

**DAILY ACTIVITIES WITH SUPPORT:
ESTABLISHMENT AND DEVELOPMENT
OF COMMUNITY SERVICES
IN A CHANGING SOCIETY**

Kent Ericsson

**Presentation, EU-Project CAREER
Gävle, 1997**

**Theme Disability & Support
Department of Education
Uppsala University
Sweden**

DAILY ACTIVITIES WITH SUPPORT - ESTABLISHMENT AND DEVELOPMENT OF COMMUNITY SERVICES IN A CHANGING SOCIETY

Kent Ericsson

PERSONS WITH HANDICAP IN THE WELFARE SOCIETY

Aversive conditions of life

As a reaction to the economic and political climate of the twenties and thirties a political objective, the concept of a welfare society, emerged and by the mid-forties work had begun on realizing this goal. By the introduction of a series of social reforms support was made available which provided citizens with a level of welfare even in times of sickness, unemployment or other periods involving lack of income. This emerging welfare society was one of the sources to the awakening discussions on new forms of support to persons with handicap.

Residential institutions, with roots in the 19th century, had up to now been the only means of channeling the support of society to persons with handicap. When discussions now began on future forms of support, alternatives could be envisaged. Persons with handicap could also be given the right to avail of the services which were proposed to be developed within the framework of the welfare society. For the first time there was a choice between two alternative forms of support.

The normalization principle

The discussion of future services took place within a public enquiry. In its first report in 1946, a choice between these two alternatives was suggested, the right for persons with handicap to benefit from the services made available by the emerging welfare society being favoured. These needed, however, to be extended if they were to meet the needs of these persons.

For the first time persons with handicap were to be given access to support outside residential institutions. These were also, for the first time, rejected

as a form of care. As many hopes were set on these new services facilitating a normalization of the conditions of life for persons with handicap, the principle advocated was termed "the normalization principle". The choice of welfare services was also motivated in this public enquiry, as this was pointed out as being an issue of democratic rights. Persons with handicap were seen to belong to society and thereby to hold the right to use the services of the welfare society. However, one reservation was made. It was clarified that this only applied to persons regarded as "partially able-bodied". Those with a more extensive handicap were not embraced by this principle (Ericsson 1986, Ericsson 1990b).

Community services

Non-institutional services are to-day the only acceptable form of support provided for persons with intellectual handicap in Sweden. Legislation in 1985 clearly stipulated the view, that all, irrespective of type or degree of intellectual handicap, had the right to a life outside the traditional residential institution. Even though the process towards a life in the community had been going on for some time, this was the first time that all persons with this form of handicap, were granted this right.

In order for persons to receive support in the community, to participate in local life along with other members of the public, two main forms of support are needed, housing and daily activities. These become physically separated from each other, the house providing support in areas where people live, whereas daily activities provide support during the day, in places where others spend their working day. A further form of support is the availability of general services, as provided for all citizens, for example local social services or health centers.

Within the residential institution daily activities, either in the form of occupation or work, were regarded as part of the services provided by the institution, available for some of those resident there. Through the establishment of community services, the provision of daily activities has become an independent form of service. As this concerns social support it must not be mixed up with the idea of supported employment. Employment for this group takes place outside these services and is therefore not included in this discussion. An analysis of the establishment and change of daily activities as a form of support, illustrates how community services as such were established and how they developed in relation to changing conditions, requirements and demands for support.

THE EARLY ATTEMPTS

The development of daily activities as a form of community service has been closely connected to the establishment of non-institutional schooling for persons with intellectual handicap. When children or youth were able to

grow up with their parents, while receiving their education in the local community instead of at the residential school, a pattern of life was created containing activities during the day. After school age, living with one's parents while not having a paid job or having anything to do during the day, soon gave negative experiences. This gave rise to demands being made for an occupation during the day.

An early example of this was established in the thirties. During this period residential institutions were the dominant form of service, but non-institutional schooling did exist in several places in the country. In order to occupy those who had attended school, but on reaching adulthood had been left without something to do, a group for daily activities was formed in 1938 and run by a private organization. Persons were occupied in various ways during the day, amongst other things by polishing silver (Bergström, Gustafsson, Hansson, Håkansson, Lindholm & Schneider 1977). For the same reason a group run by public services was developed during the forties. Vestiges of both these early services can be found as part of present provisions (Ericsson 1991b)

RECOGNITION OF DAILY ACTIVITIES

The first legislation on the support to all persons with intellectual handicap was the 1954 Act. Through this the first step was taken towards introducing services outside residential institutions, the previously informal situation being formalized, and integrated schooling being declared as the desirable form of education.

At the same time it was pointed out that non-institutional centers for work and occupation during daytime should be made available for adults who had left school but lacked employment. The model for these occupational centers shows an ambitious organization, offering a variation of activities, provided in small groups (Granath 1955, Eriksson & Engdahl 1986). These community services were, however, primarily available only for those with a mild handicap, the "educable". Those with more extensive needs were still referred to the residential institution.

The development of community services did not, however, become a dominant feature of the time as the major group of persons lacking support were those with more severe forms of handicap. Instead, a series of residential institutions were built in the mid-fifties, continuing until the middle of the seventies. Neither was it intended that all persons at an institution be provided with a daily activity. Consequently, the lack of occupation for these persons was seen as a major problem when the future of institutions came to be discussed during the sixties.

Voluntary initiatives

It was not until the mid-sixties that general consideration was given to what to-day is termed community services. Neither is it surprising that it was within the parental movement that this development eventually began. Within this group there was knowledge that persons with intellectual handicap could live in normal housing and work in normal places of employment, if they were provided with the support they needed. Regarding daily activities, developments at this time were concerned mainly with employment in sheltered workshops. Consequentially it was suggested that the sheltered workshop for persons with intellectual handicap be seen as a special service in the forthcoming 1967 Act.

During the latter part of the sixties the parental movement also initiated occupational centers for adults, that is, for those living at home but without employment during the day. This led to an early model for how activities during the day could be run as non-institutional services. They were characterized by their informal nature. Activities were often provided, for example in club premises or in small unused shops. They were run by staff who not necessarily had a background in care, but instead came from such fields as recreation or youth work. As such provisions had developed on the initiative of parental groups, they were not run by the formal service organization.

A heated discussion took place in Parliament, when the proposal to the 1967 Act was being debated, concerning the idea that the sheltered workshop should be a special form of service. However, it was finally agreed that when persons with intellectual handicap were to be given access to sheltered workshops it should be within the ordinary workshops. Instead, the occupational center became a special service according to this Act (Ericsson 1991b).

THE DAY ACTIVITY CENTER

The occupational center, as stipulated in the 1967 Act, could clearly be identified with the informal activities which had previously taken place. To speed up development, guidelines were provided in 1971. These were concerned with issues like suitable buildings, the intention being that daily activities for persons with intellectual handicap be provided in day activity centers.

The type of activities to be provided were for instance production work, adult education and social training. It was also suggested that there should be a training-apartment, in which persons could prepare for leaving the parental home, for a home of their own. It was suggested that special dining facilities, where lunch could be served, were a necessary requirement. At

this time it was thought that such centers should provide for between 15 to 50 persons.

These centers were characterized by the fact that during this period it was primarily persons with a mild handicap who received support outside the residential institution. As the main objective of these persons was to acquire paid employment, the centers were designed with the sheltered workshop as a model but with facilities for more socially oriented activities also being provided (Dagcenter för utvecklingsstörda 1974, Grunewald 1975).

Evaluation of the day activity center

The main result of an evaluation of this service carried out during the seventies, can be expressed very simply: the day activity center had become a center! Its main characteristic was the building, where resources, for example, equipment, activities and the staff needed by the persons, had been located. For a person to be given access to daily activities, it was necessary to travel to this center. The extent to which support from this special service was received, corresponded to the time spent in the day activity center. It had become a center for daily activities, with few contacts with people or activities in the community outside. Participation in community life, which could be expected to occur in a community service, only took place to a limited extent. The establishment of day activity centers can therefore be seen as an integration of a service form, rather than the integration of the life of the persons concerned (Ericsson 1981).

Activity-groups outside the day activity center

The point of the alternative model suggested, which better would contribute to community participation for these persons, centered on the possibility of carrying out activities in small groups, outside the center. These could be seen as a complement to the day activity center, providing the opportunity for persons with intellectual handicap to participate in the center, as well as in an activity-group outside, closer to ordinary working life.

This model also aimed at encouraging the use of existing resources in the local community, instead of providing specially organized ones within the center. A restaurant in the local community, instead of the dining-room at the center, could for example cater for lunch, and an apartment in an ordinary housing area could be used instead of the special training apartment at the center (Ericsson 1981).

Personal planning of daily activities

An extensive development of community services took place during the seventies. This was a result of a general development of services for persons with intellectual handicap, together with the restructuring of existing support, signifying a shift away from the institutional tradition. The change was not only a matter of an increase in the quantity of services provided,

but also the range of services as persons with more extensive needs were now expressing a desire for community services. By the end of the sixties, when special schools for persons with intellectual handicap were opened up for those with a more severe form of handicap, a commitment had been made to a new generation who would become adults by the end of the seventies. They had received support during the day during their school years and now expected support during the day, as adults.

This was acknowledged in the work of the 1977 Committee, thus facilitating preparations and developments necessary to meet the needs expected to arise during the eighties. Daily activities, with support, was therefore one of the issues which was fully analyzed and discussed.

The model suggested in answer to this challenge had as its basis the idea of the activity-group, inside the day activity center as well as outside, in the ordinary community. In this way an organization was formed which enabled persons with a mild, as well as those with a severe handicap, to receive purposeful daily activities within the same organization, without having to spend their days together in the same room or building. The extra demands made on such a model were how to meet the needs of persons with a severe handicap and to guarantee that the activities provided were felt to be purposeful. In order to achieve this it was necessary that the support was personally planned, permitting a choice of activities, and of settings, in which they were to take place (Ericsson 1980).

THE DAY ACTIVITY CENTER AND COMMUNITY PARTICIPATION

Development and dissolution

During the process of closing a large residential institution a number of factors were discerned, critical to the transition from institutional to community services. One such factor was the belief that the key to this transition lies in the development of the community services which are to replace the institution. If dissolution of the institution is to be realized, it is necessary that those living there can move to alternative housing, and be given access to activities, with support, which offer a better life than that which is possible at the institution (Ericsson, Enarsson, Mehlberg, & Schultz, 1983).

As the majority of the residents at this particular institution were persons with extensive needs it was necessary for community services to provide extensive support. Previously this would not have been possible as these services were only intended for those with more limited needs. As part of this change of services, two projects were carried out aiming at the renewal of services so that daily activities with adequate support could be offered to those moving from the institution.

Measures to facilitate change

This project was carried out within the Stockholm region during the early eighties, when the day activity center was used to provide daily activities to persons with intellectual handicap. These centers were specially designed and built, with special staff and equipment intended for the provision of daily activities, for those who attended the center. At this time, a center in this region had a capacity for approximately 45 persons, with a well-qualified staff group whose numbers were proportional to those attending.

The project of development was formal in character, attaining political recognition being necessary if any change in objectives was to take place. The purpose of the project was to create a day activity center which was smaller, where work could go on in smaller groups and which facilitated greater participation in community life. The project resulted in a changed policy and led to a plan of action, formulated by the group of about 30 managers then working at these centers (Ericsson, Schultz & Sträng 1982, Ericsson & Dagcenterföreståndare i Stockhom 1985). A number of additional projects were also carried out at some centers, the intention being to try out these new guidelines. One consequence soon to be seen was the reduction in the size of day activity centers. Any other immediate consequence of the changes were, however, hard to distinguish. In the long run, however, developments have followed the direction formulated by the project.

Community participation in seven municipalities

An account as to whether community participation can be achieved through day activity centers is found in a study carried out in one of the five regions in the county of Stockholm. They had been part of the project presented above. This study can therefore also be seen as an indication of the effects of this project. In the seven municipalities making up this region all daily activities provided for persons with intellectual handicap were recorded. This information was collected during the period of one week, during two consecutive years.

To collect the data a questionnaire was constructed which described the daily activities of a person. This was completed for each person, the major activity during morning and afternoon being recorded during a five-day week. In this way a description, comprised of 10 half-days, was obtained for each person. At the same time the group to which the person belonged was described, and the place where the activity took place. The study was administered by the service organization in the region and the recordings were made by the managers responsible for the daily activities provided. In this way the daily activities for an entire group were described, for two periods, in 1990, for 310 persons and in 1991, for 352 persons. As 10 half-days were accounted for the description covered activities and

environments on 3100 occasions in 1990 and 3520 occasions in 1991 (Ericsson 1991a).

In Table 1 the activities are presented with regard to the setting in which they took place. The category of settings which are accounted for are (A) the main day activity center and (B) the annex to the main day activity center, this indicating that some had moved to other premises outside the main center. The activities taking place at the annex are also provided only for persons with intellectual handicap. A place of work (C) indicates that a person is occupied, though not employed, at an ordinary place of employment, being occupied with an activity related to the production of that work-place.

Table 1. Settings where daily activities take place. The table accounts for information from two occasions, with a one year interval.

	1990		1991	
	Antal	%	Antal	%
A: The day activity center	1451	50.5	1449	44.0
B: The day activity center, annex	427	14.9	580	17.6
C: Place of work	130	4.5	138	4.2
D: Public service	165	5.7	220	6.7
E: Public place	401	13.9	524	15.9
F: Residence	301	10.5	383	11.6
Sum	2875	100.0	3294	100.0
G: Information lacking	225		226	
Total	3100		3520	

Public service (D) refers to daily activities taking place in the public sector, within the social or health services, for example at a health center, a library or within the nursery services. A public place (E) refers to activities not restricted to a limited area but instead being carried out in public places accessible to the general public, for example in shops or in public parks. When residence (F) is referred to this indicates that the person has stayed in his/her own home. This can either mean that the person has no daily activities or that an agreement has been reached that an activity be provided in the home, for example, participation in housework. The category information lacking (G) is also a possible alternative.

As can be seen the dominating setting is the traditional day activity center, with between 44% and 51% of the activities taking place there. Only to a limited extent did activities take place outside the center premises. When this did occur it was mainly at an annex to the center, in other words also a specially arranged setting. Even when activities did take place outside the day activity center it was in some form of public setting, activities occurring

to a lesser extent in ordinary places of work or within the public services. It can also be seen that much of the week, which could be expected to be spent on activities outside the home, was instead taken up with activities located to the persons home.

When one compares the results for the two years a reduction is found in the relative number of activities taking place within the day activity center. The factual number of occasions depicting activities at the center are, however, constant between the two years. The difference between these two occasions reflects the total increase in number of persons receiving daily activities within the organization. To meet the increasing needs activities are to a greater extent provided outside these centers, as they no longer are able to receive any more persons.

LOCAL RESPONSIBILITY FOR DAILY ACTIVITIES

A local connection

The background to a second project can be found in the large day activity center, with a capacity for about 45 persons. With a limited number of centers in the Stockholm area they had centralizing consequences. As they did not exist in all of the 24 municipalities in the Stockholm area, the persons had to travel, often long distances from their home community, in order to avail of the services being offered.

The relatives to persons from Lidingö municipality reacted to this situation and demanded that daily activities be made available within the local community. They were supported in their demands by the local authority who were prepared to take responsibility for running this service as part of the ordinary social services of the municipality. This was an unusual step in the early eighties as services for persons with intellectual handicap at this time were still regarded as the sole responsibility of the county. Through an agreement between the local municipality and the county authority a limited provision of service was made available within the local community. At the same time a project was started to document and analyze the process of developing these daily activities. The model "Daily Activities for Community Participation" was formulated to guide and summarize the development of this project (Ericsson & Nilsson 1991).

Characteristics of this project was that support and services were being offered to adults resident within the municipality. These were therefore persons with a strong connection with their own community. This service was, therefore, being provided for a limited number of persons, fewer than was common at the traditional day activity center. As staff lived locally, this meant that they were familiar with the environment and with local activities, as well as having good personal relationships with people in the area. As the relatives had been those who had taken the initiative, one also found a

situation where people were involved and interested in the service being provided. As the social services within the municipality had accepted responsibility for running the service, they were strongly involved in the task.

A gradual development

The beginnings were, however, traditional, starting with the acquisition of special premises and calling them a day activity center. But when they were to be put into use a new direction had begun to develop suggesting that persons could be provided with activities outside of these special premises. The center thus became a mere base, the actual activities taking place in various other places in the community.

During the first year only 6 persons were provided for, and most of their time was spent at the special center. If they did leave the center it was generally limited to the housing area for the elderly, where the center was located. The restaurant was used, as were the gardens and the surrounding park. During the second year further contacts were established within this area and with similar services within the municipality. On the whole however, daily activities were located to special premises. By the third year changes had begun to take place. One was now familiar with the task of providing daily activities and had developed suitable methods regarding participation in the life of the community. Others had also begun to express expectations regarding the aim of achieving closer ties between the activities taking place and life in the municipality (Nilsson & Ericsson 1991).

Activities in local settings

During this third year contacts had been established with two businesses in the vicinity and in this way access gained to two places of work. Contact was also established with the local hospital giving access to activities which took place there. A handcraft group was also established which even carried out simple repairs within the municipality. In this way different forms of activities had been created for 5 persons, these being an alternative to those within the day activity center.

Each year the need to provide activities has increased, the number of persons with intellectual handicap, requiring this form of service in the municipality also having grown. Some may be school-leavers who require daily activities, not having acquired ordinary employment. Others come from other centers, seeking daily activities in their home community. New housing may have been provided in the community, the new residents also looking for this form of service.

Seven years later, activities are still being provided in 9 groups, with a total of 31 persons being involved. The original premises, where two groups are

placed, are still in use. These two groups, one with 3, the other with 4 persons, are occupied with the tasks traditionally found at such a center. The other 7 groups are located to different places in the community, and the activities they are involved in are closely related to the needs found in that community. The handcraft group which was established at an early stage, still exists and is now comprised of 5 persons. To-day they have their own carpentry workshop where products are made for sale. They are also responsible for keeping the public notice boards in the municipality free from out-of-date material. A gardening group with 2 persons, cultivate plants at a nursery. They also cut firewood for a number of camp fire spots run by the recreational facilities within the municipality. One group of 5 persons run a small café where they also sell bread and cakes to the public. A number of voluntary organizations in the community have shared office facilities in which a group of 5 persons are occupied with ordinary office tasks.

In addition a number of activities are connected with providing service to old-age pensioners. For one group of 2 persons, their main task is the distribution of lunches from a restaurant to the pensioner's own home. Another group of 3 persons do household laundering for pensioners, while 2 other persons provide social stimulation for old-age pensioners (Lundberg 1993).

Starting with the objective of community participation, the setting in the small day activity center, originally established especially for persons with intellectual handicap, has been replaced by real-life environments and by activities which people in the community find desirable. In addition, new contacts have been made, and co-operation has been established with the public.

COMMUNITY PARTICIPATION THROUGH DAILY ACTIVITIES

Centralized and specialized services

During the mid-fifties, when a public organization for support and service to all persons with intellectual handicap was first created, one authority within a regional organization, the county council, was given sole responsibility. Most of the resources designated for this group was also placed in this organization. The organization became hierarchical in nature and carried out its task mainly by referring persons to residential institutions or other such facilities. This organization was characterized by its specialized and centralist nature.

As was pointed out some steps were taken towards an integration of services but in general services were institutionally oriented. The legislation which was to follow further emphasized these characteristics, accentuating even more the responsibility of the county council for this group of persons.

Local responsibility and generic services

Developments of the eighties led, however, to services of a different character. The Social Services Act from the early years of this decade had stipulated the primary responsibility of the municipality for the welfare of all its residents, thereby including even those with intellectual handicap. This changed the terms of the obligations of the county, consequently also its organization.

The Act of 1985 reflects this change. By the shift of responsibility to the municipality, the task of the county was reduced to the provision of a limited number of supplementary services. It also became possible, assuming agreement had been reached between the two, to transfer entire responsibility for supportive services from the county to the local authority.

The persons's influence over his support

A demonstration of this changing view of persons with intellectual handicap, and their services, can be seen in the role assigned to them in relation to the service organization. They were no longer persons who could be referred, or admitted, without consent, to service facilities. Instead the support and service to which they were entitled should be provided on the premise of their own request for support, as expressed by themselves or by their spokesman. If, in turn, their request was not met, the person could have the refusal judicially tried.

For the first time society had expressed the view that all persons with intellectual handicap, and others with similar needs, had the right to the normal life, a life outside of residential institutions. Previously this possibility had been confined to those with a limited need for support. A new situation had therefore arisen with regard to the provision of daily activities. For the first time this had become a recognized form of service, to be available to all, irrespective of the amount of support needed. The changes inferred by the Act of 1985 were dramatic, introducing a new set of prerequisites for the provision of daily activities (Ericsson 1990a).

Daily activities for community participation

The basic idea represented by this model is that focus is shifted away from the day activity center to the activity-group. It is then no longer necessary to look for buildings suitable as centers, but instead of places, in the community, where these activities take place (Ericsson 1991c).

A: Persons with intellectual handicap, irrespective of degree or kind of disability, have a right to purposeful daily activities which contribute to the good life, as depicted by the person.

The primary objective of this service is, in combination with other forms of service and support, to contribute to a good life for a person. The

purposefulness of the daily activities in which the person participates, depends on whether or not they contribute to a good life for that person. During a period, for example a week, the person participates in different kinds of activities. It is the relevance of these activities, when weighed together, which ultimately determines whether the service as such can be considered purposeful.

B: The daily activities in which a person is involved are those which occur within his local community, these being carried out in places and environments where other citizens are involved in similar activities.

In a local community there are many activities in which a person with intellectual handicap can participate. The task is to pursue or find these activities, and for the person to participate to a greater or lesser extent. Around these it is then necessary to create a setting, adapting it physically and socially in order to provide a stable and secure relationship to the local community.

C: When several persons together have formed an activity group, it will be characterized by the needs of its members, its localization and the nature of the support provided.

The activity group will be characterized by the interests of its members. Different groups will vary in character if the participants' activities during the day are individually chosen. If the specific needs in a group are to be met a high degree of independence for the group, within the organization to which it belongs, will be necessary. Consequently, the organization should be highly decentralized.

D: To enable an activity group to carry out its tasks with a high degree of respect for the personal requests and characteristics of the group, support from others, outside the group, will be needed.

A decentralized responsibility needs to be supplemented with support from outside if the group is to be fully equipped for its task. Professional support is needed to give advice regarding the specific needs of the persons. Knowledge about running such an activity group, for example on methods for organizing activities, is also necessary. There is also an administrative responsibility within the group for which help from outside is required.

E: If the daily activities provided are to have the function of personal support, a continuous dialog concerning the dreams and the realities of the good life of a person, must take place.

As the task of finding adequate support for a person stems from the person's initial request, and the legal right to have it tried, a continuing discussion concerning the needs of the person must take place. This dialog involves the person, and his spokesman, and a representative for the services and concerns what is thought to be a good life for the person. It is this ongoing exchange which is the basis for the choice of activities.

F: A series of activity groups in a community together make up the organization responsible for providing support through daily activities.

This model shifts the focus from the day activity center to the activity group, with the objective of establishing a support system which contributes to participation in community life for the person. The group becomes the nucleus of the service, personal needs being met with suitable activities, these taking place in settings found suitable for the group. With the activity group as the core, a series of these together constitute an organization responsible for the daily activities which support persons with intellectual handicap in a community.

INTELLECTUAL HANDICAP FROM DIFFERENT PERSPECTIVES

A competence perspective

The two main tasks for early institutional services was to provide education and care to persons with intellectual handicap. Thereby two roles were allotted to these persons, the pupil, who was to be educated and the patient, who was to be cared for. In both these roles one also finds the nucleus for one perspective on these persons and their relationship to life in society. Both focus the disabilities of the person, the role of pupil pointing to the lack of education and the role of patient emphasizing the person's limited ability. The main task for the service organization was therefore to increase the person's competence and give priority to measures which contributed to this process. These measures were also to take place in the special environments which the institutions constituted and be carried out by the special staff who worked there (Ericsson 1994).

The goal, however, was to leave the institution for a life outside. But this was seen as a question of personal competence. It could not take place until the person had attained such a level of competence that the demands made outside the institutional setting could be met. Set against this background participation in the community was a matter of personal competence, the burden of proof being laid with the individual who should be able to demonstrate the abilities required in order to meet the demands of life outside the institution.

A citizen perspective

What then is the role associated with community services? In the socio-political idea basic to the development away from institutional services, the normalization principle, one can find the answer. As presented earlier in the discussion of the forties concerning how persons with handicap could gain access to the services of the welfare society, the view was suggested that participation was a democratic right. The idea of regarding persons with handicap primarily as citizens is therefore related to the shift away from institutional services, towards participation in the ordinary life of society (Ericsson 1992).

In this perspective it is not the person's disability which is focused upon but instead the fact that this is a person, who like all others is born into, and belongs to, a society. As such he is a fullworthy citizen with the right to a life among other citizens. The persons control over his own life, as expressed by himself, or by his family or his spokesman, appears crucial in this perspective. That the person belongs to family and kin, further emphasizes that he is surrounded by persons with views on what constitutes a good life for him. The person's participation in the life of the community is a question of whether the support received by the person contributes to a life in the places and environments in the community, with activities and social relations, which he has expressed a wish to experience.

Perspectives on daily activities

Two illustrations have been given, exemplifying how an integrated form of service developed. The comparison between these two projects, both initiated with the purpose of developing the service, shows that this service is not identical, but instead differs in important respects, amongst other things in how it contributes to the person's participation in the life of the community. The two perspectives presented here may contribute to the formulation of these differences.

The "Lidingö Project" is characterized by the commitment of the families to the project on daily activities. Additional involvement in these issues came from the agreement of the municipality to take responsibility for running the service. In this way the services became fully established in the local community, gaining access to local settings, environments and activities, as well as co-operation with organizations and businesses in the area. With such proximity to the life of the community it was possible to retract from the original idea that daily activities should take place in a special building. A citizen perspective, which emphasizes the persons' right to a life in their home community, can be said to express the view developed within the framework of this project.

Even if the center had been able to provide activities focusing on service forms directed towards contributing to increased participation in the

community, a special building was still the base for the service. This view was also reflected in the conclusive result of the evaluation of the day activity center presented earlier. From a competence perspective this is also quite logical. It was considered necessary that activities for these persons be carried out in a special building, the activities which took place there dominating the service whereas those taking place outside the center were given a complementary role. When leaving the center the person with handicap can be said to make visits to the community.

A two-dimensional development of services

In the on-going change regarding support from society to persons with intellectual handicap the scene is dominated by questions concerning the development of provisions in the community and the dissolution of institutional services. To a large extent this is a matter of creating new services which can replace those which were provided through the institutions. The physical-organizational aspects of this shift have played a dominant part. The organization responsible for providing support through daily activities, being part of community services, has accordingly also been largely concerned with acquiring, or building, premises where these activities can take place.

This account of projects concerned with the development of new forms of daily activities, and how support can be provided, has attempted to show how views vary regarding these persons, their daily activities and where in the community these should be taking place. Different perspectives on this form of service gives rise therefore to differences regarding which aspects should be focused on, and what should be given priority.

Giving consideration to these different perspectives on community services, the question of relinquishing institutional services becomes not just an issue of physical-structural change but also a matter of a change in perspective on persons with handicap, on their needs, and on the form of societal support provided. Neither is it just a question of changing the form of the support provided but also of changing its content. Development away from the traditional institution can therefore be seen as two-dimensional (Ericsson 1992).

DISCUSSION

Community services have developed to the extent that to-day they are the principal form of support provided for persons with intellectual handicap. Traditional institutions are no longer accepted, existing only during the remaining period of transition. When it is required that services be made available for all persons with intellectual handicap, within the community framework, new demands are made on the nature of the service provided. The form which provides these persons with daily activities with support,

has here been taken as an example from which to analyze developments which have taken place within community services as a whole.

The wider framework for this development has been the growth, since the mid-forties, of a welfare society. Characteristic for this change has been the expansion of support provided by society. The realization of the welfare society was also the pre-requisite needed to change the socio-political course regarding support being provided by society for persons with handicap. Consequently the development of community services thus made possible the dissolution and closure of institutions. The four Acts of Parliament, regulating support to persons with intellectual handicap have been the means by which the development of community services were precipitated, and the closure of institutions made possible.

The establishment of schooling for persons with intellectual handicap, outside traditional educational institutions, has been an initial requirement for the growth of this type of service. When one lives at home and has been given access to an activity outside the home, a lifestyle is established giving rise to a need which remains even after the person has left school. Those with a mild intellectual handicap were given access to integrated schooling in the mid-fifties, those with a more severe handicap being given this opportunity at the end of the sixties. When these persons left school, and did not gain access to paid employment, the need arose for other forms of daily activities with support.

But yet another factor played a role in the process leading to the development of this form of service. Those first to leave the traditional institution were persons with a mild handicap. The new service came therefore to be influenced, in its structure and content, by the fact that it was formed so as to provide this group with a daily activity. Later, when persons with more extensive needs came along, difficulties arose and it became necessary to develop the service further in order to meet their particular needs.

That persons with a more comprehensive need for support came to these services depended also on the fact that institutions were changing, even being closed down. During the seventies the number had been reduced and by the end of the decade were beginning to be closed down. This process has continued throughout the eighties. When these groups have been given access to support from community services they have come to the day activity centers, which, in turn, have encountered other types of needs than those for which they had been established.

The dissolution of institutions took place within the framework of a wider change of services, the regional organization being replaced by locally based municipalities. Within these smaller geographical areas these services

became a part of the social services responsible for providing for all others with needs. In this process local municipal environments, activities and staff became accessible in an entirely new way.

Another aspect of this change in service organization has been the change in the role of the person in relation to the services being provided. Whereas the person previously could, on a one-sided decision, be provided with or admitted to a service, he could now exercise his influence, either directly or indirectly, through a representative. The activities with which he is engaged during the day need not necessarily be those assigned to him, it now being possible to influence the choice. This has been expressed as a shift in perspective from which this service, and thereby community services as a whole, can be viewed.

When one reviews the development of this service one finds that conditions have frequently changed and this in turn has led to changes in the services. The models formulated at different periods have summarized the service and expressed its essential character. One can see that they have evolved from a very simple and informal form of service to the establishment of special buildings and premises. Even if it has been difficult to realize, attempts have been made to carry out activities outside the day activity center. But even these have been replaced by more locally related activities closer to the general public and to the life of the local community.

REFERENCES

Bergström, G. Gustafsson, M. Hansson, H. Håkansson, E. Lindholm B. & Schneider, L. 1977: *Dagcenter. Utveckling - Förändring - Framtid.* Stockholm: ALA.

Dagcenter för utvecklingsstörda 1974: *Socialstyrelsen redovisar nr. 37.* Stockholm: Allmänna förlaget.

Ericsson, K. 1980: *Dagliga verksamheter för utvecklingsstörda. Rapport till 1977 års Omsorgskommitté.* Mental Retardation Research Project, Uppsala University.

Ericsson, K. 1981: *Normativ modell, beskrivning och utvärdering av dagcenterverksamhet.* from Kebbon, L. Granat, K. Ericsson, K. Lörelius, J. Nilsson A-C & Sonnander, K. *Evaluering av öppna omsorgsformer.* Stockholm: Liber förlag.

Ericsson, K. 1986: *Der Normalisierungsgedanke: Entstehung und erfahrungen in Skandinavischen ländern.* from Bothe, S. Frühauf, T. Göbel, W. Kräling, K. Sauter, M. & Wagner, H-V (ed) *Normalisierung - eine*

Chance für Menschen mit geistiger Behinderung. Marburg/Lahn: Lebenshilfe.

Ericsson, K. 1990a: From institutional to community services. PM. Department of Education, Uppsala University.

Ericsson, K. 1990b: Towards more normal conditions of life. PM. Department of Education, Uppsala University.

Ericsson, K. 1991a: Inventering av dagliga verksamheter i Nordvästra Omsorgsområdet. PM med bearbetning och presentation. Uppsala: Skinfaxe Institute.

Ericsson, K. 1991b: Dagliga verksamheter - Historik och utveckling. from Ericsson & Nilsson: Dagliga verksamheter i kommunal regi för vuxna personer med begåvningshandikapp. Mental Retardation Research Project, Uppsala University.

Ericsson, K. 1991c: Dagliga verksamheter för samhällsdeltagande. from Ericsson & Nilsson: Dagliga verksamheter i kommunal regi för vuxna personer med begåvningshandikapp. Mental Retardation Research Project, Uppsala University.

Ericsson, K. 1992: Housing for the person with intellectual handicap: Consequences of a citizen perspective. Presentation at AAMR Annual Meeting. Centre for Handicap Research, Uppsala University.

Ericsson, K. 1994: Efter att vårdhemmen avvecklats. Centre for Handicap Research, Uppsala University.

Ericsson, K. Dagcenterföreståndare i Stockholm, 1985: Dagcenterverksamhet idag och i morgon. Stockholm: Omsorgsnämnden.

Ericsson, K. Enarsson, S. Mehlberg, L. & Schultz, T. 1983: Avvecklingsplan för ett vårdhem. Psykisk Utvecklingshämning, 85(2), 20-27.

Ericsson, K. & Nilsson, I. 1991: Dagliga verksamheter i kommunal regi för vuxna personer med begåvningshandikapp. Mental Retardation Research Project, Uppsala University.

Ericsson, K. Schultz, T. & Sträng, G. 1982: Dagliga verksamheter för samhällsdeltagande. Stockholm: Omsorgsnämnden.

Eriksson, I. Engdahl, C. 1986: Sveriges första sysselsättningsexternat i Stockholms stad. Stockholm: Omsorgsnämnden.

Granath, K-E. 1955: Daghem och externa sysselsättningsavdelningar för psykiskt efterblivna i Stockholm. Bilaga IV. ur 1951 års sinnesslövsutredning: Betänkande III med utredning och förslag rörande den öppna vården av psykiskt efterblivna samt utbildning av viss vårdpersonal. Stockholm: Socialdepartementet.

Grunewald, K. 1975: Day centers for mentally retarded adults. Brussels: ILSMH.

Lundberg, K. 1993: Förslag till verksamhetsutveckling genom självstyrande grupper. PM. Lidingö: Ö-gruppen.

Nilsson, I. 1988: Daily activities in the local community. from Ericsson, K. (ed) "Towards a normal way of life - On the closure of a residential institution for persons with intellectual handicap", Symposium, IASSMD Conference Dublin. Mental Retardation Research Project, Uppsala University.