Social Ecology of Supervised Communal Facilities for Mentally Disabled Adults: III. Predictors of Social Choice

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At the time of publication, author Daniel Romer was affiliated with the University of Illinois-Chicago Circle. Currently, he is the Research Director at the Institute for Adolescent Risk Communication at the Annenberg Public Policy Center, University of Pennsylvania.

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Abstract
This paper is the third in a series in which the social behavior of mentally disabled clients in community facilities was examined. In this report, social choice for various cognitive and physical characteristics and for exposure to others was investigated in five settings. Preferences were inferred from observed affiliation, self reports, and staff judgments. Clients tended to prefer peers whom they had more exposure to, same-sex peers, and peers of similar attractiveness. Opposite-sex relationships were also common and were stronger for women. Neither similarity nor complementarity choice was obtained for age or the desire for affiliation; however, retarded clients tended to be segregated from mentally ill clients. Although clients tended to name friends of similar intellect, a form of “limited complementarity” appeared to govern observed affiliation preferences in that clients preferred to affiliate with peers who were somewhat different in IQ. This result suggests that clients of relatively moderate intelligence are critical to the social integration of a setting, since they are most likely to form relationships with clients of both higher and lower intelligence. The implications of these results for the sociability of a setting were discussed.

Disciplines
Communication | Social and Behavioral Sciences

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DANIEL ROMER AND GERSHON BERKSON

University of Illinois-Chicago Circle

This paper is the third in a series in which the social behavior of mentally disabled clients in community facilities was examined. In this report, social choice for various cognitive and physical characteristics and for exposure to others was investigated in five settings. Preferences were inferred from observed affiliation, self reports, and staff judgments. Clients tended to prefer peers whom they had more exposure to, same-sex peers, and peers of similar attractiveness. Opposite-sex relationships were also common and were stronger for women. Neither similarity nor complementarity choice was obtained for age or the desire for affiliation; however, retarded clients tended to be segregated from mentally ill clients. Although clients tended to name friends of similar intellect, a form of "limited complementarity" appeared to govern observed affiliation preferences in that clients preferred to affiliate with peers who were somewhat different in IQ. This result suggests that clients of relatively moderate intelligence are critical to the social integration of a setting, since they are most likely to form relationships with clients of both higher and lower intelligence. The implications of these results for the sociability of a setting were discussed.

In earlier papers in this series, we have reported on the stability of social behavior and the personal and environmental predictors of sociability (Berkson & Romer, 1980; Romer & Berkson, 1980). This paper is focused on another aspect of social behavior, the preferences that mentally disabled individuals have for the people they affiliate with. To the extent that social adaptation of mentally disabled adults in supervised communal facilities is to be maximized, knowledge about the determinants and characteristics of social choice is needed. For example, do mentally disabled adults naturally segregate themselves so that they only affiliate with others of similar cognitive and physical characteristics? Do they tend to form stronger relationships with others to whom they have greater exposure? In asking these questions, we again focus on our objective observations of social behavior as well as on more traditional sociometric measures based on client and staff member friendship namings.

A great deal of research with nondisabled adults and children (cf. Berscheid & Walster, 1978) suggests that similarity in cognitive and physical characteristics is by far the most frequent predictor of friendship formation. An important source of confusion in these findings, however, is the likelihood that people only come in contact with others who are similar to themselves and that the tendency toward similarity is only a consequence of familiarity and exposure (Kerrchhoff, 1974). Previous research with mentally retarded adults suggests that similarity choice for intelligence is either nonexistent (Romer & Berkson, 1979) or completely accounted for by residential segregation (Landesman-Dwyer, Berkson, & Romer, 1979). We were interested, therefore, to determine whether this finding would hold up for our present sample and to extend the investigation to other traits and characteristics that we have studied in this research program (e.g., age, sex, and physical attractiveness).
In the social ecology of community settings, exposure to others may have important implications for the formation of social relationships; therefore, its effects were a major focus in our research design. To determine the influence of exposure, we observed clients in settings where they could interact with others whom they also had exposure to in another setting. Based on the hypothesis that "mere exposure" produces attraction to others (Harrison, 1977), we expected that clients would prefer to affiliate with their more familiar peers.

According to another hypothesis, people are attracted to others who have characteristics that complement their own. For example, a dominant person will prefer a submissive friend (Leary, 1957). Although the complementarity hypothesis has received less support, it seems so plausible that it cannot be ruled out. For instance, preference for opposite-sex relationships is an obvious form of complementarity. We were interested, therefore, to see whether complementarity would appear with regard to sex or any other dimensions of friendship choice.

The distinction between complementary and similarity choice is relevant to our earlier findings regarding the social correlates of intelligence (Romer & Berkson, 1979). We observed that although individual IQ was uncorrelated with sociability, the average IQ of the peers in a setting was a predictor of both the extensiveness and intensity of affiliation. We can entertain two explanations for this result. First, more intelligent individuals may be intrinsically more sociable, more likely to interact with each other (similarity choice), and, by their presence, increase the "social atmosphere" of the setting. This atmosphere effect could then transfer to the less intelligent clients and increase their sociability.

A second hypothesis is that more intelligent adults may not be more sociable but that mentally disabled adults may prefer to affiliate with others who differ from themselves in intelligence (complementary choice). If this is the case, then increasing the proportion of more intelligent clients in a setting would increase the opportunity for desirable complementary relationships. The result might be that the average intellectual level of clients in a setting is correlated with sociability even though individual intelligence is not. A major focus in this paper, therefore, was on analysis of the role of intelligence in the choice of social partners and relationship of this process to our earlier findings concerning intelligence and sociability.

One advantage of our objective behavior records is the ability both to identify friendships and to scale them in terms of their intensity. We can ask not only whether individuals prefer similar others but also whether they spend more time with them. For example, although people may have more friends of the same sex, they may still spend more time, on the average, with their opposite-sex partners. Since individuals actually have sets of friends, we were interested in studying the average characteristics of the sets as well as the characteristics of the most intense relationships in the sets.

Method

Subjects and Design

Subjects were the same sample of 304 clients described in Romer and Berkson (1980). Clients were observed in one of four sheltered workshops and one intermediate-care residential facility in Chicago. Eighty-one of the clients were observed in both their workshop and the residential facility (and one client was observed in two workshops), bringing the total number of cases to be analyzed to 386. The roster of clients included 50 observations at each of the present analyses were relationships to the first of these segments.

As in our earlier reports, we interviewed a number of observations that two clients together defined the intensity of a relationship; however, we also associates those individuals interacting with a client for one percent of the client's observations. For example, if a criterion clients had anywhere from "friends" (mean = 2.8).

As many clients as possible were also interviewed about acquaintances in the setting. Peers whom clients considered to be friends" and people whom clients considered to be "definitely not friends" were considered acquaintances. As in our earlier reports, acquaintances who had an average of two clients (over staff members) of acquaintances considered to be friends. Understandably, we found that staff members knew the name from 0 to 10 people per acquaintance (mean = 1.7).

Analyses of Social Choice

Clients' friendship lists were analyzed in terms of six physical and social components.

Observations and Interview Protocol

Clients were observed during breaks, lunch, and other free periods in two sheltered workshops and one intermediate-care facility. The study was designed to cover 80 observation periods (evenings and weekends) in each setting. The number of settings varied, but was always a maximum of 100, 5-second, random-sampling observations, with a "momentary" observation of the "social atmosphere" of the setting. This atmosphere effect could then transfer to the less intelligent clients and increase their sociability.

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complementary relationships. It might be that the average level of clients in a setting is consistent with sociability even though independence is not. A major focus in this research, was on analysis of the independence in the choice of social relationships of this process to findings concerning intelligence and affiliation.

As in our earlier reports, the proportion of observations that two clients were seen together defined the intensity of their social relationship; however, we only counted as associates those individuals who were seen interacting with a client for at least 3 percent of the client’s observations. By this criterion clients had anywhere from 0 to 15 “friends” (mean = 2.8).

As many clients as possible (n = 284) were also interviewed about their acquaintances in the setting. Peers named as “best friends” and people whom clients “liked to talk to” were considered as friends. Using this criterion, we found that clients named from 0 to 12 peers as friends (mean = 2.4).

Finally, staff members were asked to name the people whom they knew clients “interacted with.” They were also asked to rate each acquaintance on a scale from 1 (“definitely not friends”) to 5 (“definitely friends”). As in our earlier reports, acquaintances who had an average rating (over staff members) of at least 3.5 were considered to be friends. Using this criterion, we found that staff members tended to name from 0 to 10 people per client (mean = 1.7).

Analyses of Social Choice

Clients’ friendship lists were summarized in terms of six physical and cognitive characteristics: intelligence, sex, age, major diagnosis, desire for affiliation, and physical attractiveness. The first four variables were taken from Agency files; the desire for affiliation was derived from a test (the Social Self-Concept Scale) administered to clients that measured their preferences for affiliation vs. solitude, and physical attractiveness was derived from staff member judgments. Details on the measurement of these variables were given in our earlier reports. In addition, if clients had peers to whom they could have exposure in another setting, their friendships were categorized in terms of this exposure (yes/no). For most of these variables, characteristics of a client’s friendships were obtained by averaging the relevant values over friends. In the case of diagnosis and exposure, however, averaging did not apply; instead, we calculated the proportion of friends who were similar in diagnosis or who had exposure to the client. These values were then corrected by dividing them by proportions that would be expected by chance in the setting (the proportion of relevant peers in the setting). This correction would result in a value of 1.0 if a client’s friends matched the proportion expected by chance in the setting, and a value greater than 1.0 if a preference for certain peers was operating.

The various summary scores were then analyzed using regression analyses in which all of the variables describing each client served as predictors. This analysis enabled us to determine the relationship between client and friend characteristics, holding all other client characteristics constant. In addition, variation due to settings was held constant by including predictors for each workshop. The reason for using this procedure is that spurious correlations between client and friend characteristics could emerge simply because settings differ with regard to the client characteristics under study. Holding this variation constant permits the true relationship between client and friend characteristics to emerge. Finally, linear interactions between settings and the critical client characteristic were included to determine whether the client–friend relationship differed by setting. A similar procedure was used by Romer and...
Berkson (1980) in their analysis of sociability. To analyze how much time clients spent with friends of different characteristics, we separated friendship lists derived from the observations into grosser categories and calculated the average intensity of the friendships that fell into each category. Most characteristics were trichotomized so that equal numbers of clients would fall into each category. IQs of 52 and 72 defined the lower and upper category boundaries for intelligence, and 31 and 51 years were the cutoffs for age. Although we call these categories "low," "medium," and "high," they are only defined in relation to our present sample. For example, medium IQ actually corresponds to what is usually called "mild" mental retardation. In the case of sex (male, female), diagnosis (mental retardation, mental illness, both diagnoses), and exposure (yes, no), however, existing categories were employed. By this procedure, each client would have an average intensity score for each category, e.g., for friends of high, medium, and low IQ. If a client had no friends in a particular category, the score was considered to be missing. Thus, this analysis provided a measure of preference for different categories of social choice given that clients had friends in the category. These intensity measures could also be subjected to the same regression analysis procedures used above. We found that scores for one category were usually uncorrelated with scores from another on the same dimension (e.g., high and low IQ), so that separate regressions for each category could be conducted. Because the intensity scores tended to be positively skewed, however, we performed a square-root transformation before analyzing them by regression procedures. This tactic tends to reduce the heterogeneity of variance that would otherwise occur. Nevertheless, in presenting the results of particular intensity analyses, we report untransformed scores that are more readily interpretable.

**Results**

Consistent with our expectations, clients' friendship preferences were strongly predicted by the amount of exposure they had to their peers. To assess the effect of exposure, we calculated the proportion of friends clients had (by each measure of choice) from their home or workshop and divided this value by the proportion expected by chance in the setting. Greater than chance selection of familiar friends would correspond to a value larger than 1.0. All three measures of exposure preference were greater than 1.0 (observations = 2.31, \( t = 5.13, 189 \text{ df}, \ p < .01 \); clients = 2.49, \( t = 5.40, 133 \text{ df}, \ p < .01 \); staff = 2.86, \( t = 6.56, 172 \text{ df}, \ p < .01 \)). Although the preference was stronger in some settings than in others, it was apparent in each and was consistently independent of intelligence. The behavioral measures indicated that both older and mentally ill clients were more inclined to have the preference; but neither client nor staff judgments displayed this pattern.

Although clients tended to prefer to associate with familiar peers, it was not necessarily the case that they spent more time in these relationships than in ones with unfamiliar persons. As can be seen in Table 1, the average intensity of familiar relationships was mainly greater for females. We analyzed the intensity data for clients who had both categories of friendship by subtracting the intensity score for a client's unfamiliar friends from that for his or her familiar ones. A regression including all traits and settings yielded the following equation for familiar friends with unfamiliar friends at the mean difference = 9.4 per 106 df, \( p > .10 \).

**TABLE 1**

<table>
<thead>
<tr>
<th>Peer familiarity</th>
<th>Peer sex</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td></td>
<td>Low</td>
</tr>
<tr>
<td>Client</td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>Males</td>
<td>7.52</td>
<td>7.38</td>
<td>7.21</td>
</tr>
<tr>
<td>Females</td>
<td>9.80</td>
<td>10.18</td>
<td>7.14</td>
</tr>
</tbody>
</table>

Although client IQ and the clients' friends were positively correlated for each measure of friendship preferences, the relationship was considerably reduced when variations in settings was held constant (IQ = 2.87, 1/281 df, \( p > .10 \); clients = 5.53, 1/198 df, \( p < .05 \); staff = 5.06, 1/244 df, \( p > .10 \)). Clients' choices of familiar friends of the same level of intelligence did not tend to be similar in only 4.18, 1/281 df, \( p < .05 \). It was apparent that this particular setting was the strongest evidence of similarity of choice. Intelligence and Social Choice

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Looking first

**Intelligence and Social Choice**

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familiar ones. A regression analysis including all traits and settings revealed that only females preferred familiar peers \( (F = 7.25, 1/90 \text{ df}; p < .01) \). The overall preference for familiar friends was nonsignificant (mean difference = 9.4 percent, \( t = 1.25, 106 \text{ df} \), \( p > .10 \)).

**Intelligence and Social Choice**

Although client IQ and the average IQ of clients’ friends were positively correlated for each measure of friendship (observations, \( r = .42 \); client namings, \( r = .38 \); staff namings, \( r = .43 \)), these relations were considerably reduced when variation between settings was held constant (observations: \( F = 2.87, 1/281 \text{ df}; p > .10 \); client namings: \( F = 5.53, 1/198 \text{ df}; p < .05 \); staff namings: \( F = .06, 1/244 \text{ df}; p > .10 \)). Clients tended to name friends of the same level of intellect in all settings, but observed friendships tended to be similar in only one setting \( (F = 4.18, 1/281 \text{ df}; p < .05) \). It was not surprising that this particular setting would show the strongest evidence of similarity since the program had recently been created by the amalgamation of two previously separate programs that differed in average IQ of clients (39 vs. 60). Since previous exposure was correlated with intelligence, similarity choice would be an apparent consequence.

The regression analyses of average friend IQ also revealed that more attractive and older clients tended to be seen with more intelligent peers, and staff members agreed with the observations in that they also saw more attractive clients as having more intelligent friends. Our measures failed to find evidence, however, that any other client characteristic was systematically related to the IQ of friends.

Although correlational analyses of observed friendships did not support either the similarity or complementarity hypotheses, it was still possible that some other form of choice for IQ was operating. This possibility became clear when we examined the preference curves for friends of various IQ levels. These plots, shown in Figure 1, indicate that for every sociometric method, choice of friends was systematically related to intelligence. Looking first at choice for the most intense observed relationship (Figure 1a), it is apparent that both low- and high-IQ clients were seen more often than expected by peers who were moderately but not completely different. Clients of medium IQ were popular with peers of both high and low IQ. This conclusion is also supported by the preference curves based on the average amount of time clients spent with peers of various levels of intelligence (Figure 1b). Each IQ group tended to spend the most time with peers who were somewhat different in intelligence. More striking, however, was the tendency for each client group to spend the least time with peers who were similar in IQ. Regression analyses holding settings and other variables constant substantiated the curvilinear pattern for time spent in comparable IQ pairs of medium and high IQ. This conclusion is also supported by the preference curves for friends of various IQ levels.

**Opposite-Sex Relationships**

Opposite-sex relationships are a basic aspect of social life. Nondisabled adults, of
course, find both same- and opposite-sex relationships satisfying. We were not surprised, therefore, to find a small but significant tendency toward similarity in sexual preference (observations, \( r = .23 \); client namings, \( r = .19 \}).

Regression analyses revealed that this tendency remained when controlling for settings and other variables, although the preference seemed to vary in strength depending upon setting. Older and more socially motivated clients tended to be seen with a high proportion of women, and older clients named a higher proportion of women as friends.

Despite the preference for same-sex relationships, opposite-sex relationships were common. Approximately 34 percent of men's observed friends were women, whereas approximately 48 percent of women's observed friends were men. Furthermore, as can be seen in Table 1, women tended to spend more time, on the average, with men than they did with women (\( F = 5.67, 1/248 \) df, \( p < .05 \)). A similar result for men did not reach significance, and other variables were controlled.

**Other Client Characteristics**

**Choice**

**Age.** Although mentally attractive clients tended to affiliate with more attractive peers, there was no evidence to suggest that they segregated themselves by setting. The relation between settings was not significant. Clients did display some similarity in their friendship choices in the age of friends, with this preference being limited to some settings. Mentally ill clients affiliated with older peers as friends. Despite the lack of evidence for similarity in the age of friends in staff and client namings, staff members were more likely to name friends who were younger (\( F = 17.91, 1/239 \) df, \( p < .05 \)). There was one setting in which the tendency did not appear. Staff members did not differentiate mental setting, and other sources in naming occurred as expected.

**Sociability.** Although client sociability was correlated with client choice in relation to this data, there was no evidence of either similarity or correlation in choice in relation to this data, and no evidence that the same result has been observed in the disabled population when clients had ready access to each other (Lawton, 1975).

**Diagnosis.** As seen in Table 1, clients diagnosed primarily as men
Other Client Characteristics and Social Choice

Age. Although mentally ill and less attractive clients tended to affiliate with older peers, there was no evidence that clients segregated themselves by age once variation between settings was held constant. Clients did display some preference for similarity in their friendship namings, but this preference was limited to only two settings. Mentally ill clients also named more older peers as friends. Despite the limited evidence for similarity in the observations and client namings, staff members tended to name friends who were comparable in age ($F = 17.91, 1/239 df, p < .01$), although there was one setting in which this did not appear. Staff members did agree with the other sources in naming older friends for mentally ill clients. The only variable that predicted the time clients spent with others of various ages was physical attractiveness, with more attractive clients tending to spend more time with young and middle-aged peers ($F = 13.8$ and $9.60$ and $dfs = 1/193$ and $1/216$, respectively, $ps < .01$). The absence of similarity choice for age is perhaps not so surprising considering that the same result has been observed in a non-disabled population when the individuals had ready access to each other (Namehow & Lawton, 1975).

Sociability. Although the desire for affiliation was correlated with intelligence in our sample ($r = .32$), there was no evidence of either similarity or complementarity choice in relation to this desire. Nevertheless, more attractive clients tended to affiliate with more sociable peers and to spend more time with moderately and highly sociable peers, and women tended to affiliate with and spend more time with highly sociable peers than did men. Client namings showed the same pattern, but staff namings were only sensitive to client attractiveness as a predictor of social choice.

Diagnosis. As seen in Table 2, clients diagnosed primarily as mentally retarded affiliated with more peers of the same diagnosis than expected by chance ($t = 5.96, 227 df, p < .01$); on the other hand, mentally ill and mixed diagnosis clients did not prefer similar peers. We cannot determine whether this differential preference occurred because the nonretarded clients had no preferences or because the retarded clients simply preferred to segregate themselves from the mentally ill clients. An analysis based on intensity of affiliation revealed no systematic preference for mentally retarded or mentally ill peers by any diagnostic group. Nevertheless, staff members saw mentally ill clients as particularly prone to segregation ($t = 2.56, 23 df, p < .05$), and they saw a similar tendency for the retarded clients ($t = 5.52, 203 df, p < .01$).

Attractiveness. Physical attractiveness is an interesting variable because it was correlated with intelligence ($r = .24$) and was surprisingly predictive of sociability in this sample (Romer & Berkson, 1980). Nondisabled adults have been observed to be highly sensitive to this characteristic in both mating (Murstein, 1976) and friendship choice (Cash & Derlega, 1978), with strong preference for similarity choice. Our present sample displayed the same pattern (observations, $r = .38$; client namings, $r = .27$; and staff namings, $r = .23$). Clients tended to affiliate with peers who were similar in attractiveness ($F = 19.26, 1/128 df, p < .01$), and the intensity scores shown in Figure 2 reveal a striking similarity pattern for each attractiveness group. The linear trends for high- and low-attractiveness peers were significant ($F = 7.22, 1/78 df, p < .01$ and $F = 4.83, 1/78 df, p < .05$, respectively), and the curvilinear pattern for moderately at-
to have any preferences. Since comparable observations of nondisabled adults in their work and residential settings have not been conducted, it is difficult to say whether disabled adults differ from them. If anything, the results suggest sensitivity to the same variables that seem to govern friendship choice in nondisabled adults.

The finding that exposure encourages affiliation has straightforward implications for the programming of services for mentally disabled adults. Rehabilitation of such persons in community settings involves residential and work placements of limited tenure. The present results suggest that unless individuals' friendships are taken into consideration, these shifts may disrupt social networks that may be as important to clients as their career adjustment (cf. Berkson & Romer, in press). The results of this study and others (Edgerton & Bercovici, 1976; Gollay, Freedman, Wyngaard, & Kurtz, 1978) suggest that affiliation and friendship are an integral aspect in the lives of disabled individuals that deserves attention in rehabilitation and programming.

A most promising result regarding the placement of mentally disabled adults concerns social choice for intelligence. This consideration is relevant to the issue of heterogeneous vs. homogeneous grouping in placement of mentally retarded people. Ordinarily, this issue is discussed without reference to clients' or students' social preferences. If mentally disabled individuals segregated themselves by intellectual levels, interchange and cooperation among disabled people would be minimal. Our results suggest, however, that a limited form of complementarity prevails when individuals of different intellectual abilities are placed together. Furthermore, this tendency to form complementary relationships makes the presence of relatively moderately intelligent clients important (by conventional standards these individuals are only mildly retarded). These individuals are most likely to affiliate with others of both lower and higher intellect, thereby increasing the chances for satisfying complementary relationships for all IQ groups. Our earlier finding, that the average intelligence of clients in a setting sociability of all individuals on the presence of a greater moderately intelligent clients. Table 3 shows the proportion of medium- and high-IQ groupings we studied as well sociability of each setting. Results suggest that the greater the relatively medium-IQ client sociability of the setting. Selection of medium-IQ clients with average IQ of the setting may be responsible for the observed in two studies that the presence of peers predicts the similar individuals in the setting. Our results suggest, however, that the social intellectual disabled adults who difference may have beneficial consequences for all concerned.

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*Proportion of observations involved in friendship judgments.*

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*Proportion of observations involved in friendship judgments.*

A promising result regarding social choice for physical attractiveness weight to the importance of physical attractiveness and friendship and to the presence of relatively moderately intelligent clients important (by conventional standards these individuals are only mildly retarded). These individuals are most likely to affiliate with others of both lower and higher intellect, thereby increasing the chances for satisfying complementary relationships for all IQ groups. Our earlier finding, that the average intelligence of clients in a setting sociability of all individuals on the presence of a greater moderately intelligent clients. Table 3 shows the proportion of medium- and high-IQ groupings we studied as well sociability of each setting. Results suggest that the greater the relatively medium-IQ client sociability of the setting. Selection of medium-IQ clients with average IQ of the setting may be responsible for the observed in two studies that the presence of peers predicts the similar individuals in the setting. Our results suggest, however, that the social intellectual disabled adults who difference may have beneficial consequences for all concerned.

**Table 3**

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...ferences. Since comparable nondisabled adults in their mental settings have not been as difficult to say whether different from them. If anything, they seem to govern friendship disabled adults. 

The present results suggest individuals' friendships are considered, these shifts may networks that may be as important as their career adjustment & Romer, in press). The research and others (Edgerton & Gollay, Freedman, Wynne, 1978) suggest that affiliations are an integral aspect of disabled individuals that depend on rehabilitation and programing result regarding the mentally disabled adults choice for intelligence. This is relevant to the issue of heterogeneous homogeneous grouping in mentally retarded people. Or issue is discussed without refusals' or students' social preferential dis

te disabled individuals by intellectual ane and cooperation among e would be minimal. Our re however, that a limited form of conformity prevails when individuals make intellectual abilities are equal. Furthermore, this tendency to complementary relationships between individuals changes that are important (by comparison these individuals are tared). These individuals are likely to affiliate with others of similar intellectual level, thereby having chances for satisfying relationships for all IQ groups.

Our findings regarding similarity-choice for physical attractiveness add further weight to the importance of this variable for affiliation and friendship among mentally disabled people. Physical attractiveness also predicted sociability in our sample (Romer & Berkson, 1980). Since clients segregate themselves by attractiveness, the question arises as to whether less attractive clients are less sociable because they are rejected by more attractive peers or because they simply tend to form relationships with others who are as unsociable as they are. Research in which clients' physical attractiveness is enhanced could begin to answer this question.

Although client and staff member friendship namings agreed only weakly with each other and with observed affiliation (Berkson & Romer, 1980), the present results indicate that they still exhibit considerable agreement about friend characteristics. All three measures registered the same preferences for sex, familiarity, diagnosis, and physical attractiveness. Preference for similarity in intelligence produced the most salient disagreement. Why clients would name friends who were similar in intelligence and yet spend most time with peers who were moderately different is not known. Nevertheless, the present results suggest that more than one source of sociometric information may be needed to comprehend fully friendship and affiliative choice.

Throughout our present analyses, we have only studied observed friendships in terms of time spent together. Relationships can also be distinguished, however, in terms of the activities individuals engage in together. In a subsequent report, we focus on how these activities differ as a function of the characteristics of the partners.

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Box 4348
Chicago, IL 60680
Manuscript submitted 8/17/79.

References
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**Social Ecology of Communal Facilities: III**

The impact of a variety of individual characteristics of retarded persons was examined, particularly IQ. Accounted for 21% of the variance in social interaction, related to normalization, acculturation, and may be an effective technology for socialization as an ideology.

Over the last two decades, the practice, ideology, and, treatment technology have resulted in a substantial reduction in the number of mentally retarded persons in institutional settings. Many of the former residents of institutions, as well as mentally retarded persons who are placed in community residential alternatives, have demonstrated adaptive functioning skills that are necessary to arrange placement in independent living or in special residential facilities in the community. The intention has been that these facilities would provide them with a comfortable home, as well as provide an “atmosphere” that might foster the acquisition of daily living skills. Unfortunately, until recently, an “atmosphere” that might foster the achievement of this goal, if ever, has typically been specified as a most vague and general term.

Most of the researchers who have deficiencies in adaptive functioning have investigated individual variables such as age, sex, marital status, etc.

This study was made possible by a grant from the Department of Health and Community Services (Toronto), Ministry of Community Services (Toronto), and a National Health and Welfare Grant from the National Institute of Health. We especially wish to acknowledge the assistance of the community workers of the Mental Health Foundation programs of the Department of Health and Community Services for their cooperation in collecting the data for the study.