How should we shape future public policies and services with persons with disabilities?

Fred R. McFarlane, Fredric K. Schroeder and Manuel Enriquez

Let us be clear at the outset that the liberty of individuals to carry on their business should not be abrogated unless the larger interests of the many are concerned. It is the purpose of government to see that not only the legitimate interests of the few are protected but that the welfare and rights of the many are conserved. These are the principles, which must be remembered in any consideration of this question. This, I take it, is sound government - not politics.

Franklin D. Roosevelt

FDR clearly stated that the role of government is to balance the liberty of individuals with the public policy interests of government and businesses. Since the legislative inception of the public vocational rehabilitation in 1920 through the Smith Fess Act, also known as Public Law 236 – the Civilian Rehabilitation Act, the public policy for vocational rehabilitation has attempted to balance the needs of the individual with the expectations and public values of society. The original 1920 legislation provided services including vocational guidance, training, occupational adjustment, prosthetics, and job placement services and required a shared cost between the Federal government and the State governments. Eventually the legislation addressed partnerships in government, education, businesses and community organizations, with the focus on the unique abilities and needs of the individual with a disability. The intent of the legislation has been to increase the educational and training opportunities and employment outcomes with persons with disabilities. The vocational rehabilitation legislation has been an enduring national public policy initiative for over 90 years.

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The challenge in our society today is: how do we strengthen the unique national public policy focus of the rehabilitation legislation, ensure specialized and individualized approaches with persons with disabilities, strengthen equity and non-discriminatory practices related to disability, and increase community integration and meaningful employment for the individual with a disability in the years ahead? There is the dynamic between system-centric principles (i.e., those principles that examine structural and organizational approaches in shaping public policies) and person-centric principles (i.e., those principles that are driven by individual needs and characteristics). The system-centric principles focus on policies, structures and organizational mandates to drive services. The person-centric principles are shaped by the needs of individuals and create and foster policies, structures and organizational mandates to meet the identified needs. Balancing this dynamic is the public policy challenge for policymakers, administrators, practitioners, educators, researchers and, especially individuals with disabilities.

How did we arrive at today’s public policies?

The public program of vocational rehabilitation has been supported through State\(^2\) and Federal legislation and funding for 94 consecutive years. Its strength has been the individualized focus with the individual with disability and assisting the individual to become independent and productive through education, training and employment.

During this 94-year period, the legislation has appealed to fiscal conservatives and States’ rights proponents because of the individualized focus on education, training, productivity and employment. The legislation has equally appealed to liberals and equal rights proponents because the legislation focuses on access, anti-discrimination and equity for each person with disabling conditions throughout the country. The public vocational rehabilitation approach is about the individual – not a group or class of people. It is a shared responsibility between the Federal government and States and other government designations. The individualized nature of the vocational rehabilitation public policies is unique in our communities.

During the first half of this 94-year history, there was bipartisan support from policy makers including the State-Federal partnership for implementing vocational rehabilitation. This legislation provided the Federal baseline for vocational rehabilitation policies and services with persons with disabilities regardless of their residence. The supporting State policies individualized the services based on the unique needs of the individuals with

\(^2\) The term “State” includes the 50 States, the District of Columbia and the Territories and Commonwealths under the jurisdiction of the United States.
disabilities. The legislation emphasized the partnership between the Federal government and each State government. The purpose, as cited in 1920, remained virtually unchanged – enable persons with disabilities to become employed through the use of multiple services and strategies. While relatively small in scope and fiscal resources, the public vocational rehabilitation program retained its focus and consistency in the decades from the 1920s to the late 1960s.

During this same time period, targeted Federal programs addressed generic workforce efforts. These programs were typically time limited and focused on a specific industry segment or group of individuals. Programs during the Depression were typically about a class of people (i.e., the unemployed) or a specific business or employment sector (i.e., public works projects). The following are examples of some of these Federal domestic employment programs.

**Civilian Conservation Corps (CCC).** The CCC was created in 1933 to combat unemployment. This work relief program provided jobs for many Americans during the Great Depression. The CCC was responsible for building many public works projects and created structures and trails in parks across the nation.

**Federal Security Agency (FSA).** The FSA, established in 1939, had the responsibility for supporting several government entities. Until it was abolished in 1953, it administered social security, federal education funding, and food and drug safety.

**Public Works Administration (PWA).** The PWA was a program created to provide economic stimulus and jobs during the Great Depression. The PWA created public works projects and continued until the United States ramped up wartime production for World War II. The PWA ended in 1941.

**Works Progress Administration (WPA).** The WPA was created in 1935. As the largest New Deal Agency, the WPA provided jobs throughout the country. Because of this Administration, numerous roads, buildings, and other projects were completed through the WPA. It was renamed the Works Projects Administration in 1939 and officially ended in 1943.

As noted, these programs were started for a specific purpose and engaged primarily Federal resources and initiatives. The genesis of these programs was to create systems and

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3 Citations for the identified Federal legislation are provided at the conclusion of the paper in the reference section.
structures to dramatically reduce unemployment and increase Federal funding to stimulate the economy. These Federal programs were dissolved once the economy changed and/or the immediate needs were met for the targeted group of unemployed individuals.

The State-Federal vocational rehabilitation program held a unique position in Federal legislation during this period. The bipartisan legislative and political support at the Federal level contributed to its sustainability. The State-Federal partnership required resources and commitments at both the Federal and State levels, which developed collaborative ownership and established a framework of public policies that is consistent throughout the United States. Individuals with disabilities were often unrecognized or unsupported in our communities and this Federal legislation and supporting State legislation served a unique niche in the domestic array of public policies. The focus on the individual with a disability personalized the policies and services. The Federal and State partnership acknowledged that individuals with disabilities cross all segments of our society, including geography, economic conditions, culture, ethnicity, and age. The legislation supported the principle that disability is not time limited or resolved through economic or organizational structural changes. The legislation acknowledged that disability is a part of the fabric of our society and is constant and continuous. In essence, the tenets of this legislation embodied the person-centric principles of public policy.

Public policy and service delivery conflicts began to emerge in the 1960s when Federal public policy for vocational rehabilitation expanded the definition of disabling conditions. Federal and State efforts attempted to merge programs for various groups of disadvantaged individuals, including those served by disability-related programs. Policymakers began to focus on States’ rights as differentiated from Federal rights and responsibilities and designed approaches for domestic services and consolidating human services and employment programs for all individuals. The public policy and political debates emerged regarding anti-discrimination legislation that valued the uniqueness of each individual and groups of individuals. Discussions arose to merge organizational systems that consolidated services, i.e. “consolidated block grants”, among and across groups of individuals. These public policy discussions addressed an “economy of scale” model within a community or a State with limited regard for the uniqueness of the individual and their specific needs. The emergence of system-centric principles became more evident during these public policy discussions.

As an example, in the mid to late 1960s, the Federal public policy for vocational rehabilitation was expanded to include persons with behavioral disabilities and persons who were considered socially and culturally disadvantaged. The width and breadth of this expanded definition included a significant portion of the adult population. The service needs became more complex and diffused, the costs increased, and the emphasis expanded
beyond education, training and employment. The desired outcome - long-term employment - became more complicated and less quantifiable. Since these policies were mandated at the Federal level, there was a perceived burden imposed on individual States that had varying needs and economic resources for their citizens.

The Federal-State partnership began to fray and become imbalanced. This was coupled with significant economic demands and unrest among various socio-economic and cultural groups and the demands of a long-running and increasingly unpopular war. Eight years of democratic leadership gave way to republican leadership. The Congress increased its attention on States’ rights for domestic policies and proposed increased autonomy in policies, fiscal decisions and program support and implementation. What began to emerge was a conflict between States’ rights and Federal directions regarding many domestic public policy initiatives. In the late 1960s, Congress and the Administration began to discuss “consolidated Federal block grants” to States. These proposals attempted to cluster domestic spending at the Federal level into one funding mechanism, enabling the State to allocate funds according to their needs. In this model, persons with disabilities were considered to be a small segment of the population with high cost needs. The public policy challenge was to balance fiscal demands with the needs of individuals in each State. In essence, the legislative solutions began to be more system-centric through imposing controls on costs, structures and expectations. This debate and dynamic tension continues to the present day.

Starting in the early 1970s, three major pieces of legislation emerged that supported the person-centric principles and services regarding individuals with disabilities. These Federal mandates were the Rehabilitation Act of 1973 (and its subsequent amendments), the Individuals with Disabilities Education Act of 1975 (and its subsequent amendments) and the Americans with Disabilities Act of 1990 (and its subsequent amendment). These Federal legislative initiatives used the principle of anti-discrimination and established a minimum level of services for each individual with a disability throughout the United States regardless of their residency. Equally critical was that these three legislative initiatives continued the legacy of the public vocational rehabilitation program from its inception in 1920.

At the same time there were major pieces of employment legislation that supported the system-centric principles and services. The first legislative mandate was the Manpower Development Training Act of 1962. This Act was the first major federal job training program since the Great Depression. It was followed by the Economic Opportunity Act of 1964, which created the Job Corps, and the Work Incentive Program (WIN) in 1967 that provided training to welfare recipients. During this period the Vocational Rehabilitation Amendments were modified in 1965 and 1968 to expand the scope of services and the
How should we shape future public policies

eligible individuals served by these legislative mandates. For the first time, there was a movement toward consolidation of programs, including those in rehabilitation.

In the early 1970s, legislative actions for employment mandates continued with the Comprehensive Employment and Training Act of 1973 that was intended to decentralize the federally controlled job training programs, giving more power to the individual State governments. This program replaced the Manpower Development Training Act. The Job Training and Partnership Act of 1982 was enacted to establish federal assistance programs to prepare youth and unskilled adults for entry into the labor force and to provide job training to economically disadvantaged and other individuals facing serious barriers to employment. This program replaced the Comprehensive Employment and Training Act. Finally, the current Workforce Investment Act (WIA) of 1998 was enacted to replace the Job Training Partnership Act and consolidate other Federal job training programs with new workforce investment systems at the State and local levels of government, including the Rehabilitation Act as a separate title within the Workforce Investment Act.

These workforce initiatives were driven by system-centric principles that prioritized organizational structures and system-wide processes and measures. The targeted legislative initiatives delegated authority to the States and other Federal jurisdictions to establish training and employment services that are driven by local and State needs and resources. Over the past 50 years, these Federal initiatives have tried targeted approaches to create systems that provide consolidated vocational training and employment programs for underemployed and unemployed youth and adults. Their success has been marginal and is continually being modified and refined with inconsistent results. During this same period the Rehabilitation Act was updated and reauthorized with the public policy focus being on the individual with a disability and increasing their independence, education, training, and employment in the community. The consolidation in the 1998 Workforce Investment Act was a significant shift in public policy.

What are the differences among these legislative public policies?

Over time, policy makers at the Federal and State levels along with administrators, service providers and advocacy groups with persons with disabilities have sought ways to merge the person-centric and system-centric principles and services. The results have presented conflicting beliefs, values, approaches and confusion on processes and outcomes. To illustrate these merger challenges, consider the focus of the two primary enabling legislative mandates – the Workforce Investment Act (1998) and the Rehabilitation Act (Title IV of the Workforce Investment Act of 1998), as amended - that are currently in effect.
Prior to 1998, the workforce legislation and the vocational rehabilitation legislation were separate laws. In 1998 these laws were merged into the Workforce Investment Act of 1998 (Public Law 105-220) with the purpose to consolidate, coordinate, and improve employment, training, literacy, and vocational rehabilitation programs in the United States, and for other purposes. The stated purpose of the Act is focused on system-centric changes to maximize resources and provide a generic approach for workforce development.

The Workforce Investment Act is composed of four Titles: I) Workforce Investment Systems; II) Adult Education and Literacy; III) Workforce Investment Related Activities; and IV) the Rehabilitation Act Amendments of 1998. When comparing the purpose statements of the two primary Titles (Title I and Title IV), the focus for Title I is the systems and employment while the focus for Title IV is the individual with a disability and self-sufficiency. While both are critical, there is a distinct difference in the concepts, approaches and, ultimately, the resources and implementation. To illustrate this conceptual variance, the following are the verbatim purpose statements for Titles I and IV:

Title I, Workforce Investment Systems SEC. 106. PURPOSE. The purpose of this subtitle is to provide workforce investment activities, through statewide and local workforce investment systems, that increase the employment, retention, and earnings of participants, and increase occupational skill attainment by participants, and, as a result, improve the quality of the workforce, reduce welfare dependency, and enhance the productivity and competitiveness of the Nation.

The Purpose statement emphasizes the activities and systems for the generic workforce activities and exclusively addresses earnings, training and employment. This is contrasted to the following Purpose statement for Title IV that emphasizes empowering the individual with a disability for economic self-sufficiency and inclusion in society. Title IV states:

Title IV, Rehabilitation Act Amendments of 1998. PURPOSE. The purposes of this Act are (1) to empower individuals with disabilities to maximize employment, economic self-sufficiency, independence, and inclusion and integration into society, through (A) statewide workforce investment system implemented in accordance with title I of the Workforce Investment Act of 1998 that include, as integral components, comprehensive and coordinated state-of-the-art programs of vocational rehabilitation; (B) independent living centers and services; (C) research; (D) training; (E) demonstration projects; and (F) the guarantee of equal opportunity.

Title I of the WIA focuses on the activities and systems as the primary service delivery approaches for individuals, while Title IV of the WIA focuses on the individual and
creating activities and systems that support the person to become self-sufficient and independent. While both approaches are critical, the primary emphasis in Title I is the systems and the primary emphasis in Title IV is the individual. This contradictory public policy creates a dynamic tension between the two Titles and has resulted in inconsistency in services, conflicts in administrative focus, and ultimately challenges in creating organizational structures and human resources at the Federal, State and local levels.

Table 1 provides the discussion of the person-centric and system-centric principles and services. The framework in this Table offers a way to critique policy efforts and determine the nature of the principles as being person-centric or system-centric.

**Table 1:**
**Discussion of Person-centric and System-centric principles and services**

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<th>Person-centric principles and services</th>
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<td><strong>Primary aim</strong></td>
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<td>The focus is on the individual being served – what are their needs expectations and outcomes – and the individual nature of services and outcomes (example: the individual’s needs and abilities are assessed, their expectations for a positive outcome are articulated and the services are delivered to link the individual’s current status to the expected outcome. The individual’s needs define the possible services and approaches to achieve the expected outcome.)</td>
<td>The focus is on consistency and equity of the services across all individuals resulting in a common outcome and serving employer needs (example: the one-stop service centers are the framework and the individual is served through the array of services available through the centers. The available services define the parameters of options for the individual.)</td>
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<td>Services are built from the individual toward the outcome (example: a person focused assessment is completed that includes the person as the center and the various connections, individuals and resources linked to the person.)</td>
<td>Services are built from an organizational perspective and the system’s expected outcomes (example: Policy makers and administrators create an environmental scan of the needs of the employer community, the needs of groups of individuals and skills, expectations of the professional staff and available resources.)</td>
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From this information, they create the array of available services offered through the system to the individual.

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<td>The <em>direction of the services</em> are to the environment that is modified and adapted to meet the needs of the individual (example: the individual with support from subject matter experts determine what knowledge, abilities, skills and resources are needed to achieve the expected outcome and plan for and acquire these resources. The individual and the provider also work with the educator/trainer and/or employer to modify the environment to meet the needs of the individual.)</td>
<td>The <em>direction of the services</em> is to the individual changes and adaptations to meet the needs of the environment (example: the one stop center identifies a job or group of jobs and trains a group of individuals to meet the job expectations and requirements. The driver is the job and the employers’ requirements and the individual is required to adapt to these expectations.)</td>
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<td>The <em>locus of control</em> is centered between the individual needing the service(s) and support and the primary representative of the organization (example: the individual wants to strengthen their independence and economic well-being and they solicit support, guidance and resources from the organization’s representative. The person who needs support drives the approaches and services.)</td>
<td>The <em>locus of control</em> is centered on the primary representative of the organization who guides the individual requesting or needing the service (example: the organization defines the services it can provide based on legislation, policies and resources. The individual chooses the services, based on the information from the organization's representative and conforms to expected outcome measurements.)</td>
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<td>The <em>evaluation</em> is based on the changes of the individual and the sustainability of the services for the individual (example: measurements are based on the progress of the individual and their continuation to change and improve. These measures could include longevity in employment,</td>
<td>The <em>evaluation</em> is based on total number of individuals who receive services and benefit from the services (example: measurements are based on reducing the percentage of individuals who are unemployed, the number of individuals employed in a specific employer sector, the number that</td>
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completion of a degree or reducing the costs of government support and increasing individual financial independence. Various States are examining Return on Investment measures that include the individual and the cost of services and support.)

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<td>The <em>measurements</em> are based on micro-changes with an individual that are aggregated by various demographics and highlighted using the individual case study methods (example: impact of services and outcomes are described through individual case studies and illustrated by the incremental progress and achievements such as linking expectations from assessment to educational attainment to employment.)</td>
<td>The <em>measurements</em> are based on macro-changes of groups of individuals and percentages of change (example: reported by number of persons receiving services, percentage changes in employment and drop-out rates, number of successful closures and/or number of training activities that are completed.)</td>
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The principles and services cited in Table 1 reflect a comparison between person-centric and system-centric public polices for services with persons with disabilities. As an example, many of the WIA programs in Title I are designed to fill immediate employment needs for employers. Title I addresses a group of individuals – those who are unemployed – to meet the needs of employers. Once employed, the individual’s case is closed successfully. There is no question that this is a valuable service from an employer perspective and a government perspective. Title I meets the immediate needs of unemployed individuals. In this model, the individual modifies their expectations to meet the employment needs of the employer.

In Title IV of WIA – the Rehabilitation Program – the independent variable is the individual with a disability. The intent is to develop a career and find sustainable employment that meets the unique needs and expectations of the person with the disability. This may involve specialized training, education and other supports, including assistive technology, to ensure the person has a sustainable employment opportunity. Once employed, the individual is entitled to support for at least 90 days and then post-employment services after their case services are closed. In this model, the work environment is modified to maximize the abilities of the individual with a disability.
Both public policy approaches (i.e., person-centric and system-centric) have a purpose and a focus. The challenge is to ensure continuity in our government support systems for workforce development that equally addresses the unique needs of the individual and the organizational systems in each State that are mandated to carry out these public policies. Ensuring that these public policies work requires thoughtful consideration, planning and implementation by policymakers, administrators, employers, providers and ultimately the recipient of the services, i.e., the person who is trying to enter or return to the labor market.

**What are the Challenges and Opportunities for the future?**

The very nature of work is changing in our society. The demands and the expectations of the worker today and tomorrow are dramatically different from the demands a generation ago or even at the turn of the 21st century only 14 years ago. Technology has changed the expectations for work. The global economy and the growth of multinational organizations who have the capacity and will to diversify their manufacturing throughout the globe is changing the nature of work in the US. We see discussions everyday regarding the impact on persons who are considered long-term unemployed. There is a shrinking middle class and jobs are becoming either highly technical or automated. Our government systems are changing and the variances between and among geographical areas are widening. Creating public policies that reflect a “one size fits all” is doomed to failure. It becomes increasingly difficult to create a system-centric approach to domestic employment public policies that is sustainable and consistent over time.

As we examine our policies of today and shape our legislative mandates and policies for the future there are five questions that are integral to ensuring that our public policies in rehabilitation are driven by person-centric principles and support the sustainability of our systems. The key is to ensure that our public policy is built on person-centric principles while maintaining a system-centric balance related to outcome measures and accountability. With each question, we have provided a discussion of a current policy and the dilemma associated with being either system-centric or person-centric. The key focus is: how do we ensure our policies are person-centric while ensuring they meet the system-centric requirements of legislative and administrative mandates?

**Question 1:** As we discuss new legislation or reauthorization of existing legislation, is the primary discussion about how the service delivery system operates (system-centric) or how the service delivery system can be improved to meet the needs of the consumer (person-centric)?
Illustration: In the current proposed reauthorization of the Workforce Investment Act (S 1356), there is a recommendation to move the Rehabilitation Services Administration (RSA) from the US Department of Education to the US Department of Labor’s Office of Disability Employment Policy (ODEP) and combine these organizational units. The primary rationale for this recommendation is the consolidation of two programs that focus on disability and employment. One (ODEP) focuses on policies and information dissemination while the other (RSA) supports the implementation of vocational rehabilitation services through the Federal/State partnership. This is clearly a system-centric recommendation. The purpose of this consolidation is to align employment programs under the Department of Labor. However, there have been no cost benefit studies or analysis completed that this system-centric approach (restructuring) will increase effectiveness and conserve resources that can be directed to person-centric services. It appears that the only driving force is the organizational alignment of programs and systems without regard for the persons who are served through these programs.

Question 2: When we create a policy, is it designed to help the organization conform to a law or regulation (system-centric) or is it designed to benefit the person receiving services (person-centric)?

Illustration: An example of this question is the 60-day requirement to determine eligibility. A State rehabilitation agency mandates that all eligibility decisions must be made within 60 days. The motivation expressed to the counselors by their supervisors is “to ensure conformance with the system requirements, i.e., RSA Monitoring guidelines”. This is a system-centric requirement. However, if the reason is to make the eligibility decision as soon as possible to enable the consumer to begin receiving services the focus of the policy moves from system-centric to person-centric. If the administrators and supervisors frame the interpretation of the policy in the context of benefits to the consumer and then reinforce the behaviors for improved responsiveness to the consumer, the policy moves toward a person-centric system. However, many organizations interpret the policy in the context of conformance to audits, regulations and/or system-centric policies. The implied message is driven by what is good for the system – not the consumer.

Question 3: When determining financial policies for the authorization of consumer services, are determinations made based on past practices and the aggregate of costs among all consumers (systemic-centric) or are financial parameters established that provide latitude for specific consumer needs (person-centric)?

Illustration: An example of this question relates to the provision of education in preparation for employment. Based on the determination of eligibility, a State
rehabilitation agency will work with an individual who is in their last years of high school, through college, and into employment. The services may last for a number of years with the intent that there is an employment outcome that will sustain the individual during their adult years. This approach reflects a person-centric approach. In a system-centric approach, the education and/or training options are pre-determined based on costs, time parameters, and outcomes with the focus on obtaining a job (vs. a career) without consideration for its long-term sustainability. This approach reflects a system-centric approach. In the latter approach, the nature and duration of the services are typically determined by the average costs per participant while the first example is determined by the needs of the person and long-term sustainability.

**Question 4:** When selecting personnel to work with your consumers, are the requisite attitudes, knowledge, skills, and abilities driven by the needs of the organization (system-centric) or the needs of the persons being served (person-centric)?

**Illustration:** An example of this question relates to the professional qualifications for personnel who work in the various organizational systems that deliver workforce development programs and rehabilitation programs. Various hiring authorities (i.e., State agencies, community organizations and local employment offices) determine the personnel qualifications in workforce development programs. The entry-level qualifications typically require the completion of an undergraduate degree, regardless of the subject matter expertise. In a number of these positions, experience can be substituted for academic requirements. There are a limited number of academic degrees designed to provide academic preparation for a service delivery position in a workforce development program. Specific academic credentials are more often required for supervisory and administrative positions with academic degrees in public administration, business administration and/or human services administration. The driving force for the academic and training credentials is compatibility with the hiring authority and the system requirements of the organization (i.e., a system-centric approach to personnel outreach, recruitment, selection and retention).

In comparison, the *Rehabilitation Act* and its amendments have a long history of supporting professional qualifications of future and current rehabilitation personnel. The initial Federal funding for academic credentials of rehabilitation counseling personnel was approved in 1954. Currently, there are over 90 universities offering graduate degrees in rehabilitation counseling. The current Federal legislation requires that qualified personnel must be responsible for determining eligibility and being the primary counselor and case manager with a person with a disability. Specified graduate academic credentials, national certification and State licensure laws dictate the credentials for the direct service provider. The driving force in these professional qualifications is the knowledge, skills and abilities to
address the unique needs of the person with a disability. In essence, this reflects a person-centric approach to personnel outreach, recruitment, selection and retention.

**Question 5:** *When we examine accomplishments based on the enabling legislation, is the focus on the number of persons being served and the cost of the services (i.e., a system-centric approach) or on the uniqueness of the persons being served and their long-term economic and personal independence (i.e., person-centric approach)?*

**Illustration:** When annual results are reported to the various authorities (i.e., local governments, State governments and legislatures, and or Congress and the Administration), are the numbers about persons served and employed, including the cost per person (typically system-centric criteria) or on the return on investment and long-term individual accomplishments (typically person-centric criteria)? Are the reporting metrics linked to number of services, time it takes from outreach to closure, costs per service and average cost per all participants? These outcome measures are typically in large data sets using various demographic characteristics such as age, gender, ethnicity, length of time from acceptance to closure and various categories of closure. These reporting mechanisms typically aggregate data across groups of individuals and continuously target cost allocations. In a person-centric system, there are discussions regarding return on investment and the development of the individual’s competencies that will provide long-term sustainability and competitive employment.

The five questions cited above provide a framework for developing and analyzing public policy at the Federal, State and local levels. The key for any public policy is both the intended and unintended outcomes. There is no question that a system-centric policy in the area of employment and jobs is important for short-term and targeted issues (i.e., high unemployment in a particular community, employer sector or to stimulate the economy). However, because of our changing demographics and the economic trends and cycles that we experience, these programs are typically not sustainable or relevant for long periods of time. They provide a positive “fix” for a specific outcome (i.e., acquiring a job). When we examine the person-centric policy it typically is a more organic process that has the flexibility to adapt to the needs of the individual and their changing environment and expectations. Public policy related to a person-centric system is more complex, requires constant examination, and requires a balance between the needs of the person being served and the available resources. Creating an equilibrium that respects and honors the rights of the individual (person-centric) while insuring organizational credibility (system-centric) in the challenge for policy makers and administrators.

**Closing Thoughts**
While it is critical to have a balance between the two approaches, it is of paramount concern to identify the drivers behind the public policy development, debate and implementation. The system-centric approach requires the individual to adapt to and conform to the demands of the community while the person-centric approach enables the individual, with the support of the service providers, to modify their environment to meet their unique abilities and expectations. The statement that continues to resonate is a reiteration of the words by FDR:

*It is the purpose of government to see that not only the legitimate interests of the few are protected but that the welfare and rights of the many are conserved.*

Do our public policies in rehabilitation protect the welfare and the rights of all persons with disabilities or only the few who are served by the systems that have emerged over the past decades? Will we look back at the last 94 years of the public rehabilitation program and see the legislation as a historical artifact of our values regarding the rights of each person to live a full life? Or, will we view the past public policies as the building blocks to strengthen, the access, equity and economic self-sufficiency of each person with a disability? These questions remain unanswered and serve as the basis for shaping public policy in rehabilitation in the years and decades ahead.

**References**

**Citations for identified Federal Legislation**


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