

Impact Factor: 3.4546 (UIF) DRJI Value: 5.9 (B+)

Quality of Special Education Services in India: A PASSING Analysis

Dr. AKHILESH KUMAR

Assistant Professor, School of Education Vardhman Mahaveer Open University, Kota India

Dr. RAJANI RANJAN SINGH

Director, School of Education Vardhman Mahaveer Open University, Kota India

Dr. A.T. THRESSIAKUTTY

Retired Professor Rama Krishna Mission Vivekanada University Coimbatore, India

Abstract:

Normalization was first formulated in 1969 by Benjt Nirje having the ideas of normal rhythm of life which was instrumental in service reforms for children with disabilities throughout the world. Further, the concept was brought to USA by Wolf Wolfensberger where it was redefined and renamed as Social Role Valorization. Dr. Wolfensberger and his associates conducted a series of research studies using the tool Program Analysis & Service System Implementation of Normalization Goals (PASSING). PASSING was designed to evaluate whether quality of several human services are in conformity with Social Role Valorization. Present study was intended to evaluate the quality of special education institutions in India upon the criteria laid down by social role valorization using PASSING. Five institutions providing special education services in India, selected using purposive sampling based upon certain criteria, served as a sample for this study. Program evaluation was carried out using PASSING. The result revealed that the quality of selected institution (based upon PASSING) were of average quality.

Key words: Normalization, Social Role Valorization, PASSING, Special Education

Normalization and Social Role Valorization were key guidelines to human services towards children with disabilities. These two guidelines services were instrumental deinstitutionalization and service reforms for children with disabilities during 1970's. As a result of these guidelines children with disabilities got considerable attention of public, professionals, and policy makers resulted in a revolution against institutionalization. In the beginning, Normalization was a program for reforming and improving rather than replacing institutions. By the late 1960s, change was on its way across the Nordic region. (Tossssebro et al. 2012). Later on, two become influential in deinstitutionalization movement and initiated community based rehabilitation services, inclusion of children with disabilities in mainstream of the society, person centered planning, promotion of self determination, legislations for social inclusion of children with disabilities and other similar services. In due course of time during 1980's ,one of the pioneer Wolf Wolfensberger modified Principle of Normalization entirely and replaced the word Normalization to Social Role Valorization and called it as extension of Normalization (Wolfensberger, 1983, whereas other pioneer of Normalization Benjt Nirje viewed it as totally different principle from $_{
m the}$ Principle Normalization(Nirje, 1985, Perrin & Nirje, 1985). It is a controversial issue whether Principle of Normalization and Social Role Valorization are different but there is no doubt in their strong influence on service reforms for children with intellectual and other disabilities. Several authors documented the strong impact of Normalization and Social Role Valorization on the lives and education of Persons with Disabilities. It is, perhaps, true when one of its leader, Osburn, mentions; "If an

award were given for the single most important intellectual development in the field of human service in the past 100 years, Normalization and SRV would have to be among the top contenders (Caruso & Osburn, 2011)". Also, as observed by Hollingsworth and Apel, in 2008, Wolfensberger's work on normalization and SRV was identified by Exceptional Parent Magazine as one of "the 7 wonders of the world of disabilities" (Hollingsworth & Apel, 2008).

During his life time, Dr. Wolf Wolfensberger, carried out, several evaluations using tools developed by him for assessment of human services in the line of Normalization and Social Role Valorization. In addition, many other studies also have been conducted by various leaders of the field using these tools: PASS-I (Program Analysis of Service System -I), PASS-II (Program Analysis of Service System -II), PASS-III (Program Analysis of Service System-III) & PASSING (Program Analysis of Service System Implementation of Normalization Goals). The development of Social Role Valorization (either as a human service guideline different from Normalization or as an extension of Normalization) was a result of rigorous researches conducted in European, American, & Nordic countries by Dr. Wolf Wolfensberger and his associates over more than three decades. Unlike from Normalization, Social Role Valorization is intended to socially devalued groups rather than persons with disabilities only. The building of Social Role Valorization has a strong foundation in well established 'Role Theory' of sociology(Wolfensberger, 1981).

A vast literature is available on several research studies which used PASSING as a tool of evaluation of quality of Special Education Institutions, Group Homes, Mental hospitals etc (Kumar, 2013, Kumar & Kutty 2014). Few of such PASSING studies are:

Cocks (1998) reported on a Safeguards Project in Perth, Western Australia, in which PASSING was used as one among several mechanisms for promoting good service quality. In 1954, an agency was founded by a group of parents of young children who had multiple and severe disabilities. The external evaluation consisted of a PASSING evaluation, together with the use of 15 administration-related PASS items and a model coherency analysis. The later examined the extent to which the service model used by the agency was consistent with client's needs. The total PASSING scores for each of the 13 community homes were converted to a percentage of the maximum possible weighted score (Cocks, 1998). The mean total PASSING score was 43% (range = 26%-71%), higher than the average of 32% attained in the 213 PASSING evaluations analyzed by Flynn et al. (1991). Also, service quality was found to be significantly better in the 2-person homes than in those for 3, 4, or 5 residents.

Lutfiyya, Moseley, Walker, Zollers, Lehr, Pugliese, Callahan and Centra (1987) used PASSING to assess seven community residences serving people with mental retardation in New York. The PASSING assessment was used to examine the quality of life of residents community homes. As a result, of the seven residences, small group home, a staff apartment, and the home of three residents score on PASSING was found higher and thus having a better quality of life. The four that were rated the lowest on PASSING were the intermediate care facility and the SRUs. The intermediate care facility also appeared to be of lower quality than the other three settings according to the evaluators' subjective impressions.

As far as India is concerned, the terms like Integration, Inclusion, Self-Determination, and Vocational Rehabilitation became very popular and got significant attention of public as well as government and policy makers and became major area of interest of researchers and educationists. It is observed that these human service guidelines Normalization and Social Role Valorization are being followed and practiced extensively through inclusive education, by promoting disability rights, by making education as human rights for children with

disabilities, but PASSING evaluation of special education institutions in India were not found in contemporary literature on PASSING/ Quality of Special Education services in India. The present study was carried out as an initial PASSING analysis. The objective of the study was to assess quality of special education services in India as envisioned by Wolfensberger in his construct of Social Role Valorization.

METHODOLOGY:

Sampling and Samples: Since present research was a preliminary study on quality assessment using PASSING, purposive sampling was used and five institutions from Rajasthan, Haryana and Orissa were selected for PASSING evaluation. The following criteria were used to select samples for the study:

- 1. The institutions working in the field of special education for children with Intellectual Disability for at least ten years.
- 2. The institution must have ten or more employees.
- 3. Institutions working since longer time were preferred for this analysis.

Brief profile of these institutions is as below:

Table: 1 Brief Profile of the Institutions selected for PASSING Analysis

Institute	Experience	Location	Staff	Number of	Special
	(in years)		Strength	Children in	Educators
				Special School	
1	30	Rohtak	30	125	21
		(Haryana)			
2	12	Rohtak	25	120	18
		(Haryana)			
3	17	Jaipur	35	160	24
		(Rajastthan)			
4	10	Sonepat	25	100	12
		(Haryana)			
5	25	Bhubneshwar	45	205	25
		(Orissa)			

Table: 2 Facilities Available at Selected	Institutions at a glance:
---	---------------------------

S.	ECSE*	Special	Vocational	Related	Hostel	Hospital	Teacher
No.		Ed.	Training	Services			Training
				(PT/OT)*			Programs
1.	Yes	Yes	Yes	Yes	Yes	No	Yes
2.	Yes	Yes	Yes	Yes	Yes	No	Yes
3.	Yes	Yes	Yes	Yes	Yes	No	Yes
4.	Yes	Yes	Yes	Yes	No	Yes	No
5.	No	Yes	Yes	Yes	No	No	Yes

• ECSE: Early Child Hood Special Education

• PT/OT: Physiotherapy / Occupational therapy

Procedure followed for PASSING Evaluation: For Program Evaluation using PASSING, for this study, only special education facility offered by the institutions was considered. Since the tool PASSING is a very rigorous, empirically developed, a relatively complex tool which assesses multiple dimension of quality of human services in quantitative terms and also, as it requires a team of assessors, the program evaluation took a two phase procedures:

PASSING Analysis Phase-I (Selection and Orientation of Assessors)

Four peers were selected for orientation on assessment using PASSING and a team consisting two members assessed each of the institution on PASSING. The researcher organized a one day online workshop for orientation of assessors using PASSING. Assessors were selected on the basis of the following criteria:

- Professionals having at least Master of Education in special education. Experience in teacher education programs was preferred.
- Having at least three years of post qualification experience.
- Professionals who scored at least 70% marks on awareness of Normalization and Social Role Valorization.

 Peers who have worked/working in any of the institution selected for analysis. (as PASSING assessment considers the geographical as well as social and cultural dynamics of institutions.)

Fifteen such professionals/peers were agreed to participate in PASSING analysis of institutions. Twelve professionals agreed and interested for assessing various institutions as assigned. All twelve professionals agreed to participate in the online workshop/orientation. Out of these twelve professionals who were agreed to participate in research, seven professionals scored 70% or more on Awareness of Normalization and Social Role Valorization questionnaire and finally four peers were selected for assessment of quality of institutions using PASSING, being in a two members team. An online orientation workshop of two hours duration took place using Skype. All four assessors were oriented by the researcher. The workshop was conducted along the following dimensions:

- 1. Background of Principle of Normalization (30 Minutes)
- 2. Development of Principle of Normalization & Social Role Valorization (30 Minutes)
- 3. PASSING: An introduction (30 Minutes)
- 4. PASSING: Recording Format (30 Minutes)

Program Analysis Phase-II (Evaluation of Special Education Program at selected institutions by Assessors) After, orientation on PASSING Analysis, out of five assessors (including researcher) two-member teams were constituted (which consisted one peer who has worked/working in the institution to be assessed) and the team visited and given their report in recording format provided to them.

Table 3. Brief Profile of Peer Assessors:					
Professional	Professional	Academic	Experience	Working/Worked at	

Professional	Professional	Academic	Experience	Working/Worked at
	Qualification	Qualification		one of the selected
				Institutions
A	M.Ed.	M.A.	5 Years	Yes
	(Special Education)	(Economics)		
В	M.Ed.	M.A.	8 Years	Yes
	(Special Education)	(Sociology)		
С	M.Ed.	M.A.	7 Years	Yes
	(Special Education)	(Psychology)		
D	M.Ed.	M.A.	6 Years	Yes
	(Special Education)	(Psychology)		

ANALYSIS & RESULTS:

Data collected on different PASSING subscales and several comparisons were made. The details of the analysis are as below:

1. Institute wise scores on PASSING subscale 1:

Percentage scores of institutions on Image Related Physical Service of Settings (PASSING Subscale-1) were found as follows:

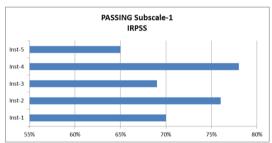


Figure 1 Comparison of scores of Institutes on PASSING subscale-1 Image Related Physical Service of Setting

As we see on the subscale of Image related physical setting, all institutes have got score from 65-78%, which indicates an average level of quality of institutions on Image related Physical Service of Setting. The Institute (I4) has a highest score whereas the institute I5 scored lowest on Image related Physical Service of Settings but the difference is very less and may differ rater to rater. It indicates that the programs were

found in harmony with location, with an appropriate aesthetic appearance setting looks like providing a service to valued people, with adequate age image and in proximity with intended population. On the above parameters, selected institutes performed well and these found average level in most of the case.

2. Institute wise scores on PASSING subscales 2:

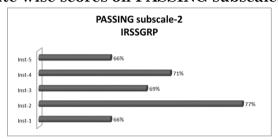


Figure 2 Comparison of scores of Institutes on PASSING subscale-2 Image related Service Structured Grouping and Relationship among People

On this subscale of PASSING which assesses Image Related Service Structured Grouping and Relationship among People, Institution 2 has a highest score and Institution-1 & Institution-5 are at lowest and have similar score. In this case too, the difference between highest and lowest score is very less indicating similar quality level of services. It indicates groupings of clients in terms of its size, common characteristics, arrangements made for them to participate in a program, its proximity with other services which enhances their positive image. It was found up to an average level in most of the institutions, assessed. It also rated availability of relevant community resources on which institutes scored average level.

3. Institute wise scores on PASSING subscales 3

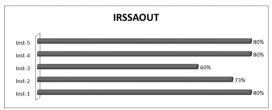


Figure 3 Comparison of scores of Institutes on PASSING subscale-3 Image-Related Service-Structured Activities and Other Use of Time

On the Image Related Service Structured Activities and Other Use of Time Institution-1, Institution-4 and Institution-5 secured highest score of 80% where as Institution-3 scored the lowest. It indicates that the service systems except at Institution-3 are above average. It indicates that separation of program functions was found culture appropriate, Program activities and timings were found similar to a valued group, and the program was found promoting autonomy and rights of its clients, not at a very high level but at an average level.

4. Institute wise scores on PASSING subscales 4

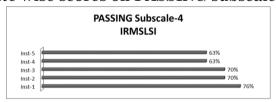


Figure 4 Comparison of scores of Institutes on PASSING subscale-4 Image Related Miscellaneous Service, Language, Symbol and Images

On subscale Image Related Miscellaneous Service, Language, Symbol and Images, the institution-1 has the highest score 76% and out of other four, each two has equal score. It indicated the program function addressing client's personal impression impact, also found appropriate for image related personal possessions, appropriateness of name of agency, program, setting and location names and other aspects of services

projecting positive image of clients. Programs found, projecting positive images of clients up to a moderate level.

5. Institute wise scores on PASSING subscales 5:

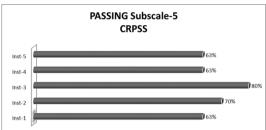


Figure 5 Comparison of scores of Institutes on PASSING subscale-5 Competency-Related Physical Setting of Service

As observed by raters, on the subscale 5th of PASSING, Competency-Related Physical Setting of Service, Institution-3 has a highest score 80 % and Institution-1, 4, and 5 possess equal score of 63%. Institution-2 has a second position having score 70 %. It indicates the accessibility of the Institution for clients and families, accessibility of the setting for public, availability of relevant community resources, physical comfort of setting, challenges and safety features of the setting, and Individualizing feature of setting. Overall, it indicates availability of a barrier free environment. Institute -3, located at Jaipur, Rajasthan, has scored above average score of 80% on this aspect because they have a completely barrier free building with a ramp, with safety features. All other institute scored average score as they have partially barrier free environment.

6. Institute wise scores on PASSING subscales 6:

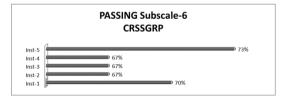


Figure 6 Comparison of scores of Institutes on PASSING subscale-6 Competency Related Service Structured Grouping and Relationship among People

As expressed in above bar graph, on subscale 6th of PASSING. Competency Related Service Structured Grouping Relationship among People, the Institution-5 has a highest score of 70%. Three institutes-2,3 and 4 has equal score 63% whereas Institution-1 scored 70%. This assessment of passing indicates client grouping according to size, composition, level of competency. It also indicates the relationship of the service personnel and other members of the institute with clients, program support for client individualization and promotion of client's socio-sexual identity. On this aspect institute 5 located at Bhubneshwar, Orissa, scored above average i.e. 73% marks as having followed standard assessment and programming tools, having adequate number of trained special educators, providing education in regional languages. Institute 1 too, has similar features because of which it too got 70% of marks. Remaining other three, scored average level as having either bigger sized grouping or not following any standardized tool for grouping or had less number of trained manpower.

7. Institute wise scores on PASSING subscales 7:

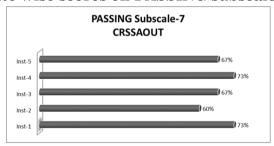


Figure 7 Comparison of scores of Institutes on PASSING subscale-7 Competency Related Service Structured Activities and Other Use of Time

As explained in above bar-graph, on the subscale Competency Related Service Structured Activities and Other Use of Time, Institution -1 and 4 has equal score of 73% which is highest; a total of 67% score was given to Institution-3 and Institution-5. Institution-2 scored lowest which is 60%. This subscale of PASSING represents whether program addressing clients service needs, Intensity of activities and efficiency of time use, and competency related personal possessions. Two institutions, both from Haryana, scored equal on it which is highest too. The reason behind it is that one is the oldest institute in Haryana, and the other one, located in Haryana, but in a rural area, and having a hospital providing services to its client free of cost or at a nominal charge.

8. Comparison of Scores on PASSING Image Related Scores and Competency Related Score:



Figure 8 Comparison of percentage scores of institutions on Image Related Ratings and Competency Related Ratings.

As reflected in the bar graph above, usually, the difference between percentage scores of institutes on image related ratings and competency related ratings do not have big difference but the difference is higher in case of Institute-2 and the difference is lower in case of Institute-5. On Image related ratings, Institute-2 obtained highest score whereas institute-5 has a lowest score among all five. On the other hand, on competency related ratings, Institute 1 and 3 have similar score 68% and Institute-2,4, and 5 scored 67%. On Image related ratings institutes scored higher than competency related

ratings. It indicates a need of improvement in services which enhances personal competencies of devalued people. Another reason may be that assessment of Social Image Enhancement ratings is relative easier than that of persona competency enhancement related ratings.

9. Comparison of percentage scores of institutes on each seven subscales of PASSING: Now percentage scores of all five institutions has been compared to see the comparative scores on all domains of PASSING.

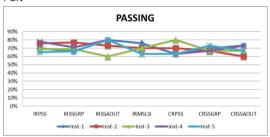


Figure 9 Comparison of percentage scores of institutions on all seven subscales of PASSING

The graph is the comparison of percentage scores of institutes, on all the seven sub-scales of PASSING. All 5 institutes scored between 60% to 80% of total score. This indicates the service quality of institutions for Intellectual Disabilities in India is of 'above average' level on PASSING. The score of Institutions on all domains of PASSING has observed between 60% to 80% which reveals that all institutes included in sample passed the PASSING assessment and their service quality as observed through PASSING is above balanced o average level. i.e. Institutes imparting special education for children with Intellectual Disabilities in various parts of India has average level of service delivery as per the international standards. The analysis of data supported prediction made after extensive literature review that the quality of special education services

in India meets the standard as prescribed by Normalization and Social Role Valorization.

DISCUSSION:

Program Evaluation was conducted for five special education programs for children with intellectual disabilities, using English version of Program Evaluation Service Systems Implementation of Normalization Goals (PASSING) which was originally developed by Dr. Wolf Wolfensberger, the originator of Social Role Valorization published in 1983. Percentage score of 5 institutes providing special education services to children with disabilities in India on PASSING subscales and over all PASSING was computed. Since it was a preliminary study of assessment of quality of special education services for children with intellectual disabilities in India, only basic statistics, percentage score, was computed and compared to avoid misleading interpretations and findings. While going through literature review on Normalization and Social Role Valorization it was observed that while using PASSING on a smaller sample, experts considered only percentage scores comparison. (Cocks, 1998, Flynn, 1991). The findings revealed that all five institutions, selected from Harvana, Rajasthan, and Orissa scored 60% to 80% on each PASSING sub-domain and overall on PASSING. It indicates the services provided by them are of 'Average Standard' as per the criteria given in PASSING.

Observations & Limitations of the present study: Every research study has its own limitations. The small sample taken for the present study limits its generalizability. Also for the present study the tool PASSING was used without any adaptations, therefore it is suggestive that further investigations may be conducted upon large samples with necessary modifications in PASSING in Indian context.

REFERENCES:

- Caruso, G. A., & Osburn, J. A. (2011). The Origins of "Best Practices" in the Principle of Normalization and Social Role Valorization. *Journal of Policy and Practices in Intellectual Disability Research*, 8 (3), 1911-196.
- Cocks, E. (2001). Normalization and social role valorization: Guidance for human service development. *Hong-Kong Journal of Psychiatry*, 11 (1), 12-16.
- Flynn, R. J., LaPointe, N., Wolfensberger, W., & Thomas, S. (1991). Measuring the quality of human service programs. *Journal of Leisurability*, 18 (3), 22-28.
- Flynn, R. J., Lapointe, N., Wolfensberger, W., & Thomas, S. (1991). Quality of Instituional and Community Human Service Programs in Canada and the United States. *Journal of Psychiatry and Neuroscience*, 16, 146-153.
- Kumar, A. (2013). Normalization: Guiding Principle of Equal Opportunities in Education for Children with Disabilities in India, European Academic Research, 1(5),667-676.
- Kumar, A. & Kutty A.T.T. (2012). Social Role Valorization (SRV): A strong Voice of Disability, Scholarly Research Journal for Interdisciplinary Studies, 1(2), 284-292.
- Lutfiyya,Z.M., Moseley,C., Walker,P., Zollers,M., Leher,S., Pugliese,J., Callahan,M., & Centra,N.,(1987).A question of Community: Quality of life & integration in small residential units and other residential settings, Syracuse University Center on human Policy, Syracuse.
- Nirje, B. (1979). Changing Pattern in residential services for mentally retarded. In E. L. Meyen, *Basic Readings in* the Study of Exceptional Children and Youth. Denever: Love Publishing.
- Nirje, B. (1985). The basis and logic of normalization principle. Australia and New Zealand Journal of Developmental Disabilities, 11, 65-68.

- Perrin, B., & Nirje, B. (1985). Setting the record straight: a critique of some frequent misconceptions of the normalization principle. Australia & New Zealand Journal of Developmental Disabilities, 11, 69-74.
- Tossebro, J., Bonfils, I. S., Teitinen, A., Tideman, M., Traustadottir, R., & Vesala, H. T. (2012). Normalization Fifty Years Beyond-Current Trends in the nordic Countries. *Journal of Policy and Practices in Intellectual Disabilities*, 9 (2).
- Wolfensberger, W. (1985). Social Role Valorization: a new insight, and a new term, for normalization, *Australian Association for the Mentally Retarded Journal*, 9(1), 4–11.
- Wolfensberger, W. (1987). Values in the funding of social services, American Journal of Mental Deficiency, 92(2), 141–3.
- Wolfensberger, W. (1988). Common assets of mentally retarded people that are commonly not acknowledged, *Mental Retardation*, 26(2), 63–70.
- Wolfensberger, W. (2011). Social Role Valorization: A Proposed New Term for the Principle of Normalization. Intellectual and Developmental Disabilities: December 2011, 49(6) 435-440.