



# Institute for Research on Poverty

Volume 4  
Number 2  
Summer 1980

# Focus

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ISSN: 0195-5705

## Moving into the mainstream: Policies for the disabled

by Sheila Ryan

In the spring of 1977 many television viewers who tuned in to the evening news were taken aback by footage of unprecedented demonstrations in the nation's capital. The number of demonstrators was not unusually large, nor were the demonstrators violent, but what startled many Americans was the fact that the demonstrators were, by and large, all physically disabled. More accustomed to telethons featuring pleas on behalf of adorable "poster children" in wheelchairs, these viewers were unprepared for the sight of disabled activists occupying HEW offices. The strategy worked, in any event, as the demonstrators achieved their goal: the signing into law of regulations implementing the Rehabilitation Act of 1973, which grants nondiscrimination and affirmative action rights to the disabled. Disability policy had moved into the national spotlight, along with a group of people who until quite recently had been almost invisible: the disabled.

### Who are the disabled?

How many disabled people are there in the United States? That depends on who is defining "disability" and for what purpose. Using data from the Census Bureau's 1977 Current Population Survey, Institute researcher Barbara Wolfe estimates that 14.3 million Americans be-

tween ages 20 and 64 are disabled. Wolfe arrived at this figure by totalling the number of respondents in three categories: those who participate in an income support program for the disabled (Disability Insurance, for example), those who experience a work limitation, and those who are employed in a sheltered workshop such as Goodwill Industries.

But there are other ways to count the disabled. In 1972, the Social Security Administration sought information about the nature and extent of disability in the United States; its 1972 Survey of Disabled and Nondisabled Adults (SDA) classified respondents as disabled based on their self-assessed capacity for work. Although the survey also featured questions dealing with individuals' ability to move about independently and to dress and feed themselves without assistance, respondents were classified according to a work-related definition of disability. Individuals whose work limitations ranged from severe to merely secondary were included, yielding the estimate that 15.6 million Americans between the ages of 20 and 64 considered themselves disabled.

(The Social Security Administration's estimate is somewhat higher than that arrived at by Barbara Wolfe. Since the Census Bureau's survey directed no questions specifi-

cally toward limitations in housework, as did the SDA, Wolfe speculates that this may account for the difference.)

Definitions of disability used to determine eligibility for cash disability benefits, on the other hand, are far more stringent than those employed by most researchers. For the purposes of the Social Security Administration's Disability Insurance program, a person is not considered disabled unless he or she is, in effect, unable to work at all due to a medically determinable physical or mental impairment. (One must also be covered by Social Security to qualify.) Under this definition, only about 2.9 million Americans can be considered disabled.

Yet no matter how we choose to count the disabled, a disturbing picture emerges once we look at available data for more details on who the disabled are: the disabled are more likely than the nondisabled to live below the poverty line, and this remains true even though they are much more likely to receive transfer payments. They are less likely to be employed, and, if they do hold jobs, they are likely to be paid lower wages than the nondisabled. Some of the biggest earnings gaps occur at the very lowest levels of education, which is where much higher percentages of disabled than nondisabled people are concentrated. Even among those who finished high school and went to college, the differences are large. About 50 percent of disabled college graduates earn less than \$4.00 an hour, compared with 30 percent of nondisabled college graduates, according to Wolfe.

Indeed, even if a disabled person manages to find a job which pays fairly well, his or her cost of living is likely to be higher than that for a nondisabled person. A quadriplegic, for example, faces the added costs of a

wheelchair, medical supplies, perhaps an attendant to provide assistance with personal care and housekeeping. It should come as no surprise then that one disabled activist has spoken of the "devastating combination" of disability and poverty.

Our picture of the disabled begins to blur when we look at the relationship between disability and age. The proportion of people who consider themselves disabled rises sharply with age. Up to age 45, only about 10 percent of American men are disabled; between ages 45 and 54, the percentage jumps to about 15 percent, and it rises to 23 percent for those between 55 and 64. Although these patterns quite likely reflect the relationship between increasing age and the occurrence of chronic diseases, we must also look to the decreased likelihood of obtaining or returning to work as age increases. Once we recall that virtually all definitions of disability are keyed to one's limitations with respect to work, it makes sense that older people are more likely to be classified as disabled. Regardless of health, many people begin to work less in their late fifties and early sixties. Early exits from the workforce result from interconnected health and financial considerations, and it is difficult to sort out precise causes and effects.

In short, there exists a complex relationship between age, disability, and unemployment that is difficult to untangle. A 60-year-old man, perhaps because of his age or a combination of age and disability, will find it more difficult to obtain employment than will a 25-year-old man; hence he is more likely to be classified as disabled under a work-related definition of disability.

## Programs and policy

Is it any wonder then, given these muddled relationships, that the United States' programs for the disabled are something of a hodgepodge? The fact is that currently the United States has no disability policy per se. What is labeled as such, according to Institute researchers Howard Erlanger, William Roth and a group of their colleagues, is in reality a variety of policies, each with quite different origins and purposes. Programs designed to benefit people with disabilities have most often been enacted within the context of more general policies such as labor, welfare, or veterans' policy.

This is true of the four largest (that is, most expensive) programs aimed toward people with disabilities: (1) workers' compensation, (2) Social Security Disability Insurance (SSDI), (3) Supplemental Security Income (SSI), and (4) benefits to disabled veterans. The workers' compensation program, for example, represents the culmination of a fifty-year battle sparked by the appalling rate of injuries that accompanied the mechanization of American industry in the late nineteenth century. Today

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## Selected papers

Barbara L. Wolfe, "Impacts of Disability and Some Policy Implications." Institute for Research on Poverty Discussion Paper no. 538-79.

Howard S. Erlanger, William Roth, Allyn Walker, and Ruth Peterson, "Disability Policy: The Parts and the Whole." Institute for Research on Poverty Discussion Paper no. 563-79.

Robert H. Haveman, "The Dutch Social Employment Program." Institute for Research on Poverty Reprint no. 319.

it functions as a system of state-sanctioned insurance programs providing income maintenance, medical payments and rehabilitation services for work-related accidents or occupational disease.

Workers' compensation programs focus on employers' responsibility to compensate employees for work-incurred disabilities; SSDI, on the other hand, is linked to the broader issue of society's obligation to ensure a minimal income and basic medical care to workers who have dropped out of the workforce because of disability. Briefly, it is a federal social insurance program whose provisions are roughly equivalent to those of the basic Social Security program. (Benefits are based on a worker's contributions to Social Security.)

While both workers' compensation and SSDI are keyed to a disabled person's previous status as a worker, benefits to disabled veterans are linked to service in the armed forces. For the disabled veteran, two types of benefits are available: the first, similar in its purpose to workers' compensation, provides compensation for service-connected disabilities; the second bears a closer resemblance to SSDI, as it provides pensions for those whose disabilities are not service-connected.

What workers' compensation, SSDI, and disabled veterans' programs all have in common is their focus on either the origin of the disability (if an employer is at fault, he should make compensation) or the worthiness of the disabled person (as measured by participation in the labor force or a military record). In addition, none of these programs is means-tested: that is, recipients generally need not meet income and resources tests in order to qualify for benefits. The major means-tested program for the disabled is the Supplemental Security Income program. The purpose of SSI, quite simply, is to guarantee a minimal income for the needy aged, the blind, and other disabled people who meet income and resources tests and other requirements. As such, it is the only "welfare" program among the four major programs for the disabled.

One feature all of these programs have in common has been criticized by some analysts of disability policy, including IRP researchers Howard Erlanger and his colleagues. None of these major programs has as its principal goal the integration (or reintegration) of the disabled person into society. Based on the premise that disabled people do not work, they simply award stipends to those deemed "deserving."

### **Jobs for the disabled**

Offering a somewhat different approach are the vocational rehabilitation programs. These are joint federal-state programs which assist disabled people in obtaining job training. Each state administers its own rehabilitation program, but the federal government pays 80 percent of the costs, in addition to making grants for facilities and

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## **New Institute Director**

On July 1, 1980, Eugene Smolensky was appointed Director of the Institute for Research on Poverty, replacing Irwin Garfinkel, who had completed a 5-year term. Smolensky, an economist, received his Ph.D. from the University of Pennsylvania; he taught at Haverford College and the University of Chicago before coming to the University of Wisconsin in 1968. In 1978-79 and 1979-80 he served as Chairman of the Department of Economics. His research has focused on income distribution and inequality; he is co-editor of an Institute monograph: *Improving Measures of Economic Well-Being* (with Marilyn Moon); and coauthor of *Public Expenditures, Taxes, and the Distribution of Income: The U.S., 1950, 1961, 1970* (with Morgan Reynolds). His government assignments have included positions at the Bureau of the Census, Bureau of Labor Statistics, Social Security Administration, Council of Economic Advisers, Economic Development Administration, and the Office of the Secretary of HEW. Current research interests include the policy ramifications of consumption-based measures of inequality.

Irving Piliavin has become Assistant Director for Research, for the 1980-81 academic year. A Professor of Social Work at Wisconsin, he received his degree from Columbia University and has taught at the University of California at Berkeley and the University of Pennsylvania. His research interests center on crime, law enforcement and correctional programming, and the organization and delivery of welfare services.

Past Director Irv Garfinkel will continue as Professor of Social Work at Wisconsin and as a research staff member of the Institute. His current research involves an extensive project on reform of the current child support system. During the fall of 1980 he will serve as a consultant to the Assistant Secretary of Planning and Evaluation at the Department of Health and Human Services in Washington. ■

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training of personnel. Although a stated aim of vocational rehabilitation is to make disabled people more employable, critics have accused the rehabilitation "establishment" of striving too hard to justify itself by stressing saving money and increasing industrial output as the primary reasons for rehabilitating the disabled.

These critics' major dissatisfaction with the standard approach to rehabilitation, indeed with all the components of current disability policy, is an emphasis upon the disabled person as the locus of the problem. Instead, the critics regard the generally dismal socioeconomic status of

the disabled as a consequence of a labor market which does not accommodate disabled workers. In recent years, there has been increasing interest in publicly providing or subsidizing employment programs for the disabled. (Some of this interest arises, one suspects, less from a concern with providing useful employment for the disabled than from concern over the perceived cost of current income maintenance programs.)

Proponents of such programs have discussed guaranteed public jobs for the disabled as a complement to a reformed income support system, the extension of federal grants for state and local public employment, and greater public funds for sheltered workshops (such as Goodwill Industries) or supported work.

### The Dutch experience

Although current U.S. disability policy guarantees some income support, it does not guarantee employment for disabled persons. In some Western European countries, in contrast, the provision of employment for anyone who wishes to work is a stated goal of public policy.

The government of the Netherlands, for instance, sponsors a Social Employment program which provided jobs for over 64,000 disabled and other disadvantaged workers in 1976. In the interest of illuminating current policy discussions in the United States, IRP researcher Robert Haveman has studied this program in depth. The Dutch experience with Social Employment, according to Haveman, contains a number of warnings pertinent to U.S. discussions regarding publicly provided or subsidized employment for the disabled. For one thing, the Dutch program is quite costly: by 1975 it took all of the gross wage income in a typical family plus 10 percent of the wage income in a second family to support the subsidy for one worker in a Social Employment industrial center. Further, Haveman claims that the program is increasingly serving workers who have difficulty in securing regular employment because of low skill, age, or some other personal characteristic, rather than a readily distinguishable physical disability.

Were such a program to be established in the United States, the potential size and budget cost could be enormous, Haveman warns. Given the current political mood

(Congress voted earlier this year to cut disability aid), the notion of massive expenditures directed toward employing the disabled seems unlikely to garner much public support.

### Disability rights

Policymakers' concern over high cost and possible abuse of programs for the disabled strikes some observers as misplaced, however. Critics of the benefit-cost approach to social policy complain that, in the words of one disabled activist, "the government seems to look at disabled people, when they are talking about allocating funds, as to what dollar return they can get from rehabilitating people, instead of saying, Let's rehabilitate a person because he is a human being and entitled to rehabilitation."

Such charges are difficult to deny. When faced with a choice between either revamping, say, an entire mass transit system in order to accommodate disabled people or setting up a separate shuttle service, most decisionmakers will opt for what they see as the cheaper alternative. Unfortunately, the cheaper alternative, in this instance as well as others, places disabled people in a separate and quite unequal position in relation to those who are not disabled. Most shuttle buses serving the disabled require their riders to schedule trips in advance, and it is clear that such a requirement curtails the sort of spontaneous traveling which nondisabled people take for granted.

Disabled activists, however, have found it difficult to win cost-conscious administrators over to this point of view, and many have resorted to other approaches. They have pointed out to store managers unwilling to replace stairs with ramps that installation of ramps would render their stores more accessible to elderly people and parents with children in strollers as well as to the disabled. When persuasion has failed, they have called press conferences and organized pickets. They have asserted that disabled people should enjoy the same right to participate in society as nondisabled people, and they have made it clear to legislators that a poor voting record with respect to disability rights can be a liability.

Proponents of disability rights look to two recent pieces of legislation for a reversal of those policies which they believe segregate the disabled from society: the Rehabilitation Act of 1973 and the Education for All Handicapped Children Act of 1975. These laws seek to bring disabled people into the mainstream through nondiscrimination and affirmative action programs, removal of architectural barriers, and mainstreaming in the public schools. Although no one is sure to what extent HEW or the courts are willing to enforce these policies, one thing is certain: yesterday's "shut-ins" are unlikely to consent to being shut out of decisions affecting their future. ■

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