evaluate Service Model Coherency*. It is by far his most thorough, extensive and in-depth exposition of the model coherency construct. It coalesces into one unified resource document updated and further explicated material on model coherency that he had previously written and taught about. It adds a vast amount of new, previously unpublished content. It represents the culmination of his thinking on what model coherency is, why it is important, and how it can be used in services. We think it is authoritative and deserving of widespread consideration, especially within the field of human services. His manuscript is the primary basis and resource for the remainder of this article.

### A Concise Explanation of the Model Coherency Construct

**M**ODEL COHERENCY is a foundational building block for human service. It rests on the reality that every service has a model, i.e., an overarching schema or framework according to which it is organized, shaped

or designed, although not necessarily consciously so. There are many different service models. Some of the more familiar ones are the developmental model, the medical model, the social casework model, the correctional model, the religious reform model, the military/disciplinary model, and others (Wolfensberger, 2013, p. 145). However, every service model, no matter what kind it is, has in common the same four universal components, which are:

### ***The Assumptions Upon Which It Rests***

ASSUMPTIONS PLAY A DECISIVE ROLE in shaping human service models. They are the bedrock ideas, beliefs and mindsets underlying everything about the service. Assumptions are held on many different levels, from the most fundamental aspects of human life to the most mundane matters of everyday existence:

*Specifically, five types of assumptions play a very large role in the conceptualization and implementation of human service models: (a) cosmic assumptions; (b) assumptions about the identity and nature of humans, i.e., about human nature; (c) assumptions about what are problems that services (or a particular service) can and should address; (d) assumptions about what is likely to work in addressing a problem via a human service, which usually also includes assumptions about who the parties are that are most suitable to render or administer a service; and (e) assumptions about what the ideal world would be like. (Wolfensberger, in press)*

Additionally, assumptions may or may not be based on fact. They may or may not be valid, and may or may not be fully explicated. They may be conscious or unconscious, which is to say that service personnel, including leaders and others associated with the service, may or may not be fully aware of what assumptions they hold about it.

### ***The People It Serves***

ANOTHER UNIVERSAL COMPONENT of all service models is, of course, the service recipients, the people to whom an entity provides or offers its services. In the realm of human services, the people served so often are highly likely to be socially and/or societally devalued, meaning they may be of marginal status, lowly, rejected, unwanted, impaired, elderly, sick and wounded in many other ways by negative experiences and life conditions, including being put away from valued society and valued people, lacking adaptive meaningful relationships, and (for any or all of these reasons) being vulnerable to being made dead (Wolfensberger, 2005).

### ***The Content of the Service It Provides Them***

THE THIRD UNIVERSAL COMPONENT of service models is the program content—what the service provides.

*The service (i.e., program) content is the real essence and purpose of the service. Every service model has at least one content, but in comparison to the myriad of service processes, the number of conceivable contents is relatively small ... (C)onceivable contents that a model conveys include health, a bodily skill (e.g., the learning of ambulation), intellectual development, communication ability, a mental skill, social skill, work habits, mental stability, a sense of security, a place to live, sobriety, belonging, etc. (Wolfensberger, in press)*

The model's program content may, in a sense, not be "visible," in contrast to its program processes, noted below, which display the service in action.

### ***The Processes by Which It Conveys Its Content***

THE FOURTH UNIVERSAL COMPONENT is the service processes—the ways and means by which the service content is rendered. As conceptualized by Wolfensberger, all service processes can be categorized into five subcomponents: settings,

servers, methods and technology, groupings, and language.

- **Settings**—the physical environment in which a service is rendered, comprised of (a) the geographic tract or site on which it is located and which it controls, (b) any facility or facilities it contains, and any additions thereto, (c) the grounds or estate around the facility, and (d) fences, walls that might surround and belong to the grounds, signs on the facility and grounds, etc.

- **Servers:** Any person who—either on their own initiative, or deployed by a human service agency—performs, carries out or supports the functions of, service to one or more recipients. Such a server may be either paid or unpaid for rendering this service.

- **Methods and technologies:** All of the other practices, routines, strategies, tactics, plans, procedures, activities, techniques, material supports, etc. that a service utilizes to deliver its content to service recipients. This includes personal associations (other than those with other recipients and servers), activities and other image communicators.

- **Groupings:** The population of recipients selected and/or constituted so as to receive a particular service. Groupings may consist of one person (in other words, there can be “a group of one”) or any larger number. A grouping may also be divided into smaller groupings, called “sub-groupings,” within a program.

- **Language:** The type of language that is used to and about people, their needs, general service approach, service content and service processes.

A service model is coherent if all its parts fit together logically and harmoniously. In other words, a model coherent service combines valid and positive beliefs with deep understanding of

the identities and needs of its service recipients and the provision of content that actually addresses recipients’ needs in highly effective ways. As noted, there are various types of service models, and in practice, lots of services are incoherent combinations of different models. Thus, the key to model coherency is that all components and subcomponents of the model are well-matched to one another to effectively address the needs of the people to whom the service is offered. In contrast, misfit among or between any elements of the service model leads to service dysfunctionality and even disablement.

Admittedly, the above notions of model components may seem to be somewhat abstract, so let’s illustrate them with a concrete example of a child with a kidney problem that is addressed by a coherent medical service model and is therefore likely to have a positive impact on the child.

- It is consciously based on such fundamental assumptions as that:

- (a) people get sick;

- (b) helping people to overcome sickness and disease and to regain and preserve good health is a worthwhile and needful thing to do;

- (c) expert intervention can help restore health.

- Its service recipient is a sick child who needs to have health restored.

- The service content it offers is the restoration of the child’s health.

- The processes it uses to restore the child’s health are:

- (a) discoursing in medical language (e.g., diagnosis, treatment, prognosis),

- (b) in a medical setting (hospital),

- (c) where the child is grouped with other children on a specialized ward,

- (d) under the care of medical experts (doctors, nurses, other specialists),

- (e) providing the child individualized medical

treatments and care (surgery, medication, rest, monitoring).

Note how incoherent this service would be if one or more of these elements was out of whack, such as if surgery were done on a table in a restaurant kitchen, or if the child were being operated on by school teachers, or if, instead of surgery, the only treatment given her was a two-hour session of aroma therapy. The model would be very incoherent and, therefore far less likely to be effective—perhaps even resulting in the child's death.

Besides harmony, two other major concepts embodied in model coherency are relevance and potency. Service relevance is present when there is harmony between recipient needs and service content. Service potency is enhanced when there is harmony between and among recipient needs, content and process elements. These two concepts together can be thought of as constituting the “role valorizing” power of a service (Wolfensberger, in press).

### ***The Relevance of Its Service***

THE CONTENT OF A SERVICE—what it provides—must have relevance to recipients' needs. In order for a service to be relevant to its recipients, those who provide it must first have a thorough understanding of at least the major needs of their recipients, and more importantly, must then actually provide a service that genuinely addresses one or more of those needs. This all sounds so obviously true and straightforward, but the fact is that a great many services are not truly relevant to the needs of their recipients; at best, they may only minimally or partially address what is needed by the people they serve.

There may be many reasons why a service lacks relevance. Among these are:

- what the service provides may be relevant to recipients other than the ones it is serving, in which case the service model lacks relevance to

the actual service recipients, and may actually be harmful to them;

- similarly, what the service provides may be relevant to some of its recipients, but not at all relevant to its other recipients, and again may be detrimental to them;

- an organization may start out serving people who need what it provides, but when funding for that service is discontinued, it shifts to providing a service for which funds are available (a common organizational survival mechanism), and reinterprets its same recipients via language and other processes that do not match recipients' identities and distorts perceptions of their true needs;

- service workers' sociocultural characteristics, backgrounds and lifestyles may be vastly different from those of the people they serve, leading them to misinterpret what their recipients need and thus to employ processes of serving them that are poorly relevant;

- service workers may have difficulty genuinely empathizing and identifying with the people served, and therefore in identifying their pressing needs;

- service recipients may have significant, complex and highly demanding needs that are very difficult to address, and service providers may not know how to address them, nor be prepared or supported to do so even if they do know;

- relatedly, service workers may want to do what they were trained for, such as a certain clinical technique or therapy, but service recipients do not need what workers were trained for;

- certain laws, regulations, funding patterns or administrative policies, may disincentive services doing what people really need, such as forbidding teachers to give a comforting hug to an upset young pupil;

- service providers may never have learned or even heard of program relevance.

### ***The Potency of Its Service***

THE PROCESSES of the service—how it is provided—must have potency, i.e., sufficient power and intensity to actually accomplish what people need, especially in regard to addressing their image and competency needs. Potency maximizes the likelihood that the desired outcomes occur, and that the positive impact potential inherent in program relevance (if actually present) is actualized to the fullest extent possible.

Insofar as processes are the vehicle for conveying the relevant content, all processes should meet three criteria: (1) they should be known to be effective, or believed likely to be so; (2) they should avoid doing harm, or at least only the minimal amount of harm; (3) they should be, or come as closely as possible to being, culturally valued analogues, meaning that the content is conveyed in the same ways as the same or similar content is conveyed to valued people (Wolfensberger, in press).

Some hallmarks of a potent service are:

- recipients' time is respected, never wasted, and is used with purposefulness, intensity, and efficiency—making hay while the sun shines—rather than squandering precious developmental growth potential and opportunities, such as happens so often, as when a person is left to linger unremittingly on a so-called “waiting list,” made to wait months or years to receive a needed service (e.g., an orthotic or a wheelchair or some other material support item), or is in a service but sits idly hour after hour possibly for months and years;

- recipient grouping size and composition facilitate rather than constrain the conveyance of relevant program content;

- competency-enhancing personal material supports and equipment are made use of, and provided where relevant;

- service is conducted in physical settings that: (a) enhance recipients' image via such features as: harmony with their culturally valued analogues, aesthetic appeal and valued locations; and (b) that promote recipients' competency via features such as: easy accessibility, nearness to relevant generic resources, physical comfort, etc. (see Wolfensberger & Thomas, 2007).

A shorthand way of putting the basic ideas of model coherency is that it asks several main questions:

- who are the people, and what are our assumptions about them,
- what do they need, and what are our assumptions about these,
- what content will address that need (relevance),
- what are the best processes for addressing that need in a way that is most:
  - \* potent and effective,
  - \* image-enhancing,
  - \* competency-enhancing.

### **Model Coherency Tool Subjects**

IN SPITE OF the seemingly “simple” questions above, model coherency can be challenging to understand intellectually, and even more so to actually achieve in the realm of human service. To help with this, Wolfensberger identified six concepts which play an important role in the realm of model coherency. He called these key notions “tool subjects” (Wolfensberger, in press), and considered them essential to understand because they provide ways of thinking that are basic to achieving model coherency. One might also think of them as thought-guides or points of reference for planning and implementing coherent service models. (These are only briefly noted here, but all of them are covered in depth in other contexts,



such as the SRV literature and training, and especially in Wolfensberger, in press.)

### ***The Distinction Between Programmatic and Non-Programmatic Service Considerations***

THE FIRST TOOL SUBJECT is the distinction between programmatic and non-programmatic service considerations. All human services have to deal with both types of considerations. Programmatic considerations are ones that emanate directly from the identity and needs of service recipients—who are the people, and what do they need. When using model coherency, these considerations are always primary: they stay in the driver's seat so to speak. They determine the validity, meaning, quality, purpose and outcome of a service from the perspective of the recipient of the service. Despite this, it is rare for the programmatic considerations to actually be dominant in most service provision.

Non-programmatic considerations are everything else, such as: legal and judicial mandates, regulatory requirements, funding issues, political (both big P and little p) concerns, personnel matters, and so on. However, non-programmatic factors do come under consideration in regard to model coherency because they almost always have programmatic impact and, most often, interfere with programmatic efforts and desiderata. Services that do not understand this distinction are often totally overridden and determined by non-programmatic concerns, with devastating impact on their model coherency and, more importantly, on the people being served. So, in order to attain and maintain model coherency, it is necessary to make distinctions between programmatic and non-programmatic considerations so that both can be weighed and addressed adaptively.

### ***The Distinction Between the Content and the Process of a Service***

THE SECOND TOOL SUBJECT is the distinction between service content and process. As already ex-

plained, service content is what gets delivered to service recipients; the process is how and in what ways the service delivers its content to recipients.

Highlighting the importance of making this distinction is necessary because the two are constantly being confused, not only because drawing this distinction can often be quite difficult, but also because the difference between the two does not get taught. But it is important to know and make this distinction because confusing them with each other has negative impacts on service relevance or service potency or both. The right content makes the service relevant; the right processes make it potent.

There are relatively few contents, and a great many processes. For example, restoring health is a needed content for some people. There are many processes by which this content could be conveyed, ranging from establishing a balanced diet and good nutrition to regimens of formal and informal exercises, medication, surgery and an array of other approaches. "A general rule of thumb is that if there is more than one way in which something could be delivered, you are probably dealing with a process rather than a content" (Wolfensberger, in press).

As noted earlier in regard to content, what are actually program processes are often confused with being service content. For instance, a person who needs restoration of limb function may be said to "need physical therapy." Formal physical therapy is one process among many that can deliver the content of function restoration. But to restore a limb function, one may also benefit from surgery, or from certain "ordinary" (informal) exercises, which are other processes.

Another reason content and process are often confused is that it is especially processes that are affected by non-programmatic considerations. For instance, whatever servers on the spot are able to do, such as surgery, may get considered to be relevant content, but surgery is not a content; it is a process for delivering the content of health restoration.

### **The Theory of Social Role Valorization**

SOCIAL ROLE VALORIZATION (SRV) is an extensive theory that cannot be well covered here; it is described much more thoroughly elsewhere (e.g., see Wolfensberger, 2013, 1992; Wolfensberger & Thomas, 2007; Osburn, 2006). The main point here is that SRV is a central tool subject for making good use of model coherency. Its basic proposition is that service recipients, many of whom are devalued people, are likely to be treated better, or at least less badly, if they are perceived to be in social roles that are valued in and by their society. The fact that most ordinary individuals in our society are not devalued is largely due to their valued role-incumbency, meaning that most people commonly hold a good number of valued social roles. For instance, an individual person may simultaneously hold multiple valued roles, such as parent, spouse, worker, tax-payer, voter, customer, neighbor, firefighter, coach, volunteer, beloved son and brother, church member, to name a few. Thus, SRV further posits that virtually every devalued person, no matter what his or her circumstances, could be supported in filling at least one, and possibly quite a few, valued social roles, and thus be more socially valued, or at the very least become less devalued. SRV gives much guidance on how this can be accomplished. For example, enhancing service recipients' image and competency are the two main thrusts of role-valorizing action in providing service that supports people to hold more valued roles, and thus to receive more positive, valuing responses from others.

Social Role Valorization is strongly linked to model coherency in at least five ways.

SRV addresses the realities of social devaluation and the existence of people and classes who are socially devalued. These realities are also of central importance to model coherency because, so often, it is services to devalued people that tend to be model incoherent; valued people, almost by definition, tend to be given culturally valued services and practices, and these tend to have much more coherency to them.

Also, one of the strongest links is via the constructs of needs, competency and imagery, all three of which are at the very highest levels of concern in both SRV and model coherency.

Model coherency, with its related constructs of relevance and potency, is one of the ten teaching themes of SRV (see Wolfensberger, 2013), and it is taught in all leadership-level SRV training events.

Also, the SRV teaching themes are closely linked to the components of model coherency. For instance, the theme of (un)consciousness is of the greatest relevance to the fundamental assumptions held by a service about all sorts of things. The desideratum that what a service provides its recipients should match what they need is a top-level concern in SRV where it is called "service relevance," as well as in model coherency where it is called "need-content coherency," and also in PASSING in the rating "Program Address of Recipients' Needs."

SRV is the most overarching of the six tool subjects, in that the other five are directly or indirectly subsumed by SRV. Also, as a tool subject itself, SRV gives prominence to the assumption that striving to address devaluation and its derivative implications is a primary reason to work towards model coherency.

### **The Concept of Culturally Valued Analogues**

THE CONCEPT of the Culturally Valued Analogue, or CVA, is another vitally important model coherency tool subject. According to Wolfensberger (in press),

*(A) culturally valued analogue to a particular type of human service as a whole, or to any element of such a service, is either the same kind of arrangement that is made by or for valued people in open society in order to meet the same need, or is at least very similar to, and based upon, such kinds of arrangements. In other words, the first pattern, or standard, to be considered for one's human service model—especially in services*

*to societally devalued people—should be the kinds of things that are apt to be done to and for valued people. The reason is that basing a service on culturally valued analogues greatly increases the likelihood that the service will convey positive images about its recipients, and that good things will be done to the recipients.*

The Culturally Valued Analogue concept rests on the assumption that devalued people should be enabled to experience what is ordinarily valued in the culture, the same as valued people do. It posits that striving for the good things in life for recipients is a right and proper service goal. Providing service in ways that are consistent with the CVA is more enhancing of recipients' image and competency, and therefore also of the likelihood that they will have more valued social roles, and experience more of the good things in life. It rests on common wisdom and general life experience in knowing what is valued, but its application will usually entail a deliberate study or articulation of this. The CVA concept has enormous implications to service because it helps shape determinations about how to address people's needs. In other words, it provides a yardstick—an overarching criterion—against which to measure determinations about all model coherency process elements.

### **Service Purview**

THIS TOOL SUBJECT refers to the scope or limit of responsibility and concern that a service rightfully has in recipients' lives. It is like "a perimeter around what is proper for a service to undertake" (Wolfensberger, in press). There are three main criteria for determining service purview:

1. By the CVA—looking at the purview of a valued analogue for the service.
2. By mandates—either hard mandates where purview is defined and imposed on the service by some external authority; or, self-imposed mandates, such

as parameters delineated by the service in its mission statement or articles of incorporation.

3. By the circumstances and needs of recipients. For example, it would be within the proper purview of a residential support service for adults with severe mental and physical impairments to help its residents with dressing, eating, transportation, shopping and all sorts of other things. In contrast, it would be way beyond the purview of a superintendent of an apartment building housing non-impaired valued adults to do those sorts of things.

An underlying assumption here is that a service operating within its proper purview is likely to have or develop a higher degree of specialization, which is inherent in service model coherency (as mentioned earlier), and leads to higher service quality.

Maintaining a sense of one's proper service purview can be a challenge that requires vigilance to discern both for whom and for what one has proper service responsibility and, in contrast, what would exceed that responsibility, constituting a biting off of more than one can or should chew. Service providers, especially in formally organized entities, often feel that expanding or overreaching their purview is a necessity, such as for humane reasons, because other relevant, effective services are not available. This may make sense as a controlled and temporary response, but always carries a danger of upsetting the stability of the service model and, by becoming a permanent fixture, creating content and process incoherencies, inhibiting development of coherent other services, and also starting movement down a slippery slope of growth and empire-building. It is important to note that this is the story behind all sorts of human service empires which were unable to resist organizational growth dynamics to preserve quality and stay within their own competency limits.

### **The Concept of Helping Form**

THE LAST TOOL SUBJECT is the concept of "helping form," of which there are two types: those

that are culturally valued analogues, and those that are not.

On the one hand, the CVA type of helping form is most often carried out without any human service program being involved. As noted, it is the way most valued people have their needs addressed. For example, in the valued culture, a child's need for home is typically addressed by the culturally valued analogues of family home, living with grandparents or other relatives in their home, possibly a boarding school, home with a governess, etc.

On the other hand, a human service may employ either or both types of helping forms, i.e., CVAs and non-CVAs, to deliver the same content. In other words, human services often conduct services via helping forms that are not highly or even at all culturally valued. So, again, with the example of a child's home, a human service might address that need through such helping forms as supporting the child and family in their own home, arranging for the child's adoption into a family, or for care in a foster home, a shelter, or dormitory, a temporary camp for migrant workers, or even an institution. All of these are helping forms within our culture, but not all of them are equally valued in the culture.

The point to keep in mind is that there are helping forms that are culturally valued and ones that are not: in human services these sometimes overlap, in that a human service may choose to employ a helping form that is a culturally valued analogue or it may use a helping form that is not culturally valued. Either way, the helping form concept is a useful tool subject for analysis that can help increase model coherency.

### Potential Applications and Uses of Model Coherency

**T**HERE ARE TWO MAIN WAYS to use model coherency. One way is to design a new service so as to be model coherent. The other, and historically more common, way is to analyze the model coherency of an existing service,

possibly in conjunction with PASS and/or PASSING. Wolfensberger developed a formal sequential multi-step procedure for conducting model coherency design, and a similar formal procedure for conducting model coherency evaluation. Both procedures require a disciplined approach, considerable (even prodigious) mental exertion, and ample time to apply. Both are intended and designed to be applied by a team of people<sup>2</sup> versed in both the model coherency construct as well as the accompanying tool subjects.

Wolfensberger also makes the point that model coherency is a service construct, and therefore applicable to both formal and informal services. By definition, this means it can be applied on, to or within services on the levels of the individual, the individual's primary (closely knit) social systems, and the intermediate/secondary social system, but has little applicability on the level of the larger society of the individual, group or class.

### ***Brief Overview of the Suggested Sequence of Steps for Applying Model Coherency to Service Design***

*Explicate Assumptions:* Assumptions, including fundamental beliefs and values, shape all elements of how a human service is designed and implemented. At the most fundamental level, beliefs about who is human and about how people should treat each other provide a basic framework. Within that framework, assumptions about the nature of the problem to be addressed guide the decision about who will be recipients of a service, the determination of their needs, and definition of relevant service content to address those needs. Further, assumptions about what would work to address those needs will shape the processes to be used. For example, if a service planning process determines that people should treat each other respectfully and be supportive to each other, then these assumptions will shape all aspects of the service. If planners identify devaluation as a fundamental problem facing a specific group of people,

then the service they design will seek to provide needed supports in ways that minimize or reverse the dynamics of devaluation, as is embodied in SRV theory.

*Determine Recipients' Pressing Needs:* If planners assume that potential service recipients should be supported to have opportunities for the good things in life (including reasonable likelihood of avoiding preventable harms), then the fundamental precondition for defining (pressing) needs in a way that will be beneficial to them is established. Within the context of such fundamental assumptions, effective identification of needs requires planners to assume that selected service recipients are fundamentally people first, that they have the same human needs as all people, that their strengths and limitations impact their support needs, and that their needs are shaped by their age, past experiences, current situation, and future vulnerabilities and opportunities. Planners for a model coherent service are then positioned to engage in an intensive process to gain insight into the identities of potential service recipients. Based on these insights, planners identify the full range of potential recipient needs (including common human needs and more specialized support needs), and then determine which of those needs are most pressing.

*Define Service Content That Is Relevant to Recipient Needs:* With a clear, agreed-upon definition of recipients' pressing needs, identifying relevant content to address those needs is straightforward. For example, if a person is homeless and needs a place to live, then relevant content would be an abode. If a person is ill and needs to have health restored, then some form of health restoration would be relevant. As noted earlier, there are only a few major types of program content. Service specialization enters into consideration at this point in the planning process. For example, if a person needs both health restoration and permanent abode, then two properly specialized services

probably would be called for because a single service—despite what it might claim—would hardly be likely to be sufficiently specialized in providing both contents in a model coherent, role-valorizing way.

*Identify Potential Approaches to Deliver Content by Listing Culturally Valued Analogues and Service Forms:* Service planners next identify a general approach for delivering the service content. The first step in selecting a general approach is to generate an extensive list of options. A first way to generate options is to explore the culturally valued analogue, that is, how the chosen content is provided to people in valued status in the culture. A second way is to consider a full range of options of service forms that provide the chosen content. For example, if the content is abode, consideration of the CVA would provide a listing of ways that people in valued status have an abode (e.g., own house, apartment, condo, trailer). Service forms for abode include in-home support, group home and nursing home.

*Rank Order Possible Approaches:* Among all the options identified in the previous design step, planners next develop a list ranking them in order of their desirability. The criteria of determining desirability are drawn from Social Role Valorization (as described earlier). The SRV-based considerations are the likely impact of each possible approach on service recipients' image, competency and social roles.

*Select the "Minimax" Approach:* Planners then provisionally adopt the approach that, in the preceding step, has been determined to be the most role-valorizing, and therefore the most likely to guide the design of a service that is both relevant and potent. Planning then proceeds toward design of the selected approach. However, the rank order listing of other approaches should be preserved should it become necessary to step back from the best option.

*Initial Feasibility Analysis:* Planners are called upon to consider programmatic issues first, and then to address non-programmatic issues (described above). Up until this point, the planning process has addressed only programmatic issues—that is elements of the planned-for service that directly impact the address of service recipients' needs. In this step, planners consider non-programmatic issues that will have an impact on service implementation and ongoing operation. The non-programmatic issues are real, and will have impact on the service design. It may be that the minimax option just identified cannot be implemented (e.g., insufficient funds, insurmountable regulatory obstacles, lack of constituent support), so planners may have to step back to the most desirable approach that is feasible. Adopting a service approach that is as close as possible to the minimax, and also feasible, positions planners to continue by designing program processes that are likely to be not only intense and effective in addressing recipients' needs, but also implementable.

*Develop Service Processes That Would Be Effective in Delivering Service Content to Recipients:* As noted, there are only a few types of program content, but the range of potential service processes to deliver that content is almost infinite. The sequence of steps in defining service processes when designing a coherent service model is significant. The recommended sequence is followed below.

*Decide on Language to Be Used in Developing the Model:* The selection of language to be used in designing the model is the first step in defining service processes that are consistent with recipients' identities and pressing needs, and also with the content that is to be provided. The kind of language that is used will shape how planners think about all other aspects of service processes. For example, if planners use the language of the medical model, then the service they design will have (perhaps unconsciously) elements of the medical model throughout the design process. If

planners use developmental model language, then developmental assumptions, and their derivative processes, will be more prevalent.

*Define Grouping:* While earlier parts of the planning process determined the “kind” of service recipients being planned for, this step in the design process defines grouping details. Grouping size, range of recipient ages, backgrounds, support needs and other characteristics should be considered when determining the nature of the grouping that would maximally facilitate effective address of recipients' pressing needs. SRV and PASSING identify multiple variables for consideration in developing optimal groupings.

*Identify Methods and Technologies to Be Used, Including Service Setting:* There are multiple components to identifying methods, technologies and service settings. Methods include a wide range of approaches—from surgery to informal advice—servers will use to address needs. Different approaches will make use of different technologies—from high-tech devices to comfortable chairs. Different approaches will have different image and competency impacts. Some of the approaches will be fully integrated into community life while others will be conducted with only the server and recipient present. Making use of key ratings in PASSING (described earlier) can guide planners to consider the full range of programmatic issues in determining effective methods, and technologies.

*Identify Settings To Be Used:* Once service content and several key process elements have been defined, planners need to define the kind of service setting(s) that will most effectively facilitate implementation. A range of image and competency considerations, as explored in SRV theory, are significant. Depending on the nature of the relevant content and on the processes selected to deliver that content, service settings may be fully integrated into community life, or they may be (substantially) separate.

*Define Server Roles, Images and Competencies:* With the language, grouping, methods and setting elements of program processes determined, the final step in defining the optimal service model is to describe the servers who will be sought and developed to provide the service. Here, planners determine the personal characteristics, competencies and service roles of prospective servers that are likely to be highly effective in providing relevant, effective service—service that has been designed to provide the content needed to address recipients' pressing needs.

*Further Feasibility Analysis:* With the model now fully conceptualized, a second feasibility analysis is called for. Again, the likely impact of non-programmatic considerations on the ability to implement and operate the fully conceptualized model is considered. Adjustments to some elements of most desirable processes may be necessary. Once these adjustments are made, planners have developed a relevant, potent service model that is ready for implementation, and whose implementation and operation are feasible.

*Implementation of the Model:* With the model designed, the next step is the challenge of actual implementation. Effective service implementation is a separate and rich area for study that is beyond the scope of this brief overview of model coherency design. Planners will need to engage with a range of other actors to build a functioning service from the conceptual framework of the model coherency design process.

*Safeguarding the Model:* A coherent service model is likely to be more challenging to implement than less coherent approaches. Especially if the service is designed to provide relevant, potent service to people in devalued status, there will be pressures during implementation, and then again other and different pressures during operation, that will tend to undermine the coherence and effectiveness of the model. To address these reali-

ties, service planners, implementers and operators should institute a range of safeguards (e.g., governance, training, evaluation, renewal).

### ***Brief Overview of the Suggested Sequence of Steps for Applying Model Coherency to Service Evaluation***

*Develop a Plan for Evaluation:* Typically, evaluations are planned by leadership of the service to be evaluated and the leader who has been selected to guide the evaluation. After agreement that model coherency (and fundamental assumptions undergirding model coherency as captured in the tool subjects) will provide the framework of the evaluation, decisions about the purpose of the evaluation need to be made. Within the context of these initial agreements, evaluation processes need to be defined. Decisions about who will conduct the actual evaluation, when and where it will be conducted, and a variety of other logistical arrangements need to be made. Processes to gather information about the service and the service recipients that are necessary to complete the model coherency analysis need to be defined. Processes about how the team will analyze the information gathered using model coherency need to be agreed to. Agreements need to be reached about how the conclusions and recommendations generated by the evaluation will be communicated. Detailed guidelines about planning model coherency (and other) SRV-based evaluations can be found in Wolfensberger, 1983b.

*Gather Information About Service Recipients and the Service:* Evaluators need to gather sufficient information about service recipients and about the service being provided to complete the model coherency analysis. Information gathered needs to position evaluators to gain insight into recipients' identities and (pressing) needs. Information gathered also needs to be sufficient for evaluators to determine actual service content and the processes being used to provide that content. Typi-

cally, information will be gathered through tours, observation, documentation review, and both formal and informal interviews. After needed information has been gathered, the evaluation process, except for offering feedback, is typically conducted without the participation of service providers and recipients.

*Determine Recipients' (Pressing) Needs:* The assumptions of evaluators will have significant impact on their understanding of recipient needs. In order to make good use of model coherency in service evaluation that is consistent with SRV and the other tool subjects, evaluators need to assume that service recipients are fundamentally people first, that they have the same human needs as all people, that their strengths and limitations impact their support needs, and that their needs are shaped by their age, past experiences, current situation, and future vulnerabilities and opportunities. Evaluators are then positioned to engage in an intensive process to gain insight into the identities of potential service recipients. Based on this understanding, evaluators identify the full range of potential recipient needs (including common human needs and more specialized support needs), and then determine which of those needs are most pressing.

*Identify Potential Culturally Valued Analogues and Service Forms:* Evaluators next need to identify potential approaches for addressing service recipients' needs. One way to generate options is to explore the culturally valued analogues for addressing similar needs of people in valued status in the culture. Another way is to identify service forms that address a similar range of service recipient needs.

*Determine Service Content:* Determining actual service content requires evaluators to consider what the service is actually providing to service recipients. Here, evaluators need to be clear that they are determining content (what is being pro-

vided) and not the processes (how the content is being provided). Earlier coverage of the distinction between service content and service processes touches on how evaluators can effectively make this distinction. An added challenge in making this determination is that what service providers say they are offering can differ significantly from what is actually being provided. Evaluators need to be sure that they are determining what service recipients are actually experiencing.

*Determine Service Relevance—Between (Pressing) Needs and Service Content:* In determining service relevance, evaluators conduct an analysis of the coherence (the fit) between recipient (pressing) needs and the service content being provided. If the content being offered is consistent with recipient needs, the service is relevant. To the extent that content is not germane to or consistent with recipients' needs, service relevance is diminished, perhaps to the level of irrelevance, or even to being harmful.

*Determine Service Processes:* There are multiple steps in determining the processes the service follows in providing the content. The model coherency tool subjects of SRV and the CVA guide the analysis of the impact of the full range of service processes on recipient image, competency and social roles. Analyzing the image and competency impact of the service setting is a straightforward starting point for identifying service processes. An important early step in analyzing service processes is to explore the grouping of recipients. Consideration of language used about service recipients and about the service is another important early step. With these foundation pieces of process analysis, evaluators need to consider a broad range of issues when analyzing the methods and technologies used by the service. A final area for consideration of service processes is the analysis of the identities and roles of the people providing the service. Evaluators need to be rigorous and disciplined in determining the full



range of service processes. PASSING is an SRV-based tool that, when used in conjunction with a model coherency analysis, insures that the full range of programmatic issues is considered. Because of the multiple components of, and large amount of information about, service processes, evaluators will usually need to identify patterns or themes within each of the process elements. Doing so will position evaluators to determine the coherency of the fit between and among process elements, service content and service recipient needs.

*Determine Coherence Between Service Processes and Needs, Between Service Processes and Content, and Among Service Processes:* Service relevance has already been determined in the analysis of fit between recipient needs and service content. Analysis of other elements of the coherency between recipient needs, service content and service processes is a multistep part of evaluators' work to determine the potency (effectiveness and efficiency) of the service processes.

- If the program processes fit coherently with the program content, then the service is more likely to be potent in delivering that content.
- When service process elements fit coherently with each other, the coherent elements will tend to increase each others' effectiveness.
- However, when there is incoherence between recipient needs and service processes, it is very likely that the service will not be effective in addressing recipient needs, or doing so with potency.

The points of analysis reached when this part of the evaluation process is completed are the evaluators' major, overriding conclusions about the model coherency of the service, and therefore its likely relevance and potency in addressing service recipients' needs.

*Infer Assumptions That Are Likely To Be Shaping Service Model:* Underlying assumptions (an essential component of model coherency) cannot be directly observed. Rather, conclusions about assumptions shaping the service must be inferred from consideration of patterns and themes identified throughout the earlier phases of the analysis. Here, evaluators are asking themselves what is likely to be believed about the service by its providers and others in order for various aspects of program functioning to be what evaluators determined them to be? What kinds of mind-sets would explain why the service is the way it is? Inferring some assumptions is straightforward when looking at certain realities of the service being provided. For example, by considering how service providers identify and address recipient needs, evaluators can infer service providers' assumptions about recipients' identities, needs and about what would work to address those needs. By considering the intensity of program activities, evaluators can infer service provider assumptions and expectations about recipient potential. By considering who service providers bring into contact with service recipients, evaluators can draw inferences about providers' assumptions about who recipients belong with, and who they should be kept away from. More difficult to discern, but of greater impact, are assumptions at more fundamental levels, such as whether or not service recipients are people deserving of the good things in life. Assumptions at this level shape derivative lower order assumptions. Clear identification of assumptions shaping the service model provides evaluators with a solid foundation for assigning a model coherency rating level, and for developing recommendations to service providers.

*Determine Model Coherency Rating Level:* Evaluators are then prepared to assign a rating level to the service. As with PASSING, rating levels range from level 1 to level 5. Level one reflects significant incoherency in the model, and therefore very low

likelihood of benefits for service recipients, and high likelihood of service impact being harmful. Level 3 reflects moderate coherence of the service model with the likelihood of benefits and harms from the service being roughly in balance. Level 5 reflects high coherence in the service model and therefore high likelihood that the service will be beneficial to service recipients.

*Develop Recommendations:* With the analysis of programmatic coherency of the service completed, evaluators are positioned to make recommendations to the service provider on ways that the service might become more coherent, and therefore more likely to benefit service recipients. Often, developing actionable recommendations will require evaluators to consider non-programmatic aspects of the service, such as governance, internal planning, resource management and training. Recommendations may address foundational issues such as high order assumptions shaping broad patterns in the service, or they may address narrow, particular issues. Evaluators may suggest ways to build on strengths identified in the service coherency analysis, or they may suggest ways to bring coherence to service elements where incoherencies were identified. Evaluators' final responsibility is to present the results of the model coherency analysis, and of recommendations to increase relevance and potency, to the people providing the service.

### **Important Caveat Concerning the Above Descriptions of Steps for Conducting Model Coherency Design and Evaluation**

**W**E INCLUDE THE ABOVE STEPS in this article only for the purpose of providing readers with a general idea of the nature and sequence of the processes involved in conducting model coherency design and analysis as recommended by Dr. Wolfensberger. However, it must be clearly understood that our description of these steps provides nothing more than an

incomplete thumbnail sketch. This is after all a brief article about a much lengthier two-volume book on model coherency (Wolfensberger, in press) in which these procedures are described far more comprehensibly and comprehensively and, in fact, constitute the entire second volume of the two-volume work. Therefore, we strongly caution the reader that use of the steps in any responsible effort to apply them in conducting model coherency design or evaluation must be based on much more in-depth and substantial explanation and guidance than can be provided in this short article. In particular, and at a minimum in our view, that would require two things:

First, responsible users of model coherency must make a dedicated effort to master the tool subjects of model coherency. If this is not done, then results of their efforts will lack validity. For example:

- If planners and evaluators fail to identify genuine service recipient needs (a common problem for reasons noted earlier in this article), then analysis of the fit between recipient needs and service content will not provide insight into actual service relevance.
- Failure to become skilled at identifying whether an issue is programmatic or non-programmatic will likely lead to multiple errors when considering program process elements.
- Lack of expertise in distinguishing service content from service processes will undermine the clarity and accuracy of the analysis.

- Very importantly, lack of familiarity with SRV, and with planning and evaluation processes based on it, will yield outcomes that are inconsistent with making effective use of model coherency.

Second, before attempting to apply Wolfensberger's model coherency, responsible users should study it in depth especially via the extensively rea-

soned and insightful presentation he has laid out. To do less would not do justice to an important and complex construct, to services being planned or evaluated, or to service recipients. One might say that it would be like trying to conduct a symphony without knowing the score or the composition of the orchestra.

### **Some Important, Often Unrecognized, Benefits of Service Model Coherency**

1. Model coherency enables and, in fact requires, a service to be clearly aware of its recipients' real and most pressing needs, and also highly conscious of its beliefs and assumptions about the best way(s) to address these.

2. Similarly, because model coherency requires clarity about recipients' identities and needs, it encourages committed efforts to support recipients' experience of valued social roles and the good things of life.

3. Relatedly, a service that consciously strives for model coherency in addressing the needs of its recipients is more likely to be rooted in Social Role Valorization, and, of course, also in the valued sectors of the culture.

4. With model coherency, a service is more likely to be both effective and image-enhancing.

5. Model coherency helps safeguard against service erosion from both internal and external forces, and helps a service stay anchored to its ideals. Every service professes some grand purpose, some noble aspirations: the more model coherent it is, the more likely is attainment of, and fidelity to, those aspirations.

6. In our experience, model coherency is highly positively correlated with overall service quality: the more model coherent a service is, the higher its overall quality is likely to be; and conversely,

the more incoherent it is, the worse its service. This is a very striking and consistent research finding on service assessments that include a model coherency measurement as, for example, in PASS or "post-introductory" SRV-based evaluations (Osburn, 2015). In other words, it is an empirical fact that a model coherent service is almost always a programmatically sound service in all sorts of other ways.

### **Conclusion**

**T**O CONCLUDE THIS BRIEF OVERVIEW of model coherency, we recapitulate the point that we are talking about Social Role Valorizing model coherency. This is an important clarification because SRV knowledge could be used for either beneficent or pernicious ends. A service, or any other type of human endeavor, could conceivably be quite coherent in terms of what is done, who does it, who they do it to, how they do it, and why they do it—and despite all this, not be at all oriented to the role valorization of people. "If someone wanted to further impair, devalue, wound, ruin, or destroy another party, then SRV offers guidance on how to do it systematically and comprehensively; they would simply have to invert all SRV assumptions, principles, and strategies, and employ what might be called 'anti-Social Role Valorization.' In effect, this is what super-maximum security prisons have done" (Osburn, 2008). The Nazi schema for exterminating handicapped people might also be viewed as an example of this.

So obviously, an SRV-informed model coherency would aim towards SRV positive goals of helping people to experience the good things in life, pursuing valued social roles, enhancing people's image and competency, and other relevant action thrusts of a coherent SRV service model. Accordingly, SRV ideas should permeate and guide all elements of a coherent service model.

Lastly, in the larger world of human services to devalued people, model coherency is not a widely cherished concept; in fact, it is hardly even a

known concept. And it is certainly not a pursuit of most services to devalued people. We hope Dr. Wolfensberger's book, once published, will spur greater interest, understanding and dedication to making good use of model coherency as an important tool for establishing and upholding high service quality, and ultimately the good things in life for devalued people. ☺

#### ENDNOTES

1. Some of these forms were significantly rooted in bringing normalization—and especially model coherency—ideas into planning and carrying out service for specific individuals. Examples include: Person-Centered Planning (Mount, 1992; Mount & Wheeler, 1991), Optimal Individual Service Design (Kendrick, 2019), and Five Accomplishments (O'Brien & O'Brien, 1990).

2. A single individual might want to exercise through a model coherency design or evaluation process on his or her own for personal reasons, such as familiarization, or a cursory sketch of issues at stake in his or her own service. But a team process is not only recommended but necessary in order for a model coherency process to have (and to be perceived as having) validity, depth, objectivity and credibility.

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