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Summary of the Proceedings of a Seminar Addressing

THE COORDINATION OF PROGRAMS SERVING HANDICAPPED INDIVIDUALS

Sponsored by

The Office for Handicapped Individuals

in conjunction with

The White House Conference on Handicapped Individuals

January 23-25, 1977

Prepared by the

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
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INTRODUCTION

These proceedings are the product of a three-day seminar sponsored by the Office for Handicapped Individuals which addressed the coordination problems of service programs for handicapped individuals. The transcripts of the various presentations made at the seminar, and the coordinative issues and recommendations which were prepared by the seminar participants, are presented in the following pages. The information generated by the seminar will be used both by the Office for Handicapped Individuals in planning its coordinative agenda, and as background materials by the White House Conference on Handicapped Individuals implementation team.

The seminar format consisted of a series of work group sessions interspersed with presentations made by knowledgeable individuals in the areas of coordination and/or programs serving handicapped individuals. The format was determined by a planning committee composed of individuals representing Federal and State agencies, public and private service providers, and consumers.

The following criteria were used by the planning group in identifying appropriate seminar participants:

- Expertise in areas in which coordination and cooperative planning are needed
- Perspective on the needs of handicapped individuals
- Representation from various disability groups
- Experience with service delivery systems in the public and private sectors
- Responsibility and authority to make policy decisions.

The seminar participants included representatives from Federal, State and local governments, private sector organizations and consumer group representatives.

Four issue areas were identified by the planning committee as encompassing most coordinative problems:

- Legislative concerns
- Federal practices
- Federal-State-local interrelationships
- Public/private sector interrelationships.

Work groups were organized to produce effective recommendations in each of the four issue areas. A further delineation of the issue areas and the recommendations developed by each work group are presented on page 1, along with some additional comments submitted by participants following the seminar. A discussion paper prepared by the National Institute for Advanced Studies was distributed to seminar participants as background material. The paper, which addressed Federal Coordinative Strategies, is included in the appendices to this document.

The seminar itself proved to be a valuable coordinative strategy. It promoted both structured and informal interaction among a diverse group of participants in terms of background, program experience, and knowledge about and experience with various kinds of disabilities requiring special services. It helped many participants identify the limited perspective which results from active participation in limited service program areas, and contributed to a greater sensitivity to both the range of disabilities and the thwarted human potential of many disabled individuals. Developing sensitivities to the breadth and extensiveness of the problems faced by all disabled individuals has been neglected in the face of the many private and public efforts on behalf of specific handicapped groups. Many participants regarded the seminar as a productive initial effort in developing this sensitivity, which will in turn lead to the development of realistic coordinative objectives.

The seminar was held in conjunction with the White House Conference on Handicapped Individuals which takes place in May 1977. The proceedings reflect the concern of the Office for Handicapped Individuals and White House Conference on Handicapped Individuals staff for developing an effective and comprehensive implementation plan which will incorporate the Conference recommendations in a coherent and cohesive framework.

William J. Bean
Acting Director
Office for Handicapped Individuals

PREFACE

This document summarizes the proceedings of a two-day seminar held in Reston, Virginia, January 23-25, 1977, which addressed the coordination of programs serving handicapped individuals. The Office for Handicapped Individuals sponsored the seminar in conjunction with the White House Conference on Handicapped Individuals.

Part I presents the issues, recommendations and post-seminar comments generated by the seminar's four standing work groups. Each group formulated a statement of issues and recommendations for submission to the White House Conference on Handicapped Individuals Advisory Council on one of the following four topics:

- Legislative concerns
- Federal practices
- Federal-State-local interrelationships
- Private/public sector interrelationships.

Part II contains the transcript of a presentation made by Dr. David B. Walker, Assistant Director, Advisory Committee on Intergovernmental Relations. Dr. Walker described the wide range and complexities of coordinative issues emanating from present day intergovernmental relationships.

Part III consists of a transcription of a presentation delivered by Dr. Edward V. Roberts. Dr. Roberts, Director of the California Department of Rehabilitation, discussed the need for increased political activism and participation by handicapped individuals in the social service programs which deliver services to disabled individuals.

A transcript of a panel presentation addressing Federal practices related to programs serving handicapped individuals appears in Part IV. William M. Eshelman, Assistant Commissioner for Cooperative Programs in the Rehabilitation Services Administration (RSA), discussed RSA's coordinative activities. Edwin W. Martin, Acting Deputy Commissioner, Bureau of Education for the Handicapped, outlined the budgeting process of the Office of Education and his target-group planning proposal. William R. Feezle, Chief, Field Operations Branch, Office of Management and Budget, addressed the management and coordination role of the Office of Management and Budget. Dr. Fred Fay, Director of Research at Tufts Rehabilitation Institute, moderated the panel and the discussion period which followed.

Part V, "A Consumer's Viewpoint," is a transcript of a presentation made by Harold E. Krents of Surrey, Karasik and Morse.

The Appendices contain the discussion paper, "Federal Coordinative Strategies," which was prepared by Elizabeth Defay, et. al, of the National Institute for Advanced Studies. Comments submitted by seminar participants following the seminar, the Seminar Agenda, and a List of Participants comprise the other Appendices.

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CONTENTS (cont.)

With the exception of the Discussion Paper addressing Federal Coordinative Strategies and participant comments, all materials presented here are edited from tape recordings of sessions held January 23-25, 1977.

Issues, Recommendations, and Comments

LEGISLATIVE CONCERNS

Objective

To develop a comprehensive legislative package based on White House Conference on Handicapped Individuals recommendations, and stipulate procedures for monitoring the implementation of recommended legislative changes.

Issue #1: How should the legislative recommendations of the White House Conference on Handicapped Individuals be implemented?

Recommendation: The legislative recommendations of the White House Conference on Handicapped Individuals must have the support of the Office of the President for prompt and effective implementation. A special assistant to the President, or a person of similar title and degree of authority, should be appointed to analyze the recommendations of the White House Conference on Handicapped Individuals, and to facilitate and monitor their implementation. In this way, the President can recognize the importance of mutual policy formulation among executive, legislative, and consumer interests, and express his own commitment to the purposes of the White House Conference on Handicapped Individuals.

Issue #2: The output of the White House Conference on Handicapped Individuals will undoubtedly include a number of recommendations relating to new legislation, amended legislation, and increased funding. There is a strong probability that in many cases existing legislation includes the necessary policy and implementation mechanisms. How should such recommendations be incorporated into a comprehensive legislative package?

Recommendation: Under the auspices of the White House Conference on Handicapped Individuals and/or the Office for Handicapped Individuals and/or the Special Assistant to the President, the following steps should be taken:

1. All recommendations of the White House Conference on Handicapped Individuals should be reviewed and analyzed with respect to existing legislation by both government representatives and an organization or group outside of government. The analysis will include the following components:

    a) A determination of instances in which existing legislation includes the policy and mechanisms

necessary for implementing the White House Conference on Handicapped Individuals' recommendations. In these cases, a determination should be made of why current implementation efforts are failing to achieve the desired objectives.

b) A determination of appropriate legislative changes.

c) A determination of resources required to meet the objectives of the White House Conference on Handicapped Individuals' legislative recommendations.

2. A legislative package or packages should be developed, based on this analysis, for distribution to the appropriate legislators, executive agencies, and professional, voluntary, and consumer organizations for their review and comment concerning the probable impact of the recommended policies and processes on handicapped consumers.

Issue #3: How should the multitude of Congressional Committees which have a concern and responsibility for legislation relating to handicapped individuals avoid the development of inconsistent and/or contradictory legislation when designing laws to meet the needs of special groups?

Recommendation: Constructive steps should be taken in the Congress to provide for coordination and cooperation by Congressional Committees which encompass handicapped and disabled children and adults in their mandates.

Issue #4: How can White House Conference on Handicapped Individuals participants follow the implementation progress of legislative recommendations in future years?

Recommendation: On or about June 1, 1978, and in subsequent years, the President should submit a report to the Congress on the then current status of the implementation of the recommendations of the White House Conference on Handicapped Individuals. The Office for Handicapped Individuals should make such reports available to all professional, parent, volunteer and consumer organizations represented at the White House Conference on Handicapped Individuals, and should invite their comments and/or further recommendations.

Objective

To develop a coordinative system for programs serving handicapped individuals which is supportive of Federal, State and local accountability for the provision of effective services in an efficient manner. Programs should be established with due regard for consumer needs, participation, and the right to redress. This coordinative approach should be called consumer-based programming.

Issue #1: What is the role of consumer organizations in consumer-based programming?

Recommendation: Consumers should be actively and effectively involved in establishing policy for programs serving handicapped individuals. Consumers should be included in advisory committees and decision-making boards on more than a token basis, with paid consumer input. Procedures should be developed to ensure equity and adherence to democratic processes in determining consumer participation. Areas which should include greater consumer input include the Federal level affirmative action program, individualized rehabilitation programs, and program policy, planning, evaluation and regulation activities.

Issue #2: How should authority be established and enforced for consumer-based programming?

Recommendation: Establish a national planning group by either legislative statutory provision or by executive order. A strong base should be established in support of such a council, such as sufficient staff and resources to ensure the council's effectiveness. A special assistant in the White House should be given responsibility for coordinating the Council's activities with other departments, agencies, and existing advisory councils.

In addition, a similar interagency council should be established for policy and planning purposes within each executive department. These councils would facilitate the development of joint powers agreements and memoranda of agreement, and would explore other bilateral and multilateral means of identifying and reducing policy conflicts. An ombudsman or special assistant should be established at a high level within each of the departments with management responsibility for council activities. The establishment of departmental councils and special assistants should be accomplished under either legislative authority or executive order.

Issue #3: How can access to information and data be improved?

Recommendation: Develop methods for increasing public awareness. Some of the methods which should be explored in detail include:

- Telecommunications systems.

- Professional education, including University-Affiliated Facilities, Research and Training Centers, and other University-centered assistance methods.

- Develop a National Information Center for the Handicapped, including an information clearinghouse which would collect, evaluate, and disseminate information from Federal and State governments, universities, voluntary organizations and other sources. For instance, the University of Denver project studying interagency coordination and linkages should contribute to such a system, as should consumer studies such as those being conducted at Tufts and other universities.

Objective

To develop and reinforce effective political responses and leadership in support of established public policy goals and objectives by effectively organizing and mobilizing the disabled community, advocacy groups, and service providers at the Federal, State and local levels.

Issue: How can the dynamics of the minority status of handicapped individuals be used to attain established objectives at the Federal, State and local levels?

Recommendation: Propose Federal legislation, similar to the Older Americans Act of 1965, or perhaps an executive order, which would consolidate certain Federal agencies as a means of stimulating innovation, providing clarity of mission, and rationalizing the use of resources, model development and demonstration projects. Federal and State councils or agencies serving handicapped individuals should be established to:

1. Encourage and enforce coordinative planning and service delivery to ensure that all handicapped citizens, particularly the severely handicapped, receive the services to which they are entitled in the most rapid, efficient, and cost-effective manner possible;

2. Encourage and enforce consumer involvement in the disbursement of block grant and general revenue-sharing funds at the State and local levels;

3. Assess and analyze the extent of need and availability of services;

4. Generate public awareness of the need for services for handicapped individuals.

Objectives

To broaden target populations; increase consumer involvement in planning service programs; restrict public funding to effective service delivery programs; reduce monitoring, compliance, and evaluation costs; establish a unified, nationally-based program of advocacy.

Issue #1: How can handicapped individuals gain access to the public planning processes of service programs?

Recommendation: Develop legislation requiring that advisory committees, composed of a majority of disabled persons, be established at the Federal, State and local levels to devise priorities and become significantly involved in the planning, monitoring, and evaluation of programs serving handicapped individuals. Agreements would be negotiated between the advisory committees and sponsoring agencies concerning the specific purposes of the committee.

Issue #2: How can the target population be broadened to include all handicapped citizens?

Recommendation: Establish a protection and advocacy system similar to that authorized by Section 113 of the Developmental Disabilities Act. The system would be implemented gradually, following these guidelines:

a) Allow the protection and advocacy system time to develop and evaluate it;

b) Evaluate other protection and advocacy systems;

c) Develop new legislation based on evaluation findings;

d) Require Federal agencies to develop regulations in a timely fashion which fit the intent of the law.

Issue #3: How can public and private agencies be encouraged to effectively meet the established goals and objectives of programs serving handicapped individuals?

Recommendation: Funding agencies should be required to disburse grant funds to public and private agencies on the basis of evaluations of their relative effectiveness in meeting program goals and purposes. Private agencies which evaluate their own programs should be allowed to compete with public agencies for grant funds. The criteria for these evaluations would be

established by the funding agency and negotiated with an advisory committee composed of a majority of handicapped individuals and/or their adherents.

Issue #4: How can Federal, State, and local monitoring and evaluation costs be reduced and duplication prevented?

Recommendation: A federal agency should fund a comprehensive study by a competent management firm experienced in reviewing program reporting, monitoring, and evaluation studies ranging from Congressional to local requirements. This study would establish a basis for the development of a more rational, effective, and less costly data collection system to meet these multiple needs.

Issue #5: How can an effective, interrelated national system of advocacy programs for handicapped individuals be developed?

Recommendation: There should be established within the Office of the President, or within the Domestic Council, a position of Special Assistant to the President for individuals with disabilities. The Special Assistant would act on behalf of the President in facilitating the development of cross-cutting mechanisms for all programs serving persons with disabilities. The responsibility of the Special Assistant would be to ensure the coordination and monitoring of service delivery planning, evaluation, and compliance monitoring activities, and provide assistance in the development and evaluation of legislation proposed by the Congress and Administration.

In addition, there should be established a National Council on Individuals with Disabilities to assist in the execution of these responsibilities. Council representatives should include a Special Assistant for each Department. The Council should include 17 other individuals, including eight disabled individuals, representing national organizations run by persons with disabilities; five parents or adherents of individuals with disabilities, representing national organizations run by parents and adherents; and four representing national provider organizations. These 17 individuals should be appointed by the President.

In addition, there should be established in each Region a Regional Council on Individuals with Disabilities, to supervise the implementation of National Council policies and recommendations. Membership would include a Deputy Special Assistant to serve as a key staff person to the Regional Director for programs serving handicapped individuals. The Regional Council should also include three representatives from each State, one of whom should be an individual with a disability; the second, a parent or adherent; and the third, a service provider. The disabled, parent, and service provider representatives would constitute majority representation on the Council.

It is recommended that comparable councils be established at the State and local levels.

Intergovernmental Coordinative Problems
Speaker: David B. Walker, Ph.D.
Assistant Director, Advisory Committee on
Intergovernmental Relations

It's good to be with you. The topic of coordination is one that is not easy to address. I've seen very few examples of real coordination in practice and read of only a few. Most of the definitions I've seen over the years have been irrelevant to the real world that most of you are operating in.

But as I pondered what we're trying to get at, or at least what I think we're trying to get at, I came up with this definition:

> Coordination: Efforts to produce common or mutually consistent results among like or interrelated activities.

The fuzzy part of this is the issue of what is being coordinated. Sometimes it's policy; sometimes it's planning; sometimes it's program implementation; sometimes it's all three.

In public administration, we now have at least two viewpoints as to how coordination is achieved. There is the traditional public administration viewpoint, which is essentially the old military hierarchic one, with all that implies in terms of command at the top, a chain of command to the middle tier and the bottom, and a series of institutionalized procedures. Out of this military triangular model, coordination is expected to flow based on authoritative relationships.

A newer approach states that this traditional hierarchical model is not the way in which things really get done. In effect, coordination flows from an interrelationship among people in a forum-like situation wherein shared values and the dynamics of a group situation produce a cluster of shared goals and a mutually consistent result. In practice, this is what I call the egalitarian -- some would say the group therapy -- model. However one describes it, it is an alternative view at the present time among some of the avant garde people in public administration.

The problem before us is, of course, that neither of these two views is actually operative most of the time. More often than not, especially in the intergovernmental area, both views are trying to interact with one another. You have elements of openness

and the unstructured, egalitarian approach employed by Federal officials when dealing with counterparts at other governmental levels. This really resembles a variety of international relations with all of the devious power plans that characterize such relationships. On the other hand, some of you who are Federal officials often operate as though you're on the top of the organizational pyramid, dispensing a parcel of regulations that reaches the ceiling and imposing legal mandates which permit you to behave like commanders over field troops.

So you have these two views; neither is all that helpful to real understanding, particularly with respect to intergovernmental relations. As I begin to describe what some of the root causes of the lack of coordination now are, I think we might join together, in a sense, to presumptuously put together a memo to Mr. Carter describing what his intergovernmental nightmares are going to be like.

This is largely a management memo, the bulk of which is a variation on the coordination theme. It is rooted heavily in the experience of the past ten years, the mistakes as well as the successes of that particular period. If we were to attempt to develop this memo, we would have to begin with what we've witnessed over the past decade, and include some benefits relating to the organization of the Executive Office of the President which emerged in the last two years of the Johnson administration.

Many of the problems we have stem from an unawareness at this point in time as to the number and kinds of activities that occur in the Executive Office of the President which impinge on Federal, State and local relations. We've got a cluster of basically communications kinds of relations, with information coming in from the field in terms of complaints, in terms of worries, in terms of demands from all sorts of people calling for a one-stop shopping center practically in the middle of the Rose Garden. We've got that from the field. Then there's a parcel of things that emanate from OMB, Treasury, and GSA, which impinge upon activities in the field from a government-wide stance in terms of circulars. This communicational challenge, in terms of the number and kinds of contacts, has expanded in almost geometric proportion over the past decade. So that's a real Presidential problem.

In addition, there are all of the older Executive Office efforts which have been magnified by the activities of the past decade in this governmental area. There is the basic problem of policy-making, which allegedly occurred in the Domestic Council and certain other interagency committees designated by the President. There is the budgeting process, and the activities in the budgeting process impact heavily at this point.

There are the 60 billion dollars in Federal aid now going directly to States and localities. But beyond that simple grant-in-aid dimension, the impact of overall Federal fiscal policies on the

economy of State and local governments is prodigious at this point in time. How inflationary or non-inflationary they are, how stimulative or non-stimulative they are, they impact heavily upon State and local governments.

So you have budgeting, you have policy development, you have the actual proposals as they go from the executive branch to the Hill, you have legislative reference in OMB, and you have what all these factors allegedly do and do not do in terms of sensitizing the Administration and administrators to the position of the President.

These all cluster not only in the communications area, but also in the more ordinary, familiar activities of the Executive Office of the President that heavily affect the activities of State and local governments. Part of the problem has been that these activities have been "spread all over the lot." No overall picture of these efforts and how they interrelate has been grasped by anybody -- and I don't think that's unfair -- in the Executive Office. I'm not calling for or proposing the lodging of these things all in one place -- I think that's naive if not ludicrous -- but my personal view is that there is a need for a presidential counselor of high stature and great trust in terms of the President's own relationship with him or her, who does nothing else but monitor these various activities wherever they may be in the Executive Office so that somebody's on top of this thing. This is not the case at the present time, nor has it been for some time. Beyond that, I think there's a need for clarifying the role of the Domestic Council. We're not clear on that with regard to Mr. Carter. It may go -- we saw some changes over the weekend in terms of the structure of the National Security Council and its staff; we may see similar changes in the Domestic Council.

We certainly are going to have to get a handle on these management circulars (FMC-3,4,7) that impact so heavily on the range of intergovernmental activities at this time. Some have to do with reporting on funds; some have to do with the overhead costs; some have to do with the ins and outs of attempting to standardize and simplify the grant application processes for all 540 of the Federal programs that impact on State and local governments. The problem is getting a better handle on the concatenated impact of these circulars. At the present time, we have a significant division of authority in handling these circulars. Treasury still has one, others are handled in OMB.

This brings me to another point about the Executive Office of the President. As long as we have had OMB, there's been no management. Since 1970, when there was a change from the Bureau of Budget to the Office of Management and Budget, we've had practically no management emphasis within the Executive Office of the President, vis-a-vis line agencies, vis-a-vis the circulars, vis-a-vis any of the basic administrative problems we're confronting at the present time. It is ironic that an Administration that claimed to be management oriented was so closed to administrative issues. Mr.

Carter seems cognizant of this problem. Certainly, various memos that went to him earlier in Plains all too clearly indicated that the M in OMB is something he'd better start to focus on if he has any serious aspirations about his reorganization or many of his other goals. All of this partly relates to that theory that there is some aspect of the hierarchy model -- in fact central management -- in the Federal set-up. I'm not saying that this is an irrelevant way of doing part of the coordinative business.

Turning to a second terrain, there is the departmental aspect of the coordinative picture. In the studies we've done, and we've been in the middle of a massive two-and-a-half year study on the grant system, we've looked at block grant planning; we've looked at the ins and outs of the Federal responses organizationally and procedurally to the explosion in Federal categoricals; we've looked at State aid and its impacts, and changes in State aid patterns; we've looked heavily at the continuing growth of categoricals and related problems of management. In our assessment of the Federal side of it, we surveyed Federal middle management people and interviewed top administrative people in the departments. What came through clearly to us was that much of this intergovernmental responsibility, including the ins and outs of the circulars that the departments have significant roles in, the ins and outs of program impacts, and the handling of headquarters - field relationships, were spread all over the place within the departments. The issue of who is responsible for the departmental response in a majority of instances was not clear. In some instances, however, there was a degree of cohesion. But in the responses to "Who handles A-95? Who handles A-85? Who is really responsible for Title VI of the Civil Rights Act?," we found a spread across the intradepartmental terrain that would stagger the imagination. This spread produces responses from the field which are something less than pleasant. So the departments' headquarters and field offices have gone through almost ten years of rhetoric. Some of you are still trying to figure out what is the proper relationship between your department or your particular bureau or division, and the field.

Those of you who are in the field of State and local government know very well that in terms of the ten Federal headquarterssites and the Federal and Regional Councils operating in these cities, there is a wide variation in the actual degree of delegated power to the field from Washington. Even within one program, at one point it may appear to be highly decentralized, and within six months it may be back to a situation where clearances are ultimately coming from Washington. The question the President has to look at with his Cabinet people is one of trying to figure out what programs lend themselves easiest and best to decentralization. And that's not an easy job. My private theory has always been that if it's a big money grant, if it's a big formula-based categorical, even if it's a large money block grant, then the difficulties of having significant allocations of authority to the field are great. If it's a petty, puny money program, it isn't difficult. Now that's a primitive, terribly fiscally-related kind of generalization which

may not be borne out in fact. But the impressions I have from the field would seem to suggest that this is pretty much the case.

Turning to the Federal Regional Councils (FRCs): These Councils were established in the ten Regions in 1969. Nixon deserves credit for creating the ten Regions and the FRCs. Johnson didn't take it on; he was scared to death of the political hassle in '68 of messing around trying to put all those departments into ten regions with common boundaries and common headquarters sites. The idea of Federal departments actually working in the same geographic relationship with one another, out of one building, was a nightmarish thing to ponder from the point of view of certain administrators. The first meetings of the Federal Regional Councils were near miraculous conclaves.

But the attempt in the field to achieve horizontal coordination between and amongst Federal departments is something that raises some fundamental questions about coordination. The present theory (this is the Nixon formula) holds that Regional Council Chairmen designated by the President (thanks to an executive order of June 1973) can simultaneously represent a department or agency, such as ACTION, Labor, or HUD, and chair the Council while drawing staff from his or her own agency. This person is expected: (1) to achieve some measure of interdepartmental coordination vis-a-vis Federal activities in the field and (2) to improve the liaison between Federal departments and the State and local jurisdictions in that Region.

Now all of this is by executive order. It has not been sanctioned by Congress nor presented to the Congress for establishment on a statutory basis. Yet, Congress is hostile to this kind of thing.

Congress will say one thing on decentralization; they usually act another way. The President ultimately has to give the Federal Regional Council some sort of a mandate. I think it would be healthy if Congress were confronted with this problem during the honeymoon period, even if Congress proves to be not very amenable to doing very much about it.

Beefing up attention to intergovernmental problems in departmental headquarters offices is difficult in the larger departments; in HEW I think it is impossible. But in some of the medium to smaller size departments it is conceivable, at least. But it must be tried in all, and some attempt must be made to resolve this headquarters - field relationship which impacts so heavily upon the entire operation of intergovernmental relations. We must sort out where we are at this point in time. This, in turn, may suggest a proposal for an Administration bill to put this on a statutory basis. Mr. Carter could abolish the FRCs tomorrow at 8 o'clock and there's no basis in law to prevent him from doing it. He's in a position to operate carte blanche if he wishes.

Another big area that provides much of the dynamism that conditions the coordinative question is the growth of governmental programs.

When Mr. Kennedy came to office in January of '61, we were providing a little over $7 million in Federal aid to State and local governments.

When Mr. Johnson took office, it was up to about $10 billion. When Mr. Johnson left office, it was at $20 billion; when Mr. Nixon left office, it surpassed $40 billion, despite all of his efforts to constrain that growth. When Mr. Ford left office, it was over $60 billion. Those are obviously not in constant dollars; but even if they were put in constant, non-inflationary terms, they'd still be impressive. Quite impressive!

Program numbers is a game I don't like to play. I usually attack people who do play it. But for the moment, we get some feeling for the shift in terms of changes in the numbers of programs. There were approximately 180 programs when Mr. Kennedy departed. About 240 programs were added during the five years that Mr. Johnson was in office -- these are brand new programs. You can always be squishy about these figures, because nobody can contradict you. Nobody knows how many there are, especially in OMB. Now there are over 540.

What's gone on with this growth in terms of the kinds of programs? Part of them are in areas where the Federal government had never previously been involved. And some of you are working in areas or are recipients of funds in areas that in '65 probably no government was involved in. We are now in the middle of working through old traditional functions of State and local governments that the Federal government is now assisting. We're moving into areas that heretofore only the private sector was involved in. Other levels of government, sometimes in a big way, sometimes in small ways, are becoming involved; in the past 10 to 12 years, new kinds of efforts, new kinds of stimulative and demonstrative and supportive efforts have been initiated by the Federal government in areas previously largely considered to be in the State and local and, in many instances, the private sector domain.

Another dimension is the vast expansion of the private partner role in this grandiose partnership. There is a split between the private or quasi-private sector and the public sector. The emerging role of non-profits, particularly in HEW's area, and the areas you represent here, is a brand new kind of thing, dating roughly from 1964 to now. It is a brand new private Federalism, to put a glib label on it.

There was also a vast expansion of Federal effort downward in the public sector which began in the Nixon period. Ironically, Federal efforts are getting greater and broader in terms of the number of jurisdictions. Thanks largely to Community Development, to CETA (Title 1), and in a large measure to general revenue-sharing, we are dealing with a vast number of local jurisdictions which prior to 1972 never saw a Federal grant dollar, had no idea of where or what Washington was; had not the vaguest idea where a Federal

Regional Council would even be located; and wouldn't ever worry about the worth and the solidarity of the Federal Treasury. At this point, these jurisdictions know where Atlanta and Boston and Chicago and all these other Regional Office headquarters are located and are very worried about the position of the Federal Treasury with respect to those programs which affect them. The system is now more marbleized, to go back to an old political science description of what contemporary Federalism is all about, than it ever was. Everybody dreams about the layer-cake theory nowadays; we'll always love a layer cake; although sometimes they don't put it in those terms. They want to know "Who the devil is responsible for doing what?" and that's a coordination problem.

We are, in terms of money, programs, and interrelationships, in the middle of the most unbelievably marbleized cake that any cook could possibly bake. And it became more marbleized under Mr. Nixon than it had become under Mr. Johnson. Most people thought the entire baking process occurred in those five years of Mr. Johnson. But the marbleization grew much more dramatically with Nixon's attempt to reach out to jurisdictions below the State level with block grant programs and general support payments under General Revenue Sharing.

In 1972, about 80 counties were involved with aid for community development. When the legislation was enacted, it was estimated that maybe 10 to 12 counties might be eligible given the earlier record of counties in the area of community development activities -- public housing -- urban renewal -- and the like. When those 38,000 jurisdictions eligible for GRS are added, you've got a handle on the dimensions of the Federal money going to jurisdictions below the State level. When this fact is combined with the private sector involvement, you can see why Mr. Carter's coordinative management agenda is immense. That's the backdrop of the nightmarish coordinative management problems that this Administration, the past Administration, and the one before that confronted. And that's why I make reference to the dream of some kind of a layer cake ideal, where certain jurisdictions were to do certain things, where the relations between jurisdictions were minimal; where there was a kind of sorting out of who was responsible fiscally and functionally for doing what. We don't have any idea about that at the present time. There's no clear definition of what the Federal role is. We do know, however, after analyzing certain legislation of the past ten years, that the Federal government is currently involved with fire protection and rat control as serious areas of national programmatic endeavor. Where are we in terms of who is responsible for what? Any primitive assessment of that would seem to say that the Federal government is involved in local health departments, fire departments, and certainly with municipal and county governments.

We're doing too much at the Federal level. This is the major backdrop item that emerges from the past ten years, and it is all related to the fundamental question: Who is responsible for what? And what is the Federal role? Is it stimulative, is it standard-setting in

certain basic and fundamental nationally important program areas? Or is it all that plus demonstrations and a high degree of regulation in narrow minute areas without manpower to do it?

In addition to the program effects and the procedural and fiscal management strings that go with these program effects, there's been a whole new cluster of strings that have emerged in an area that you're highly sensitized to. Yours is one of the strings. It's a government-wide policy: string. There are now several across-the-board, government-wide procedures relating to national policies -- now totalling up to about 37 executive orders and acts of the Congress -- which cut laterally through many programs. These are new program strings whose purpose, if you will, doesn't relate directly to the program involved but reflects a national policy and uses fiscal strings as a means of achieving implementation. In the field, from the State and local angle, it's this second cluster of strings which are driving them up the wall since no one in Washington understands the combined impact on a single city or county or state of all of these 37 conditions, nor what they mean in terms of manpower and administrative overhead. This is a major problem administratively, and there's no handle on it in Washington at the present time. There's an awareness among a few people in OMB and some other people; it's been included in a couple of memoranda to the President. Some would say it's a low-tier issue, but my readings from the field indicate that this is a basic national administrative problem at the present time.

Each of the goals these executive orders represent are commendable in terms of national policies; but in the aggregate, they are a basic challenge to coordinated management and a total nightmare to recipient jurisdictions.

To sum up, improved coordinative management involves:

-- a reorganization and revitalization of the Executive Office of the President;

-- a revamping of the central management units within the Departments, especially in the intergovernmental area;

-- a clarification of the role of FRC's and the whole issue of decentralization to the field offices;

-- a clear understanding of the tripartite nature of the Federal aid system and the differing purposes of categorical, block and general revenue sharing assistance;

-- an awareness that the entire system is more interdependent than ever before and that many seek a clear delineation of the accountability principle as a result;

-- a grappling with the new cluster of conditions that come with nearly all Federal grant programs -- whether

categorical or block -- with a view toward simplifying their administrative impact without losing their policy push.

These are some of the key coordinative management problems facing the system today, chiefly at the Federal level. The unevenness of State and local administrative capacity and the jurisdictional jungle at the substate regional level are two other areas that should be explored. But time does not permit a probe of these grass-roots management muddles. Suffice it to say, even if coordination were a reality in the Federal arena, fundamental problems would remain in the system. States, counties, and cities, after all, are part of this Federal system and they face equally difficult coordinative challenges -- not all of which are generated in Washington.

To return to where we started, much of what I've said implies an adherence to the old school, hierarchic public administration approach toward achieving coordination. Yet, this was all chiefly in the context of the Federal bureaucracy, where some bias toward this approach is understandable. When the broader intergovernmental administrative questions are faced, the newer, more egalitarian approach inevitably comes into play. Politics and plain common sense dictate this. Both viewpoints have relevance within the wide orbit of contemporary intergovernmental program relationships and both suggest basic changes in management at all levels.

Private/Public Interrelationships
Speaker: Edward V. Roberts, Ph.D
Director, California Department of Rehabilitation

Good afternoon. It is interesting to leave California and come to snow. It's almost fun, as a matter of fact. For those of you who have been here awhile, I'm sure it becomes inconvenient. I happen to have a snow tractor for a wheel chair, so I think I might be able to make it around.

I have come to talk to you from a practical experience level, as a director of the largest rehabilitation program in the country, now budgeted at $96 million, which is totally inadequate for a State like California. I'm also coming from an experiential base as a severely disabled person who, no matter what the title is, is constantly reminded of the fact that I'm a crip, a disabled person.

For example, yesterday when I went to the United Airlines gate in San Francisco, I was informed that I could not use my respirator on the plane because I had a battery with it. The airline decided they'd make an exception for me this time, but I couldn't go again.

I'm constantly reminded of the devaluation that disabled people go through, the trauma, the experiences that each of us has had in our own lives that have helped to make us very strong. Either it's defeated us completely, or it has helped to make us very strong people with a tremendous amount to contribute to our own needs and solutions in cooperation with other people who come from a different angle from private agencies, from governmental agencies, from programs meeting some of the needs of disabled people across the country.

One of the things I'd like to emphasize is that the disabled -- the physically disabled, the mentally ill, the whole gamut -- have been a missing element in service programs. The only group that's really been active and effective in the past 30 or 40 years has been the blind. I think their example, what they've been able to do by coming together, by beginning to take over and participate in those agencies that directly deliver services to them, is one that we all should internalize and deal with. We know that a major need is many more public and private linkages. We know, for example, that in the private area people tend to spin off a lot of new ideas that are often funded by governmental agencies like the Rehabilitation Services Administration or that myriad of other agencies. The

problems we deal with day to day, and the problems that governmental and private agencies deal with, are extremely complex. Thinking that simplistic solutions are going to solve them is naive. I think we need to come from an advocacy position supported by moving more and more disabled people, people with various disabilities, into not only policy-making positions but into every level in the system. This tends to be a subjective involvement that comes from an experiential base. Nevertheless, it is extremely important. I think there's no leadership for it right now, except from the disabled, even though the Rehabilitation Act has mandated more consumer involvement, We're not sure how to do it.

Judging from my experience as a State Director, there are very few approaches that seem to have worked. The disabled remain unsatisfied; as a director, I'm unsatisfied with the kind of participation that we've been able to generate in a year and a half in California. I think that the Federal government and the State and local governments have to get much more involved in methodological considerations which help to set up some of the trial systems that will bring about more consumer involvement. Another area that is extremely important when it comes to consumer involvement is the evaluation of programs. All too often, consumers aren't involved in evaluating the programs they may have helped instigate. The more we can train disabled people in evaluation techniques in our graduate schools, the better off we'll be. An experiential base combined with technical excellence provides a blend that is very much needed in our systems right now. It's not to negate people who don't have that blend; it's to say that there's some special talent there that is very much underdeveloped in our nation.

As we begin to gather as leaders of this whole area to identify these more complex issues of consumer participation, we must be very sure that as leaders we're putting forth leadership in terms of day to day attitudes. At the airport yesterday, I again saw the assumption that because you're disabled you're in a sense powerless.

It is an assumption that the kinds of services that we all deliver, whether public or private, are charitable. We've got to put that assumption to rest, once and for all. These are not charitable programs. These are the basic rights of people -- to access to their communities, to jobs, to housing, to transportation. The Constitution, whether it's specified or not, covers disabled people's right to live and pursue happiness in this country. I think we can forcefully demand the fulfillment of these basic rights in our programs by importantly involving at every level people with a range of disabilities. As much as I've learned in the past ten years about different disabilities, I still am unable to speak for large groups of people in our society.

When the Center for Independent Living began to set up the curb cut program, we brought in the blind and other groups, such as the elderly, who would be affected by it. We learned early how to stay

away from some basic mistakes because we had a coalition or broad approach to the problems. Consequently, we did stay away from mistakes. Other cities, Vancouver, British Columbia, is one of them, had to tear out hundreds of curb cuts because some blind people got hurt. This is an example of the kind of bringing together of various disabled groups that has to happen.

I think we have to begin to understand that many of our basic programs, the goals and objectives, differ from other basic programs. For example, as we move into serving more and more severely disabled people in California, we are caught in an incredible dilemma with disincentives in terms of Supplemental Security Income (SSI), in terms of health maintenance -- all of these programs are working against each other. We hope that we can make some settlement through the Governor and through a separate State funded program. We have fairly good social service programs now; we've worked on them for many years in California. But when a person works for a short period of time, he loses everything -- all the benefits -- he once had, and winds up much worse off. Consequently, I'm considering, although I've tried to stay away from it, imitating the little card policemen read to people about "You have a right to know..." We're almost moving into that, because clients should know that they may become worse off by receiving some of our Rehabilitation services. That is a perplexing and messed-up system, something that we can target in on and begin to deal with. It's extremely important; it may be one of the biggest resolvable challenges in our social programs. There are incredible disincentives across the board, and both public and private agencies are caught in this web. We tend not to support families; we tend to move people away from families. Private agencies are caught in this conflicting dilemma of public policy.

We must decide as leaders and as representatives, the kind of goals we want and the kind of outcomes we expect from these programs. Obviously, the outcomes we want will move people toward more independence and less dependence on public dole. But we have to anticipate that not everyone can move to total independence. Hopefully, we'll have within the next year, a program set up in California with a sliding scale so that people can keep some of the aid as they earn more and more income. It is especially critical with Medicare and Medicaid. The cost of health insurance is rising astronomically. Private agencies are particularly caught by this cost when they employ disabled people; we've go to remove this kind of disincentive.

I think back to a few years ago. My own biggest fear was, "What the hell is going to happen when my parents die?"

And my parents, their biggest fear was, "What are we going to do with this crippled kid? Is he going to be with us all our lives?"

I think about my own progress, and how both public and private bodies helped me and hindered me in the process. Somehow, we have

to come together and begin to make that path a little smoother. We have to clarify the process through better identification of the systems that work with people with disabilities. For example, it's important that we have somebody at the Federal, State and local levels whom disabled people can look to, whether as role models or as program people who can intervene. It's critical, because right now, in a State like California, or any other State, we have a multiplicity of programs for the disabled. We're not sure exactly who to go to for what. If you go to SSI, you may not even be informed that there are other benefits available to you unless one of your peers or somebody that's found the way can show you, if you're lucky enough to find that. Private agencies are in the same role; they're caught in a dilemma of being able to provide just so much for people. There's not enough government help. There's very little evaluation of the effectiveness of private programs in helping people, and often there is little disabled involvement on Boards. Involving people more is no panacea; we know this, disabled people know this, because it's hard for us to agree when we come together on these processes. But we don't need 100 percent agreement; we can get agreement on some basic goals, such as independence, or jobs, or housing, or basic rights of people. But in deciding how that should be accomplished, there may be diversity; there may be disagreement; but that's what this whole damn country was built upon, and that's really one of its strengths. It's not a weakness at all.

Somehow, we as disabled people and at times as leaders forget the strength that we've all gained. Look at a disabled child, for example. He manipulates the hell out of his family. We talk about the power of disabilities; we really can get a feeling for how powerful that process is, if we begin to harness that power ourselves and project that image. That's why I say we should stop talking about charity and begin to talk about not only rights but abilities, about the kind of power that comes through. I think about Judy, and Al, and Fred, and a lot of other people who have been able to learn tremendous amounts through their own disabilities and then use that knowledge and power to help make the kinds of changes that have to be made in our society. Really, we're just beginning.

As I look at the group today, part of my frustration is that we have so far to go. The dream is so big. We have to keep that basic dream, that feeling that we can do it. Because there's no doubt that we can do it. Look at a group like this, people from all over the country who are tremendously dedicated and interested in making the kind of change that has to be made for us to move. The thing that makes me even more hopeful is my experience in California after about 15 months as the Director of the Department of Rehabilitation. The thing that's been missing so long in many States and many communities is that leadership, that willigness to kind of say, "Here's the direction. Here's something that needs to be done," and then try to help do it.

The Governor of California, I can say, knows very little about

disability. He's lead a fairly cloistered life, to say the least, but he's learning now. I think I freak him out a little bit, but at the same time, if I didn't freak him, I wouldn't get what I need. It's that basic power, once again. We have to take people where they're at, help them deal with the attitudes they have about us, but at the same time get what we need. That may sound very cold, but it's a political strategy as well. There are a lot of people in this country who see us and who help us maintain a fairly low profile, a devalued status and that, in a sense, see us as much less able than we are. You can use that; you can turn that around and make that a positive thing for yourself and for your society by in fact showing that it's not true, that they underestimated you in many ways. People will begin to change their attitudes. Disabled people, people who have disabled friends, essentially people who have been working with us for many years, must come together in a coalition or power base. It has to begin in the local communities. In California, we've just gotten a commitment from the Governor to put disabled people on every board and commission in the State. It's that kind of thing that can happen; it's happening in many places in the country. The whole idea of independence, of movement towards self determination, is one that each of us has to push as we move through our own communities.

I'm particularly happy to be here because I think the White House Conference in our State was very important to my own ability to move in my State because it brought together in one evening about 3,000 disabled people. I've never seen so many people. There were legislators; there were people who began to say, "Hey, I've never seen these people before." I'm sure that many Congressmen are wondering where these millions we're talking about are. A lot of them are inside. Some of them are in institutions. Some of them really haven't had a chance yet to move about in our society.

As we begin to make these small gains, more and more people come out. That's really the key to our success. We have to build some prototypes, to be people who are ready to be involved out there. We have to build evaluation techniques, and we have to be willing as leaders to take some risks, to try some things to help people move. I'm looking forward to the next few years; we are really just beginning. Awareness is beginning to come. In the press and the media, awareness is growing, even though it's a bitch to get them to come to something very positive, at times. I think the emphasis of the White House Conference is one idea, one approach; we have to try many other ways.

The new system of health service areas is going to dramatically affect the involvement of people in California, because we've been able to obtain up to 20 percent disabled representation based on population on these area boards. Every major health issue, and that includes many that affect people with disabilities, will go through those boards. This may be a potential model for the disabled as well. If we miss the opportunity to evaluate how

well these things work -- and they're going to work differently in different States, depending on the kind of commitment -- we will be set back a great deal.

Overall, I think the next few years are going to be fantastic. I see a core of leadership here. Things are beginning to happen around the country. But the missing element often has been the disabled. We're getting a more articulate, more aggressive disabled population that is no longer willing to accept what comes. We want to be a part of it, and demand broader services that help people move away from the life of dependence that so many of us have felt at one time in our lives. That's really the message I came to bring you, one of tremendous hope and one of knowledge that we're dealing with very difficult issues that affect people. The toughest issues involve very complex organizations. We need higher visibility; we need disabled people who can get jobs done at every level in government and private industry. We need a broader look at the public/private sector especially. We're discovering that by funding through non-profit organizations while maintaining a basic focus, less emphasis has to be put on the government doing it all. By providing some leadership and bringing together disparate groups of disabled people, and the State and local agencies, we can move to this comprehensive system we're talking about. I think that's what we want. We want a network of systems that help people move, whether they're disabled as children or later in life, into independence and into equal access to resources in this country. Thank you.

I've cut it short so that we can talk. I'd like to share and hear some of the things that are happening in other parts -- maybe some of the ideas we've talked about today: what's happening in your own community that's really working; what's making things happen. So I'm going to put it back to you to participate.

Question:

I remember when Eunice Fiorito came to make a speech in Wisconsin and she said "Do you have a disabled person on all your boards at your university?"

She was really pushing. On my turn around I said, "Okay, do you have a non-disabled person on your board?" We must all come together; we must be a team.

Dr. Roberts:

There are a few States right now taking the leadership. Massachusetts is an example of a State that has been pulling things together. New York has a lot of good things going, as do Texas and California. The last couple of years in California has been like an explosion. Judy Heumann has been out there and I've been out there. It's dramatic how quickly things can change with leadership in the local communities. That's what makes it happen.

Removing architectural barriers, which are a lot easier to remove than attitudinal barriers, is a band wagon effort now. People are jumping on it more and more. Yet it only solves problems for a small segment of the disabled. But it shows how people coming together, disabled and non-disabled, can do it. There's no way that I want to suggest that there's no role for people who aren't disabled in any visible way. We all have a disability. All you have to do is look in the mirror and see your imperfections. There's an important place for everyone who is interested in this movement. We may be able to build, together, the first comprehensive network of services that will facilitate the movement of people. No one else has been able to do that yet. The disabled can do that. It can happen. Take my vision of what needs to happen. It's going to take different forms in different communities and I think that's good, but we'd better be on top of it as it happens. Like the independent living centers I've been involved in, the network will take different forms in different communities.

We will need people who understand two things. One, we need people who understand programs and have the technical experience to make programs work, and, two, who understand the movement and what is happening nationwide. This combination will help us design and move while developing community acceptance.

Question:

From your experience, what would you identify as the three outstanding problems in the public/private sector relationship?

Dr. Roberts:

I would say the need for leadership in obtaining resources, the need for additional research, and the disincentives -- the attitude that holding down costs is more important than helping people.

I once saw a cartoon of a disabled person on Fisherman's Wharf who noticed a crab crawling up over the edge of a pot. He called it to the attention of the crab seller who answered: "That's a disabled crab. Don't worry, the rest will pull him back down." That's so true. We tend to resent the few people who break loose; people have trouble agreeing with them. We need to be much more supportive of our own leadership and the diversity in it.

Question:

Please explain your comments about the private sector.

Dr. Roberts:

The private sector is extremely important. Take a Department like our Rehabilitation Department. The private sector has tended to be involved in workshops, which are often dead-end places, although

some are transitional. The private sector is constantly short of money and in danger of collapse. Most of the energy and time is spent in trying to raise money, rather than looking at program direction and evaluating what it is already doing. The other aspect is medical -- we have tended not to see the areas and gaps between the medical diagnosis and the need to help people move. The Independent Living program is only one part of filling in the missing elements. As we begin to design and work on this comprehensive network, we have to think of how to fill gaps in other areas.

The most important thing private agencies can do is to point out to the government and to the public agencies where they are failing. That could be done in a lot of ways, usually through consumer involvement. It's very important that once we begin to identify and help fill these gaps that the government come in and begin to fill some of these needs. As private agencies spin off ideas and proven ways of doing things, government will begin to pick them up and fund them.

For certain things we depend on our private agencies. One is very strong advocacy. They can point out, for example, why people can't move around, or the areas needing public service. I'm hopeful that we're going to recognize -- as a director I'm recognizing -- how important the private sector is in this comprehensive rehabilitation movement. Because government can't do it all, we need the private non-profit organizations. I have an abhorrence of someone making a profit off of my disability. Nursing homes, for example, display rampant profit-making and disregard of people's needs, and indicate how tightly we must watch profit-making ventures.

Question:

Please address the relationship between sheltered workshops and competitive bargaining.

Dr. Roberts:

The label of "sweatshop" is debilitating and cripples workshops more than anything else. "Workshop" is a broad definition. Some are bad, but the good ones involve people and help move people out into more competitive employment. As people with disabilities grow stronger, and as parents and involved people work to reform some of the problems, sheltered workshops will be able to provide leadership in the movement. I haven't seen any examples. I want to emphasize again that workshops have a bad name, especially among disabled people. We can't condemn them all because they're not all the same, but we can take specific instances where there is exploitation and we can begin to make changes. The only way that's going to happen is for disabled people to get very involved.

Question;

Ed, what about the role of the parents, the surrogates for the

young disabled?

Dr. Roberts:

That's a tough one. Parents have been important elements in different States, at times counterproductive, and at times, very productive. We can design our systems to support families. Sometimes, families with disabled children feel incredibly guilty. This guilt can be alleviated as the families are encouraged to become more involved in programs for the handicapped. We've been working with some families of Developmentally Disabled (DD) children who are in State hospitals. The families see their children infrequently because they're often several hundred miles away. They experience a kind of gnawing inside, since they want to have responsibility for the child, yet there are no community programs or resources to give them some respite care or to help them deal with the other problems. It's a critical area.

Question:

Are parents involved in California area boards?

Dr. Roberts:

There is parent and provider dominance on the boards, and that's natural. The recent revision of the law will strengthen the boards even more. They will have control over how money is spent. As all of us, especially the disabled, learn how to use the system, our needs will be better reflected by it.

As we move people out of California State hospitals, we have a major commitment to build programs in the communities. We're planning and working with the Department of Health, the Governor, the Legislature, and the area boards and consumer boards to build a system which will be a tremendous source of clients for our Department of Rehabilitation. It's been underutilized in the past. If we can develop a system, we can move people into vocational rehabilitation. I'm very hopeful that it may be the first program in California that will prove that the network idea really works as a delivery system in the community. That is going to be the key, and that's when the private system is going to show what it's worth. It will need government help in developing methodologies and evaluations.

Question:

Ed, I've been thinking about the fact that people in rehabilitation are beginning to get the message that you can't make somebody productive. Somebody can become productive through the right kind of assistance. We're beginning to be aware that we can facilitate independence and thus facilitate productivity. How do you transfer that message to the people in Human Services that are perhaps outside rehabilitation? From your own experiences, what

kind of difficulties are involved in VR working with Social Security agencies, Departments of Public Welfare, etc.? These seem to be really difficult areas.

Dr. Roberts:

It's a tremendous problem, there's no doubt. The thing we have to realize is that Rehab is a small program among overall programs. The rehabilitation program's allocation was less than three percent of the total funds spent on people with disabilities in 1975. There's a need to increase this program beyond maintenance to move people away from dependency. There's also a need to broaden rehabilitation services to deal with the prevocational aspects to a much greater extent than ever before, especially to serve the more severely disabled. Rehab can take a leadership role in each State to assure that other agencies perform their roles and that they in fact prepare people for independence. The education system has failed the disabled.

It has largely isolated and segregated people and has not engendered a feeling of independence in people with disabilities. It takes much longer, consequently, for Rehab to deal with clients as they come through the system. Somehow we must hold other agencies accountable for their roles in the process. That can be done through coordination units, through councils, through local school districts in which disabled children are given equal access and equal opportunity to work with their peers and socialize in the regular school system. A few States are taking the lead. If we can show in this one area that people with disabilities can help people move, the other human services systems will begin to come along. One of the reasons Rehab works so well is that it's an individual model. A counselor works together with a disabled person to decide goals and work toward outcomes. Rehab's already shown that it works with certain other groups such as economically disadvantaged people. We're trying to convince our Department of Corrections that they should be getting into this model with prisoners as they're released by following them along and providing them with the tools or whatever it takes to go back into the job market. It's no panacea, but the model works. I would hope we'll see more of that in the human services area.

Question:

Since we're dealing with coordination in this particular workshop, what kind of models or vehicles or processes do you have in California to enable you as a department head to deal with other department heads? How do you work with them? What is the coordination mechanism, if any? What are some of the problems you have experienced? We're talking about coordination and we're looking for models that might be workable.

Question:

I'd like to expand that question. How do you relate to agency

heads in the private sector?

Dr. Roberts:

I began to relate to the other department heads by being aggressive. There aren't any systems. We met very infrequently and tended to be very involved on our own, as in any other bureaucracy or in any of the private or public agencies. You get very bogged down in the problems and programs within your own department. I felt that for us to do a job as a rehabilitation agency, we had to have the directors of health, employment, benefit payments, and ten or so other departments meeting both formally and informally. It came down to leadership, in the last instance. It really did. We've built a lot of informal ties. All of the agency heads are working on affirmative action; we just got a commitment out of our State Department of Health to hire 1,000 disabled people in the next year. A lot of that was involvement, providing the expertise and experience of our department to the others. Part of it was the way the Governor picked directors. He picked people from outside with ideas who had worked in the private sector. That made a difference, because philosophically we're very close. The more difficult problem is operations, because you have to get managers to buy the concepts. Just because the director says, "Do it," it doesn't necessarily happen. So people have to buy in and commit themselves to what you're trying to do. Affirmative action seems to be catching on right now.

The private sector involvement: we're attempting through a series of advisory committees, and by revamping our major rehabilitation advisory committee, to place consumers and providers in the department at every level we now have. We have advisory boards in every district. We will be trying to bring about much closer cooperation at every level in our department, and we will look at what works and what doesn't work. It's brand new as far as I can see. In the past, the advisory groups have been appointed and honorary. They might meet once or twice a year, but there was little substantial involvement in agency activities. I would hope that the linkages being developed will lead to much better communication and understanding of what we can do, what the limits are, and what involvement is needed by other agencies. Basically, our 150 service offices are where the work is done. We have a new statewide advisory group that I hope will help us to get more cooperation, more direct consumer involvement. But there are no answers right now, nor are there a lot of successes. Based on my own experience, I know that if you are going to put together a group like that, you had better decide what is needed and what you want as well. Don't fool with them because they'll eat you up. You'll get in trouble playing ceremonial games with the consumers of today. They will be destructive and disillusion some of the people you need to get the job done.

Question:

I'd like to raise a question related to the public/private relationships and their respective perceptions of their responsibilities. A public agency has a certain responsibility for equity and for coverage. It can't just pick and choose what it will do. Private agencies, on the other hand, do maintain a certain freedom to define their missions and decide when to cut off admissions, etc. This is true not only in this country but in other countries. But in this country, it is accentuated, it seems to me, by a certain adulation for the novel and the new. Private agencies are tremendously reinforced if they can show that they're doing something new. If you put that on your project manager application, you're in. As a result, there's a lot of innovation, not much follow through, and not much assurance that what is reasonably good is distributed to everybody who might reasonably benefit by it. I'd like to know your thoughts about how to improve the public/private interaction.

Dr. Roberts:

A key is to recognize that private agencies provide a lot of innovation for State agencies like ours because private agencies can do things that we cannot do. Federal grant monies encouraging innovation and expansion do not represent a large amount of money; California has a couple of million dollars. We're using that to help spin off some of these new ideas and new approaches. The key becomes the strategy used. Call it research. If the project is good, it should become known and replicated elsewhere. That doesn't happen often enough. Some good things are happening in private agencies around the country, but they keep getting shut off because they're on a one or two or three year grant. We're trying to take a hard look at them and measure how we give our grants. Sometimes we dump a lot of money out there, spin off a lot of excitement and ideas, but do no follow-up. Consequently, people become disillusioned, and the programs become part of the problem and not part of the solution. We need better recognition of good programs by government, and publicized evaluations. That's all I can suggest right now. I know the frustrations, having been in a private agency and having done things that I knew were dynamite, but with no way to describe or translate the experience for use by the State or Federal government, or others. That was very frustrating. For example, role modeling and peer counseling work in certain areas, but we have no track for it. We're beginning to develop these techniques as a model through a Federal grant. I hope it doesn't end after three years.

Question:

Ed, aren't you really saying that political pressure is necessary to get the State and the Federal government to develop a mandate and an appropriation to keep effective research and demonstration programs in existence?

Dr. Roberts:

You bet. That's the bottom line. If you've got something that works, that has a track record with it, then the next issue becomes political power.

Panel Presentation: Federal Practices

Panelists: William M. Eshelman
Assistant Commissioner for Cooperative Programs
Rehabilitation Services Administration
Office of Human Development, DHEW

Edwin W. Martin, Ph.D.
Acting Deputy Commissioner
Bureau of Education for the Handicapped
Office of Education, DHEW

William R. Feezle
Chief, Field Operations Branch
Office of Management and Budget

Moderator: Fred Fay, Ph.D.
Director of Research
Tufts Rehabilitation Institute

Mr. Eshelman:

The importance of interagency cooperation has been recognized by vocational rehabilitation practitioners for more than 50 years. When the program began in 1920, it usually meant a State fielding one counselor with a few thousand dollars to rehabilitate into employment those disabled persons who crossed his path. At that time, securing the cooperation of other organizations, agencies and individuals was a question of survival -- for the counselor and his program -- rather than an abstract study in public administration.

Today, although we often talk about interagency cooperation in the abstract, it remains an issue of survival for the integrity of the programs that we represent.

The State/Federal Vocational Rehabilitation (VR) program has grown to the point where it now approaches one billion dollars in annual expenditures. Approximately one million persons are served and 400,000 persons are fully rehabilitated each year through 79 State agencies. Nevertheless, only three percent of the nation's 3,000 sheltered workshops and rehabilitation centers are operated by State vocational rehabilitation agencies. Only two percent of the $22 billion in Federal monies that were spent on the severely dis-

abled during 1973 were for rehabilitation per se. VR provides only a fraction of the services needed by a spinal cord-injured person from the time of his evacuation from the scene of an accident to his return to the community in a productive capacity.

As the range of services provided by public and private agencies for the handicapped has expanded, interagency relationships in the field of vocational rehabilitation have become more important, and more complex, than ever before. We have found that many of our clients, particularly the severely disabled, require multiple and often expensive services that we cannot provide directly for reasons of cost or that we cannot obtain from other program resources. We have found that our clients often require a continuum of services provided by different agencies in a timely and sequential manner. And we have found that interagency linkages are imperative not only for effective service, but also for reasons of efficiency and economy.

The Rehabilitation Services Administration's (RSA) legislation recognizes these benefits of interagency collaboration and requires that State VR agencies enter into cooperative arrangements. That legislation also requires that State VR agencies not provide services where "similar benefits" can be secured under other public or private programs. The Congress, in particular, noted that it saw no reason to use only VR funds to provide higher education services when such programs as the Basic Educational Opportunity Grants were authorized to provide financial assistance. Congress also counseled against the undue use of VR funds for rehabilitation of drug and alcohol abusers, or for a wide variety of other services which might otherwise be provided by VR agencies.

This "similar benefits" provision -- that is, the use of other private and public resources before the expenditure of VR funds -- is a major motivating factor for VR agencies in the interagency relations areas. It is reducing the almost total flexibility that VR agencies would otherwise have in purchasing services for their clients as and when needed. At the same time, it is increasing the burden on VR agencies to enter into formal cooperative arrangements with other agencies.

The Urban Institute recently completed an indepth study for RSA of how, and how well, VR agencies are succeeding in implementing the similar benefits mandate. They found that the most successful methods for doing so were traditionally used by VR agencies, but not on a uniform basis or in a structured and systematic fashion. The study highlighted the importance of written interagency agreements; clear guidance and training; and the development of one-to-one relationships between VR staff and the staff of other agencies. The Urban Institute also discussed some disincentives affecting the use of similar benefits such as the additional time it takes to arrange for services from other programs; the effect of shuttling a client from one agency to another; and negative perceptions by clients and professionals of other programs, particularly welfare programs.

The Urban Institute study was sponsored by RSA, but the General Accounting Office and the HEW Audit Agency are also reviewing how well RSA and the State VR agencies are implementing the similar benefits requirement. As a result, we expect VR agencies to become more conservative in their purchase of services available from other agencies, but more aggressive in developing cooperative interagency arrangements.

Certain other provisions of the Rehabilitation Act deserve mention for their substantial interagency implications. Title V of that Act established an Interagency Committee on Handicapped Federal Employees; an Architectural and Transportation Barriers Compliance Board; and requirements for non-discrimination under Federal grants. All of these provisions will have a very substantial impact on the handicapped and on almost all Federal, State and local agencies.

In carrying out its responsibility for pursuing cooperative linkages with other programs, RSA has a single focal point within its organizational structure (Office for Cooperative Programs) for Coordinating all such activities, participates in numerous standing and ad hoc interagency committees, periodically reviews formal interagency arrangements, negotiates new agreements as indicated, and conducts extensive research and training activities of which many are in collaboration with other agencies. Our State directors, working through their own Council organizations, are strongly supportive of these activities.

In terms of magnitude, the most significant formal interagency arrangement involving RSA is with the Social Security Administration. As a result of that arrangement, our agencies vocationally rehabilitate Social Security Disability Income and Supplemental Security Income beneficiaries with some $150 million for this purpose at a cost/benefit to these special programs of approximately $1.40 for every dollar spent.

We also have completed, or are negotiating, cooperative arrangements with the Veterans Administration, the Office of Education, the National Institute of Mental Health, the U.S. Employment Service, the Public Services Administration, the Administration on Aging, the American Heart Association, and the National M.S. Society. In these agreements, we strive to establish policy and describe areas for collaboration in as specific a manner as possible.

We recognize that an interagency agreement is not worth much if it does not reflect real policy commitments by the involved agencies and if it is not aggressively implemented. But we also believe that such agreements help to develop and communicate high level support for collaboration, to structure and otherwise discipline the collaborative activities of involved agencies, and to disseminate program information and recommendations for collaborative activities.

RSA has also established an interagency panel on handicapped veterans and is in the process of establishing an interagency task force on serving the severely handicapped who do not have vocational goals. We enthusiastically support the recent revival of the Interagency Committee on the Handicapped which OHI is developing. Finally, in the area of research and training, RSA will hold, or has held, a series of conferences on program coordination related to workers compensation, disabled veterans, and affirmative action for the handicapped. We are also supporting a research center at the University of Denver to expand our knowledge of the field of interagency relations as it relates to vocational rehabilitation.

In conclusion, I do not see any clear way to easily overcome the many barriers and disincentives to program coordination. I am sure that we will see program restructuring, reorganizations, new interdepartmental committees, and new planning concepts that are all designed to address this issue. However, program coordination is essentially a challenge for program operators and our ability to realize tangible benefits from various coordinating approaches. You may recall Ben Franklin asking the signers of the Declaration of Independence whether they preferred hanging separately or together. Let me assure you that RSA is ready to hang with you, if the choice gets down to that. But we would prefer working with you.

Dr. Martin:

I don't want to talk about the Bureau itself. Instead, I'd like to suggest to you one idea that I've been interested in which might be of some help in coordinating policy and making it a little more coherent in relation to programs for the disabled.

Let me tell you about how the budget process works for Bureaus such as ours. It begins with some thinking on our part, and on the part of our advisors, as to which programs might benefit from an increase or decrease in funds. We then go forward to the U.S. Commissioner of Education and advocate a budget to the Commissioner. We do that around a table with the other Bureau Chiefs who are competing for the available resources. This includes the Bureau for Elementary and Secondary Education, which is concerned with economically disadvantaged youngsters, youngsters with bilingual educational problems, etc. It includes the Bureau of Post Secondary Education which is competing for funds to help low-income youngsters go to college and for various other programs. It also includes the Bureau of Indian Education and the Bureau of Occupational Adult Vocational Education. What we usually do is go around the table and make our plea. Then, sometimes by group consensus, but in the final analysis by judgment of the Commissioner and his analysts and budget and planning people, a certain budget level is set. We then go to the Secretary's Office and argue the case again with the people who mediate between the overall requests of the Office of Education and other programs -- rehab, child development, etc.

Then, we go to the Office of Management and Budget and reiterate our appeals, because they in turn set budget levels for both HEW and the agencies and make specific judgments, particularly in recent years about programs like ours. For example, the judgment might be made that we do not want to provide assistance to the States in educating handicapped children. That is a service function and one that the States should perform, but we will provide funds for research or for teacher training. There are conceptual issues which drive the budget in relation to particular areas.

Finally, we go to the Congress. There is an intervening step which we're just beginning to get used to, which is going to the Appropriations Committee after the Budget Committee. The Budget Committee reviews how much of the education amount they would like to see for the handicapped as a separate decision. At present, we don't testify directly before them. But that day may come yet.

When we sit around the table in the Office of Education, in recent years I have found that I get a very good hearing about education of the handicapped from my colleagues and the various commissioners. In fact, when a new commissioner comes in I almost always try to find a particular mission in this area with which that person can identify. With Commissioner Marland it was the call for a national goal, and with Commissioner Bell it was an attempt to provide additional funds, and with the new Commissioner, Dr. Boyer, we will begin again. He, by the way, is a speech pathologist. I don't know whether that bodes well or evil for us, but in any event, it reduces me to being the second speech pathologist in the agency.

Under that structure, I can make a case for programs for the handicapped. After my turn, the Deputy Commissioner for Vocational Education may make his plea. That's not a good forum for me to say that, when considering the voc ed budget, we ought to pay particular attention to the ten percent set aside for the handicapped and question how objectives and long-term goals and priorities are set. I could do a little of that, at the risk of interference in the internal affairs of a brother agency. It would be equivalent to the voc ed director saying to me that "I'm not sure I like the way you're funding programs through the Handicapped Act that deal with vocational education."

We do a little of this together. In fact, we do more than a little. We have a joint team of specialists from each program working to develop some common goals. But the budget processes are the guts of agency decision making, and are not an appropriate forum for this kind of discussion among peers. If this format were extended outside of the Office of Education, there could be discussions, for example, in the Office of the Assistant Secretary for Planning, or in the Office of the Assistant Secretary-Comptroller, concerning the program for aiding handicapped children under Head Start. What are the objectives of that program compared with the objectives of the Handicapped Children's Early Education Act? If HEW is going to add additional funds to help handicapped pre-school youngsters,

where should they be added? Should they be added to Head Start? Should they be placed in the Bureau of Education for the Handicapped? Should they contribute to Day Care programming in general? Or, why should they be distributed to each program? What would the upper limits be? What would the rationale be? What assumptions would be behind that kind of decision making?

Let's take another example. Let's focus on the problems of the adult handicapped person. Where should the initiatives be in this area? Should they focus on the people who run the adult education program, a $80 or $100 million grant program to stimulate adult education? Should they be in the Developmental Disabilities program, for example? Should handicapped adults' continuing education programs for life-long education grow out of the Developmental Disabilities programs? Or, should they be part of an extension to adult areas of the Education of the Handicapped Act's authority? These are policy decisions, and there's no mechanism in the Office of Education, HEW, the Office of Management and Budget, or the Domestic Council right now for coming to terms with those issues. For example, I'm not around when they divide up the money in the voc rehab area, or the developmental disability area, or within the Office of the Assistant Secretary of Human Development. Those offices wouldn't ask me for my two cents at this time, either.

For several years, I've tried to interest the Office of the Secretary to do what I would call target-group planning, and what I have a hunch Stuart Eizenstadt and the Carter Administration are going to call mission-planning. Judging by the little bit I've read in the Evening Star, the terms sound like the same thing to me.

Such a system would impact on the policy issues that need to be considered with regard to the allocation of dollar resources within HEW, within the government at large, or within the Office of Education. I think that I might be successful in getting the Office of Education to do this, assuming I've already done some ground work with the other Bureau Chiefs. Obviously, there are others who would like to be in this arena. For example, the people who are interested in bilingual programs see a similar need; there are bilingual voc ed programs, bilingual college programs, bilingual early childhood programs, bilingual handicapped programs.

Another target group might be Native American Indians. Programs that don't have specific legislative authority, for example, programs for women, could be mission-planned across an agency, as could programs for older citizens. There are any number of groups that could be singled out for such an analysis, and there's bound to be some competition between them. There would also have to be some commitment on the part of the chief operating officer, whether it's the President, the Director of the Office of Management and Budget, the Secretary, or the Commissioner. They would have to be willing to take the time and pay the price to do this kind of thing.

I think this approach has a lot to speak for it, and I think it could be extremely helpful to persons interested in the disabled if it could be set up at any number of levels. For example, it would clearly be a step forward to establish it in the Office of Education. It could have some ability to drive budget decisions in, say, vocational education, and higher education under Title I. It would be an even greater step if we could get it in HEW, if not across the whole agency, then in some of the more coherent programs. The ability to rationalize programs for young adults as to the role of voc rehab, DD, education of the handicapped, and vocational education would be a giant step forward even if we only focus on this one construct.

I could see OMB doing an analysis of the same kind which could include not only HEW agencies but the Veterans Administration, the Labor Department, etc. It could be quite a broad budget analysis, participated in by the Domestic Council, if there's going to be a Domestic Council-like group.

One of the things I discovered when I worked very briefly on the Hill is that if you ask HEW to give you a breakout of how much money they're spending on handicapped, you'll get the most amazing collection of B.S. you ever saw in your life. Everyone who doesn't happen to have a system that breaks that out easily will report all the monies they're spending under any programs that might conceivably be spent on handicapped individuals. Instead of finding out how much Title I money is spent on the handicapped, for instance, you might get $2.2 billion as an answer, since any amount of it could conceivably be spent on the handicapped. From time to time, I've seen analyses on mental retardation like that. They come out with an astronomical $70 billion estimate of how much money's spent on the mentally retarded. So you cannot, probably, operate a system like this unless some relatively sophisticated people are charged with the responsibility. It won't be enough just to set up a tiny office with one person in it and no resources and let that person try to make some sense out of a disabled budget in HEW or any agency. It will probably require some people who have had agency experience and know where the skeletons are buried. They may be helped by some other people who have had the actual experience of being involved in service delivery programs as consumers. They will know what the real impact of the program is, as opposed to what some of us may think it is when it leaves Washington. There should be some balance between those two positions, but mostly a chief executive officer is needed who is interested. I can imagine that managing this system would be the most terrible job in the world if nobody were to take it seriously and it didn't make any difference in budgets or the assumptions being surfaced.

Several years ago we attempted a resource allocation study of HEW's programming for the disabled. We immediately found a barrier. I want to share this experience with you to give you an idea of what the problems are. The Bureau of Education of the Handicapped in the Office of Education could not fund a resource allocation study of

HEW-wide programs because of territoriality problems. It seemed as though one of the children was trying to run a family in which the other children felt they had an equal say. We then went to the Assistant Secretary for Planning and talked with the education people in that area and said, "Look, we'll give you the money, and you run the study -- because surely you can do this from the Assistant Secretary of Planning's Office." That office discovered that the Assistant Secretary for Health and the Assistant Secretary for Human Development were just as leary of the Assistant Secretary for Education as the agencies were.

We gave the money to Rand -- the study took some strange turns. It essentially fell on non-fertile ground and nothing was ever done to follow up on it. Our hope at the time was something more modest than what I've just laid out. We were really not trying to drive the whole HEW budget. We wanted to point out that almost no money was being spent on pre-school programming and the prevention of handicapping conditions, and that there was a heck of a lot of money being spent on adults and on long-term care. We did not want to decrease those allocations, but we did want to point out that any rational analysis of the HEW budget would have to indicate that billions of dollars were being spent on continuing services to older handicapped persons. I think about $40 million was being spent on prevention -- out of a $100 billion budget; that didn't seem like a lot. I would hope we could go forward with target-group planning on several different levels. Implementation in one of the levels -- agency, HEW, or OMB -- would be a great stride forward.

Mr. Feezle:

I'm not an expert in the field of handicapped legislation; however, we are concerned with the coordination of Federal programs in OMB. I'm from the management and organization side of OMB, which accounts for about 60 people out of a total of 600 people. We've had our ups and downs, as you are probably aware. Some of you might even wonder if there really is a management side of OMB, but I can assure you there is. There will probably be a more predominant OMB management role in the future.

We're concerned with two basic things: intergovernmental relations, and interagency coordination in the field. We're concerned with promoting improvements in the delivery of services in the field. Many times we have asked agencies for their Management by Objective statements (MBOs), and agencies will say that "We want to improve the delivery of services for all American youth." That's just pure B.S. That means nothing.

"We want to improve the delivery of services for the handicapped." That doesn't mean anything either, because it doesn't say how it's going to be delivered; how policy developed in Washington will be

translated to the field; how it will be implemented in the field; how it will be coordinated in State and local governments; how a devolution of responsibility to the States for these programs can be assured; what kind of capacity development or technical assistance will be provided to State and local governments to help them manage these programs; or that the Central Office knows what it's talking about or that the field knows what it's talking about. We're concerned with the simplification of the administration process. We're concerned with ensuring that there's increased consultation and cooperation with State and local officials. We're concerned that the States accept some responsibility.

Specifically, we work very closely with the Domestic Council and with the Federal Regional Councils. The question of whether or not there will be a Domestic Council is something being considered by the White House right now. We oversee the A-95 Clearinghouses, which are part of a system established by executive order in order to review proposals in local areas by States and local governments.

There are approximately 545 areawide clearinghouses which cover 95 percent of the populated area of the country.

We're concerned with the consolidation and reorganization of Federal executive agencies which will start shortly. The consolidation of grants, the consolidation of programs, and the consolidation of agencies are White House concerns at this point.

There are many other things we've just mounted. For example, an OMB circular, A-113, deals with the internal management of an agency. Jim Lynn, who started A-113, sent it to 20 agencies and asked the agencies to report back on how they can coordinate their programs.

For example, public hearings can be used in the field to identify problems. Secretary of Transportation William Coleman held hearings for the public on the SST and asked, "Do you have any problems? Should we test that out?"

Circular A-113 is asking agencies how they are trying to improve the delivery of services.

We sent out letters to 50 governors during an evaluation of the FRC system. I think some of you heard about Federal Regional Councils this afternoon. We asked the governors to tell us what they thought about Federal Regional Councils, Federal Executive Boards, and the Federal government itself and its Regional Offices. We asked if they were useful, if they should be continued, abolished, or anything they wanted to say about coordination in general. Their top problem was "red tape." They said that "it was impossible to do business with the Federal offices in the ten Regions because it was just constant red tape." They claimed that they never won a battle with the Regional Office, or the Federal government and that coming to Washington to try to get something done is even worse.

Another identified problem was that the field lacks the authority to make decisions. They do not coordinate or innovate, they just develop more red tape. There is not an adequate consideration by the Federal Department and agencies in Washington of the views of the filed offices. In other words, when the suggestions come from the bottom, Washington is not willing to make any changes.

In addition, there are too many coordinating mechanisms in the field. Another complaint was that the Federal government gives too much authority to specialists and functional bureaucrats, many of whom cannot see beyond their noses and their own programs. "Too much turf protection" is a quote from one of the governors.

Based on my experience and responses from the agencies, from the field and from the mayors, pressure groups, and the public interest groups including the National Governors Conference, there is no sense in discussing coordination unless there is a commitment from the top leadership of the agency. Without that leadership, forget it. You can sit around this room and discuss coordination all you want and you're not going to accomplish a damn thing -- I can guarantee you that.

You'll accomplish nothing unless the directors of the agency responsible for the specific program sit down together and say to each other, "What is the problem?" You're not going to accomplish anything until OMB decides that they're going to have program cross-cuts involving Labor, HUD, HEW, and the Office of Education (I classify the Office of Education separately from HEW because the Commissioner of Education has separate authority in the field, which the HEW Regional Directors do not have). Until there is some order to the kinds of authorities held by people in the field, and until OMB requests that agencies participate in cross-cutting program reviews to eliminate duplications of services and assure coordination of effort, there will be no coordination.

It's even been thought that maybe we ought to have coordination impact statements, but that isn't going to work because we already have other kinds of impact statements and it would be impossible to get the legislation passed.

Agencies should determine who they should coordinate with. For example, who controls or coordinates Indians? Did you know that Indians are considered a national resource? They're not even considered human, since they're classified as an agency in the Department of Interior. There are reasons for that. But, who coordinates them? The BIA? You can talk about handicapped programs all you want, but I think there is a definite need for trying to come up with a plan of action that makes some sense, that's not "blue sky," that's realistic and that says, "Here's what we need in this area, and here's what we should present to the White House." Knock all the B.S. out of it and firm it up.

Beyond the threatening nature of any change to individuals and

individual agencies, other negative reactions are heard: "I've got to protect my turf because if I don't protect my turf, nobody else will."

"That's not the responsibility of HUD, that's my responsibility, because I'm responsible for handicapped programs."

"That's not the responsibility of Labor; I'm responsible for that program."

Until people start thinking that "we're both responsible for that program," or that "we're all three responsible for that program," -- nothing will happen. Until the monies and the philosophies and the budgets are presented in a way that indicates the cross-cut implications between and among the agencies, you're not going to coordinate. Until there's a commitment by the heads of those agencies, you're not going to have coordination. It's just that simple. It means commitment.

OMB is concerned with and will remain to be concerned with the coordination of Federal programs. We have already proposed new consolidations of Federal programs which will probably be presented next week. We're all in the midst of writing transition papers, and I welcomed the opportunity to listen to some of the things you people were going to talk about. We're concerned with improved services in the field; should we streamline the field structure? Should we have as many bureaucrats in the field as we have at the present time? The answer is "No." But the field is important.

This new Administration wants to get back down to the people, and it wants to listen to the people and it wants to react to the people.

I think that, while it's not new, this Administration may mean it. I'm not saying the last Administration didn't, but it had some interference from some other things that curtailed the Federal government's performance. As a matter of fact, we have to repair some of the damage that took place.

I would like to react to a recommendation for an Executive Order which has been considered here today. There are many ways of involving the White House without recommending an executive order. I think you need to think very carefully about the steps you want to take and the kinds of actions you want. For example, you might want to consider a memorandum from the President to the agencies rather than an executive order. How about a Cabinet meeting where the President mentions the issue as one of his top priorities? He could hand out a letter to the Cabinet members, and from there go into an executive order preparation. Lawyers have a way of stopping everything when they start writing executive orders, so why not start the action with support from the White House?

Discussion

Question to Mr. Eshelman:

Would you please explain what you mean by similar benefits?

Mr. Eshelman:

Similar benefits refers to using other program resources to the maximum extent possible when meeting the needs of a VR client. For instance, the new legislation for handicapped children provide some services which were provided by VR programs in the past because of a scarcity or lack of certain work-study programs. Because of scarce VR dollars, State VR agencies will be expected to work closely with education agencies, with social service agencies, with those responsible for Title XX services. Negotiating the provision of certain services by other agencies, rather than providing these services out of VR funds as we have in the past, is what we mean by utilization of similar benefits.

Question to Mr. Eshelman:

My question still is, "Why does the VR counselor not play a more assertive role in obtaining similar benefits?"

Mr. Eshelman:

We hope that VR counselors would become more assertive in this role and that the leadership and direction in our whole program would encourage VR counselors to do this.

Question to Mr. Feezle:

I'd like to ask an OMB related question. We hear a good deal about management by objectives. You raised that issue in the course of the discussion. I wonder what OMB's attitude is toward what I call the "indicator effect." In order to reduce the objectives to something measurable, one generally substitutes an indicator variable for what one really wants to do. As a result, the agency redirects its attention not to the true objective but to managing the numbers. I've seen that happen in a number of instances, because we don't have a good, measurable indicator of what we want to do. I'm wondering how aware OMB is of this problem, and what steps are being taken to make sure we're not substituting indicator management for objectives management.

Mr. Feezle:

The MBO system was set up when Fred Malek came into the Office of Management and Budget and Roy Ash was the director. It was intended as a useful exercise. The OMB resources were the program associate directors who met with the agencies to assist them in setting their goals. One person in OMB had responsibility for the cross-cutting issues. I don't think OMB even thought about any indicators; I

don't think OMB ever went back to the agency, for example, to say, "You should get off your duff because this is baloney; it doesn't mean anything; it's not going to be implemented; it's nothing."

The Secretaries presented some 200 to 500 MBOs to the President, and the President said, "Great -- aren't those nice." He published them, and the National Journal printed them, and everybody looked at them, and they meant absolutely nothing. Nobody went back to the agencies and said, "Baloney, you're not doing it. We're going to evaluate those objectives to see how you've improved the delivery of services, for whom, by what percent, in what Region, and what the changes mean to the field."

Question:

You still haven't answered my question.

Dr. Martin:

Let me take a crack at it. A classical example, which shows some of the strengths and weaknesses of MBO, might be the New York State Region's System which had teachers spend all their time, during my last semester in high school, teaching for the Regents' exam. More specifically, we were reading the Regents exams and practicing in the exam workbooks. Another example: to some extent this happened in the voc rehab program when the output in terms of numbers of cases closed became more important than the nature or difficulty of the cases.

The problem comes from using the system for punishment. It had a somewhat punishing mentality when I was familiar with it the past few years in HEW. If people fail to meet the targets and the experience is made humiliating for them, naturally they're going to lower their aspirations and aspire to things at which they're sure to succeed. That's a very difficult problem. For example, in BEH we attempted to set out as an objective a specified number of children we hoped to help with special education programs across the country; obviously we could not control the number, but we hoped to use the education of the handicapped money as a catalyst by working through various agencies to add a half a million children to special education programs a year. We thought it was a reasonable objective, and we tracked our efforts.

But the system really wasn't designed for that kind of effort. Management wanted us to deal only with things we could control and guarantee; then we got to saying, "Well, we'll give out 150 grants." So, I think the indicator is the whole ball game. But the agency has to be willing to involve knowledgeable people in the systems. If people managing the system have never run a program, and they delight in giving you a red mark -- i.e., judging you a failure because you've only got 87 percent -- then the negative stimuli will dry up the system.

I just want to say one other thing about OMB. I haven't had any experience with the management part, which is the little "m" in OmB like the "e" is the little "e" in HeW. It's no personal thing. I think OMB is a disaster; I think that it does not have a capability to do what it has been charged with doing. One of the most amazing parts of the whole budget process is the Office of the Budget's people called budget analysts. This is true at the agency level and at the OMB. We submit a program -- the program is to help rehabilitate so many disabled persons or to provide early childhood education, etc. In this office is an analyst who decides whether or not you're going to get the money. They have no information, no experience, no independent studies, no analyses of any sophistication. All they are doing is responding intuitively to your presentation and to whatever else is driving the budget that year, such as "Let's hold down expenditures" or "It seems to me that we shouldn't do this because the State should do it."

There really isn't any sense in having a Secretary at HEW or a Commissioner of Education, or for that matter, a bureau chief for Education for the Handicapped. Who needs it? The guy over at OMB is deciding whether we need another million dollars in the deaf-blind program or not.

I don't know what Bert Lance is going to make out of OMB. But my hope is that it will go back to being an analytic agency that attempts to do studies of the kind you describe and attempts to have something substantive to say. Probably it should be staffed with people who have run programs, and who have some notion of what it's like to really try to answer questions.

Mr. Feezle:

Let me just respond to that, because I have the same opinion of HEW. But I will say one thing: I think what you said is correct. It's a disaster, and so is the government. The problem is that there are people who sit on their duffs and never get out in the field and never understand what's going on in the real world and that's what we're all about in the small "m." It's true that there are budget analysts who never get out and never understand programs. But I won't blame OMB. If you have a strong Secretary in your agency who will tell Lance and the President, "You guys are full of baloney. Here's what our priorities are. I disagree with what OMB has said. I disagree with what your program analyst has said."

If he does that, I guarantee you that that GS-9 or that GS-12 budget analyst will be put on a frying skillet. He'll be up in front of Lance defending why he cut that program and why he didn't cut some other program within HEW. This is one of the reasons why it's very important for you to have an input in your agency. If your budget examiner is not listening to the guys who are doing the action, then something is critically wrong with that agency. It's not just OMB. If you don't have input into that budget, it isn't a budget. It's a game; it's cutting the figures.

The President set a figure before he knew how he was going to cut it. Ford set that figure and said, "Here's what my budget's going to be because I don't want to go under next year." OMB this last year gave agencies a mark before the cutting began. Don't think for one minute that the analyst in OMB enjoyed that, or that anybody who's got their heads screwed on right likes it.

Strong leadership gets you out of the political arena. Politicians and career people are needed who understand their agencies' budgets, who know how to run their agencies, and who get into the bowels of the agency to establish realistic priorities. Until that happens, OMB can't be blamed.

Dr. Martin:

I think you made a good answer. When you read in the newspapers that the President has said he's going to set up his Cabinet members so that they won't be overruled by staff in the White House, the meaning of it becomes apparent. We've had a strong White House, in the past ten years, a strong Executive staff, a very strong OMB, and a very weak Cabinet. I hear you saying with me that that probably is not the way government ought to be run.

Mr. Feezle:

The only other thing I'd want to add to that is that the strongest OMB was when Charles Schultze was there. I do believe that OMB's the fall guy; the President's got to have a fall guy.

Question:

What's happening with zero-based budgeting?

Mr. Feezle:

We have asked the agencies to list for us at least six programs which they would be willing to set up as examples for zero-based budgeting. We're not going to have any funds; we're going to evaluate this program from ground zero. I don't know its current status, but I think it's a good idea.

We'll rotate the programs. One year we'll do education of the handicapped and programs for the disabled, and set up some objectives. The next year, we'll do Indians, and the next year we'll do bilingual programs. The competition will be fierce. Practically speaking, I don't know if we will convince the new Secretary or the President to limit this kind of analysis to disabled programs, but I hope we can convince him that programs for the disabled would be worthwhile as a pilot program. It's an area that lends itself so beautifully to ZBB.

A Consumer's Viewpoint
Speaker: Harold E. Krents
Surrey, Karasik and Morse

I was asked to come out here this morning and talk to you about equal rights from the standpoint of the consumer. It's very difficult to try to make any kind of generalities. I don't believe that any one person can speak for another, be they handicapped or non-handicapped. Probably each consumer has his or her own views, but there are certain things on which I think people generally concur. However, there are many areas in which people do have disparate views.

In viewing the whole area of the handicapped -- where we come from, where we are going -- one must view the situation with a certain amount of humor, in probably the same way that most of us approach our own physical, emotional or mental problem. I'll try to set a general attitude. Let's talk about some of the problems the blind run into, and how we have to react to them as consumers, because I think our reactions have ramifications in our dealings with administrations as they come and go.

One of the problems I run into all the time is that people will assume that if you can't see, you obviously can't talk. Very often when I have lunch, people will say to my wife, "Would he like some potatoes?"

To which I always say, "Yes, he would." I react this way because the key is to try to break down the awkwardness, if possible, without hitting anyone in the mouth.

This experience was particularly exasperating when I was at Oxford. When I was in England I became quite ill, and I was put in the hospital and wheeled down to the X-ray room. There was a little elderly woman at the counter right outside, and she turned to the orderly, and said, "What's his name?"

And he turned to me and said, "What's your name?"

I said, "My name is Harold Krents."

And he said, "His name is Harold Krents."

"When was he born?"

"When were you born?"

"November 5, 1944."

This went on for ten minutes. Now normally, I do find the humor in situations; I am a compassionate, saint-like human being, but I was in a great deal of pain. I did lose my temper and I said, "Oh, darn it, oh phooey, oh shucks, Madam. Granted I can't see, that's quite clear. I concede that point, but I'm no more than two and a half feet away from you and it must have become clear to you that, although I can't see, I don't need an interpreter."

The orderly turned to her and said, "He said he doesn't need an interpreter." (Much laughter.)

It's good to see we have a good, warped group. We went on like that for another ten minutes.

You run into these situations on airplanes: Obviously, if you're blind, you can't walk. I was on a plane recently. As we were getting off, I was asked if I would remain seated. Everyone got off. The second officer finally came back to me and said, "We're ready now. We have the wheel chair at the bottom of the stairs. Would you like us to bring it up or can you get down?"

I said, "Sir, this may really come as a shock to you. Blindness affects the eyes; my feet are fine. Now watch this," and I began to run up and down the aisle of the airplane, to the amusement of the stewardesses. He lapsed into a coma shortly thereafter. But I don't think they'll do that again.

Another thing I run into with airlines: When I get to the ticket counter, I'll say, "I wonder if you could give me some assistance, I can't see."

The guy will get on his little intercom and whisper to the ground hostess, "Jean, Jean, we have a 76 here."

The reason he didn't use "blindness" is obvious. One, he may be telling me something I'm not aware of, and I'll burst into tears; or, two, if the word 'blindness' is said, he could catch it, and his retina would detach. I've always wondered, are the others "77s" or are we all "76s?"

The point of this whole brief exercise is that it is extremely important to view the situation with a certain amount of humor if possible. Believe me, it's not always easy. In looking at the situation, particularly in the equal rights area, you either laugh or you cry. I prefer trying to find the humor.

Let's talk about the handicapped as a movement. Where have we come? I think that as a movement, the group has some problems; there tends to be a great deal of parochialism within the handicapped consumer movement. There is a tendency to be concerned with the specific problem, the specific disability, and not to realize that, to a

large degree, we share many problems in common. I've often seen situations where good legislation has been introduced and the physically handicapped have attempted to knock out the mentally handicapped. When we do that we knock ourselves out of a tremendous number of votes, because there are certain people in Congress, among others Senator Kennedy, who are particularly concerned with the mentally handicapped area. I might also point out that it is extremely important that we all go under one umbrella now because of Mrs. Carter's strong interest in the area of the mentally ill and handicapped.

Over and over again I have heard among consumers the feeling that "I'm concerned about my problems, Me," but no concern about the general difficulties. I think that one of our strengths is our number. On the brighter side, I think that the consumer movement is beginning to organize; I think a lot of progress has been made in the last couple of years. Without organization, we'll continue to receive only whatever happens to be thrown in our direction. I think that organization is the key. Legal defense funds are beginning to crop up; I think they're going to be cropping up increasingly. Unfortunately, I think their existence is probably essential.

To draw a parallel, the handicapped consumer groups are perhaps where the black movement was 12 to 15 years ago, or even 20 years. I think we're beginning to realize that there really is potential out there, that things can be done, that we don't have to be treated as second-class citizens. It's a matter of marshalling our resources so that we can act in a responsible, intelligent manner.

From a personal standpoint, as individual consumers, each one of us probably has our own story to tell.

Personally, I was not aware of the problems faced by people with disabilities until I was nine. I lost my sight completely as a result of a football accident. By the way, I continue to play football. In fact, I'm better than I was because no one knows where I'm going; it's like watching a drunk run down the field at top speed. I'm much more deceptive. I'm on the Audubon Society's ten most wanted list, as a matter of fact, because I displace birds out of trees. My nose, which you see perched somewhere around the middle of my face, used to be about a quarter of an inch to the right.

But I remember, at the age of nine, when I was told that I would never see again. Of course, I was told by the doctor that "You're going to be a burden to your family the rest of your life. Make it as easy as you can for them."

This brings up an area the health community has to learn how to deal with, the newly handicapped as patients.

I recently heard a story about a woman who became quadriplegic in

New Hampshire. The doctor came in six weeks after the accident and said, "I have marvelous news for you; you're going to live. Now the bad news is that you'll never be able to move a muscle in your body." He could not understand why she went into a deep depression. The job does not end in saving somebody's life.

In any event, I remember going home that night, and thinking at a nine year old level: Did I, or did I not, want to try to be independent? Obviously I put it in terms of "Do I want people to feel sorry for me?" I made the decision personally that I wanted to try to make a go of it. It has been a long, uphill battle. Many of us have experienced discrimination in its most basic, flagrant variety.

So, what have I tried to do as one consumer? I have tried to develop a practice in the field of law and stake out my career. I believe that the law can do tremendous things; for too long we as consumers have left the job to others. Partially we have to blame that on ourselves. We haven't actively sought out the opportunity to guide our own destinies. Have we arrived yet? No. But I think that is changing. I think the climate in the consumer movement is extremely favorable right now.

The White House Conference is an example. If the Conference is successful, it will mark the first chance for large numbers of bright, articulate, handicapped people to sit down and discuss and hopefully come up with workable recommendations dealing with our own problems.

So, in short, the attitude in the movement is promising. We have our troubles; we have our parochialisms. At times, I feel that the handicapped consumer groups are a little bit like the Middle Ages; everybody has carved out their own little fiefdoms. But on the whole, I think we have made a great deal of progress, particularly in the last few years.

But that's only half the battle. It doesn't matter how informal, how articulate, how organized the consumer movement is. In the last analysis, it really comes down to the question of how this whole area is viewed by the non-handicapped, because whether we like it or not, this is the context in which we must function.

Let's take a look at the Rehabilitation Act. The Rehab Act was passed in September of 1973. I'm going to deal primarily with its four major sections. As many of you know, the passage of the Act had its ups and downs; it was vetoed; it was passed again, and was signed. Amendments were passed; they were vetoed; the veto was overridden. I think all of us felt that this legislation really marked the beginning, an opportunity for us in a sense to put our money where our mouths are. It's not enough to say "Treat me like an equal." You've got to be able to do it. We should not be given special dispensation.

So the Act was passed and many of us felt this was a Magna Carta to prove ourselves. Although the handicapped had not been included in the Civil Rights Act, we now had our legislation.

Section 501 requires the government to practice what it's enforcing, that is, to be a good employer. The government has a reputation for being a fine employer of the handicapped. To a large degree it is deserved; to some degree it's been overstated. As a lawyer, I have been involved in two instances in which the government has hardly covered itself with glory. There are no regulations to this day dealing with 501. The Act was passed September 26, 1973; January 25, 1977, there are no regulations.

Section 502 deals with the vitally important area of accessibility. If the handicapped person cannot get in, park or use a building, then many, many millions of handicapped citizens are being denied equal rights; it's as simple as that. Accessibility is at the heart of this whole thing. Section 502 set up a compliance board and there are some very fine people involved in that program; nevertheless, we have no substantive regulations even in proposed form, although recently some procedural regulations were issued in proposed form. Again we're talking about a time lag of close to three and a half years.

I'm going back to Section 503.

Section 504 is perhaps the broadest section of all. According to the Office of Education, it would cover 16,000 school districts, most colleges and universities. Just within HEW, it would cover 400,000 private positions, and over 8,000 hospitals. That's excluding all the other Federal agencies which offer Federal financial assistance, such as SBA, etc. Last Spring, a promise was made by the former Secretary of Health, Education and Welfare that regulations would be promulgated in final form prior to the first of the year. The Rehabilitation Act was passed September 26, 1973. Today is January 25, 1977; we have no 504 regulations.

Section 503 deals with government contractors and subcontractors. According to the Department of Labor, well over one million companies will be affected by this legislation. The regulations were published in final form last April. Again, as in the case of the Office of Civil Rights and the compliance board, there are some good people over at 501, and there are certainly some very fine people over at the Department of Labor. But I can tell you, after talking to literally hundreds of corporate officials, that the attitude toward this legislation between last Spring and this Fall has changed completely. The attitude last Spring was of strong interest, a feeling of, "Well, now that you've put our feet to the fire, this is something that should be done, the right thing to do. We really have to get about the business of hiring the handicapped; it's not a matter of should we comply, it's how do we comply."

As of this Fall, the attitude changed 180 degrees. There is no hostility. Companies have simply said to me over and over again,

and it doesn't matter where you go in the country, that "There's no real enforcement. We are 'for profit' organizations, and for us to make our facilities accessible, for us to make job accommodations, we've got to feel there is a reason for doing this thing. We still feel it's the right thing to do to hire the handicapped, but no one's checking up on us." I've had companies tell me, people who are in charge of EEO affairs: "Look, call the Labor Department and sic 'em on us. It's the only way I can convince my management that people are taking this thing seriously."

For one reason or another, the program isn't being taken seriously. It's not being taken seriously here in Washington. Business sees no reason why it should be taken seriously out there. Now they may be wrong, that attitude may be totally unjustifiable, but that is the attitude that's out there. And I think that we all had best accept it. This observation is not based on meetings with 15 companies; it is based on meetings with close to 500 companies this fall.

So where are we then? Is the picture completely black? I spoke to a consumer organization in San Francisco, Berkeley Center, which is in a long-overdue process of training paralegals. I talked to them, much as I've talked to you. At the end of the meeting, they said, "Gee, you're the most optimistic person we've talked to."

I said, "Really?"

They said, "You say the program is in critical condition -- everyone else we've talked to says it's dead."

By the way, that reaction included people in government who are in charge of enforcing these areas. If that's supposed to inspire the consumer movement to do anything, it's a strange way of handling the situation.

So, is it dead? No, I don't believe it is. I think the patient is gravely ill, but the patient hasn't expired.

What's to be done? I think the Carter Administration has to make good on some promises which were made in this area during the campaign. During the first 45 days of this administration the trend toward disillusionment has to be checked. I think the President has to call a press conference and personally express his commitment to the enforcement and implementation of this program -- to realistic enforcement. I'm not talking of beating people over the head. I don't think that's necessary, I really don't. I have found in talking to companies, to school districts, to hospitals, that they don't need to be bludgeoned. They simply have to know that people are going to be coming around and checking on them. I think you need a statement from the President indicating his interest and his concern. I think an ombudsman must be appointed who will have access to the President, who will have free rein in the various agencies, who can represent the concerns of the government to the handicapped consumer, and who can represent the

concerns of the handicapped consumer to the government. I think that is absolutely essential. I think that each Secretary, each major agency that is involved in enforcement of this Rehabilitation Act, needs to have an Assistant Secretary specifically in the area of handicapped affairs. This area is very specialized, unlike any other emerging minority group. The problems vary from disability to disability, and I think it is essential that each Secretary have the expertise of a bright, articulate, handicapped individual to give him or her the input they need to do an effective and realistic job of enforcing their particular areas.

There are other things that are needed, such as much greater tax incentives for corporations. Money has to be provided to school districts because they don't have it. Colleges, universities, the educational system in this country is in very bad shape. When the proposed 504 regulations were issued, I know educators who started eating the wallpaper. They're terrified. Money has to be appropriated.

PL94142 has been passed, but the money has not been appropriated. It's got to be. I certainly pledge my efforts to pushing that appropriation through.

Consumers have to obtain the same rights as consumers in other groups. Under the Civil Rights Act, consumers have the right to recover court costs and attorneys' fees when they sue. It means that good law firms have been willing to take risks in the civil rights area. The handicapped do not have this right, although in recent legislation, it was extended to the blind and visually handicapped where they've been denied admission to educational institutions. There's no reason, frankly, why the blind should have a monopoly on this right. It has to be extended. This is a piece of legislation I want them to move on. I'll do whatever I can, and I hope I can get the support of several of you because I think it's basic.

To conclude, we have a difficult solution: Consumer groups have to become more aggressive. I think that the government is prepared to listen if the voices are raised, particularly now, in the early days, before policies are set in concrete. In dealing with agencies that dispense money, consumers have to play a more major role than they have. That's why I believe there should be a consumer at the top level in every major agency of government. But we have a job to do; we all have a responsibility if we're going to make this thing go. Companies, school districts, hospitals, governments, anyone who is required to comply with the Rehabilitation Act has a job to do, to look at this thing as a challenge, rather than a chore.

We must view this Act as an opportunity rather than an obstacle. We can assist companies, give them the information they need to get off the ground right. I helped set up an organization that's doing this to some degree, but there's room for many, many more. Companies need the help, and so will school districts and hospitals,

assuming that somebody begins to monitor this legislation with spot checking. If there isn't monitoring, one organization is wasting its time. If there really is meaningful enforcement, if the President means what he indicated during the campaign, then I strongly urge many of you to set up organizations in your local communities to work with your companies, and your school districts.

The rehab agencies and the sheltered workshops also have a major responsibility. Some have done a marvelous job. I've heard companies tell me over and over again, however, in many areas, that they can't come up with bodies, motivated people to fill positions. We've run into it, twice, as an organization. You cannot assume that because a company is looking for a handicapped individual, they're going to wait a year until you come up with somebody. I think it's vital that there be a dialogue between rehab and industry so that we know what kind of jobs are opening up. This may sould simplistic, but in vast areas of the country, it isn't being done.

The handicapped clearly have a major responsibility, as I touched on earlier. It is not enough for us to scream "Treat us like equals."

If we want to be treated like equals, we've got to act like equals. If you can't cut the mustard, you should be fired. Those were the terms under which I was hired; I was given a lengthy opportunity to prove myself and I don't feel that I had any justification to ask for anything further than that. Life out there is not easy; most of you here know it. And I think it's very important that we make that clear to other handicapped people. We have an affirmative responsibility to make this whole assimilation process easier for the people that have to comply. They've never dealt with this area. I run into the problem of stereotypes every day, day in and day out. We've got to develop thick enough skins to handle stereotypes, to break down that image. Rolling ourselves up into balls of bitterness will do nothing more than alienate people further. I want to end here as I ended out in San Francisco -- I think we all have one tremendous job to do in the next several months. The next four to five months are going to tell the tale. Consumer groups are going to have to bury their swords at least for the time being. We're going to have to mold together as we've never molded before; and we're going to have to help shape these policies. I think that the White House Conference can go a long way. It will either be a tremendous success or an absolute catastrophe. And if we fail, my guess would be -- after talking to people in government, on the Hill, and in the corporate community -- that it will be another generation before we have another good shot at it.

THE DEVELOPMENT OF ALTERNATIVE PLANS FOR IMPROVING COORDINATIVE AND COOPERATIVE PLANNING IN THE PROVISION OF SERVICES TO HANDICAPPED INDIVIDUALS

prepared for

OFFICE FOR HANDICAPPED INDIVIDUALS
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DISCUSSION PAPER

FEDERAL COORDINATIVE STRATEGIES

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The Rehabilitation Act of 1973 provided for the establishment of the Office for Handicapped Individuals (OHI) to "encourage maximum effectiveness, sensitivity, and continuity in the provision of services for handicapped individuals by all programs." In support of this purpose, this paper reviews several different coordinative strategies suitable for use by a Federal coordinating office. Research for the paper included an extensive literature search supplemented by numerous interviews with individuals in other coordinative and advocacy offices within the Department of Health, Education, and Welfare (HEW).

I. DEFINITION AND DISCUSSION

OPERATIONAL DEFINITION

Coordination is a current shibboleth of social policy at all levels of government, especially in human services. It lies at the core, for example, of the whole service integration movement; it is felt by many to be the essential characteristic of a productive operating system, a system whose purpose is the satisfaction of unmet human needs at the lowest possible cost. What do we mean by coordination? A simple dictionary definition calls it a "harmonious combination or interaction of functions as parts." Coordination can perhaps best be described by identifying the purpose it is meant to serve.

Purpose of Coordinative Activities

The effective coordination of programs serving the handicapped is intended to provide target populations with an increase in service benefits without increasing the supply of service resources. This increase is obtained through a reduction in duplication of effort, allowing for the redirection of those resources to gaps in service-delivery patterns or to priority service delivery areas not receiving adequate levels of support.

When coordination is pursued on behalf of a particular client group, such as handicapped individuals, an implicit objective is the encouragement and support of access by the target population to the rights and services enjoyed by the general public. Consequently, advocacy efforts frequently support coordinative efforts; in the case of the Office for Handicapped Individuals (OHI), coordinative efforts may in fact be advocacy efforts on behalf of the handicapped.

Many Federal resources available to meet human service needs are focused on categorized program areas such as alcohol abuse, vocational rehabilitation, medical care, training, day care, etc. Consequently, the planning undertaken by Federal agencies has been fragmented. Today, economic demands, professional responsibility, and accountability to the public require collaboration among different programs in order to focus services on the total needs of the individual and the family unit. The advantages of coordinated service delivery are clear, both in terms of its benefits to clients and the better utilization of existing resources. The accomplishment of such coordination is difficult, however, due to a number of programmatic constraints which include the following:

- Different organizational roles and responsibilities
- Inconsistent geographic boundaries for service areas

- Varying jurisdictional responsibilities for services
- Inconsistent timetables for planning
- Varying planning formats
- Individual data bases
- Different staff capabilities.

While these are significant problems, they are not insurmountable. The strategies for service coordination described in the following sections are designed to counteract these and other program constraints. The coordinative model adopted by OHI should implement these constraining factors in programs serving handicapped individuals and be consistent with the capabilities and resources available to OHI.

LEVELS OF COORDINATION

Coordination involves three activity levels in the social service system:

- Policy level
- Administrative level
- Service delivery level.

The policy level includes the formulation of basic agency goals or program objectives, the prioritization of those objectives, the charting of program direction and strategy, the allocation of resources, and the formulation of budgets.

The administrative level includes the establishment of program plans, rules, and procedures that allow policy objectives to be realized, resources to be allocated, and strategies to be implemented.

The service delivery level involves the actual provision of services, including intake, referral, and problem treatment activities.

A distinction should also be made between Federal level coordinative activities and those coordinative activities which primarily take place at the State and local levels. When considering strategy alternatives, the coordinating agency should consider at what point(s) in the activity and system level(s) its coordinative objectives can most effectively be achieved.

Operational Definition of Coordination

The types of coordinative activities possible at the policy, administrative and service delivery levels generate an operational definition of coordination. This definition takes its cue from a process of bonding that knits together groups of people in different organizations around different levels in the human services framework. We will call that process of bonding linkage, and define coordination as:

> a set of linkages between organizations (agencies and programs) engaged either in determining policy, providing administrative support, or delivering human services to a common population with multiple needs.

The specification of precise linkages is dependent on a careful definition of coordinative goals and objectives by the coordinating agency.

COORDINATIVE STRATEGIES

Eight different coordinative strategies are briefly reviewed in later sections of this paper. They have been grouped into two general categories based on system levels: those which are primarily used by Federal agencies to coordinate Federal-level activities, and those which are primarily used by Federal agencies to encourage increased coordination at State and local levels. Neither the strategies themselves nor their system categories are mutually exclusive; the classification scheme is primarily designed to guide the reader's assessment of the utility of each strategy for meeting coordinative objectives.

Strategies Supportive of Federal-level Coordination

Four strategies have been identified as focusing primarily on Federal level agencies:

- The lead agency model, in which one Federal agency assumes responsibility for managing coordinative activities for the benefit of a specific target population
- Interagency agreements, which represent voluntary, documented coordinative agreements among participating Federal agencies
- Crosscutting committees, which are used extensively to obtain advice from and representation of different Federal agencies
- Management by Objectives, a management system which emphasizes the development of crosscutting objectives.

Strategies Supportive of State and Local Coordination

Four strategies have been identified as focusing primarily on the encouragement of coordinative activities at the State and local level:

- Advocacy, a strategy which promotes the interest of a particular group or individual in the service delivery system
- Information Dissemination, a strategy employing several methods to make different kinds of information available to a variety of audiences
- Coordinative Planning, which promotes an analytic assessment of the service delivery system as a basis for determining coordinative objectives
- Ad hoc/Informal Methods, which rely on cooperative methods to encourage coordination in particular situations.

Exhibit I-1

ACTIVITY AND SYSTEM LEVEL CATEGORIES

Level / Strategy	Policy	Activity Level Utility: Administration	Activity Level Utility: Service Delivery	Federal Agency System-level Focus: Federal	Federal Agency System-level Focus: State & Local
Lead Agency Model	X	X	X	X	
Interagency Agreements	X	X	X	X	
Crosscutting Committees	X	X		X	
Management by Objectives	X	X		X	
Advocacy		X	X		X
Information Dissemination	X	X	X		X
Coordinative Planning	X	X			X
Ad hoc/Informal Methods		X	X		X

Exhibit I-1 presents a summary of the eight strategies and their utility in the three activity levels. In addition, the summary indicates the system level applicability of the strategy when it is employed by a Federal coordinative office.

FACTORS INFLUENCING CHOICE OF STRATEGY

Two factors have been identified in the course of the study which could influence OHI's choice of a coordinative strategy. A discussion of the following factors is included in later sections:

- The effect of the recent reorganization of many Federal programs on coordinative needs and remedies
- An assessment of how Zero-Based Budgeting (ZBB), a management tool proposed by the Carter administration, can contribute to the accomplishment of coordinative objectives.

CRITERIA FOR CHOOSING COORDINATIVE STRATEGIES

An understanding of the overall context in which coordination takes place is necessary before a coordinative model can be designed for programs serving handicapped individuals. Basic knowledge can be obtained from sources such as the National Journal, enabling legislation, and materials prepared by the various agencies for public information purposes. The Office of Manpower in HEW has developed a series of manuals for making such "environmental" assessments at the local level which outline the enabling legislation programs, services, and possible linkages which HEW programs could establish with programs funded under the Comprehensive Employment and Training Act.

The four basic steps which contribute to this environmental evaluation are discussed below.

1. Determine where gaps and duplications occur in the present delivery system. The White House Conference on Handicapped Individuals and the OHI Coordination Seminar will contribute to this assessment. Develop specific coordinative objectives based on this information.

2. Determine the prerequisite roles and responsibilities of each of the agencies which must contribute to meeting the coordinative objectives.

3. Analyze the legislation, goals and organizational "culture" of the major programs to be coordinated. This analysis is based on an assessment of the following information:

Exhibit I-2

SUMMARY CHART OF ADMINISTRATIVE STRATEGIES

USED TO COORDINATE FEDERAL PROGRAMS

Strategy	Definition	Purpose	Implementation Prerequisites	Limitations
Lead Agencies	One agency assumes responsibility for managing coordinative activities for the benefit of a specific target population	1. Clear assignment of responsibility for initiative 2. Capability to monitor implementation progress	1. Requires administrative designation of responsibility 2. Management skill and staff support	1. Utility often limited by strength of lead agency
Interagency Agreement	Voluntary, documented understanding promoting coordination between two or more agencies	1. Establishes coordinative framework in agreement area 2. Useful as model at other levels of government	1. Identification/development of mutual objectives 2. Negotiating skills 3. Resources to contribute to agreement	1. Voluntary 2. Often limited to tenure of individuals formulating agreements 3. Availability of resources to contribute to activities
Crosscutting Committee	Groups composed of representatives from different organizations convened to address a common subject or problem	1. Disseminate/share information 2. Develop consensus on needs, plans 3. Formulate advice, recommendations	1. Ranges from agency willingness to convene group to provision of staff and financial support 3. Group management skills	1. Time consuming 2. Limited to objectives perceived by group as mutual 3. Voluntary 4. Members often lack decision-making authority
Management by Objectives	Federal management system which focuses on major organizational objectives	1. Develop consensus on initiative prior to implementation 2. Provide capability for monitoring implementation	1. Secretarial/Presidential interest 2. Issue of major departmental interest and/or involving significant use of resources 3. Management skills	1. Limited to initiatives amendable to consensus 2. Time consuming, arduous procedure

Exhibit I-2 cont.

SUMMARY CHART OF OPERATIONAL STRATEGIES

USED TO COORDINATE FEDERAL PROGRAMS

Strategy	Definition	Purpose	Implementation Prerequisites	Limitations
Advocacy	1. Promotes access of certain groups to basic rights and services 2. Promotes access of specific individuals to specific services	1. Promotes access to services by certain groups and individuals	1. Public education and information skills and resources 2. Funds and enabling legislation to support legal and citizen advocacy projects	1. Dependent on resources to support legal activities
Information Dissemination	Systematically attempts to provide specific information to specific audiences	1. Promotes consumer access to fragmented service delivery system 2. Facilitates access to information 3. Reduces need for more extensive program coordination	1. Distribution facilities and resources to support staff, printing, media, and equipment requirements	1. Does not directly relate to service delivery coordination
Coordinative Planning	Analytic assessment of the service delivery system as basis for determining coordinative activities	1. Provides documentation of coordinative needs 2. Builds common data base 3. Rational resource allocation 4. Promotes local level coordination	1. Analytic skills 2. Local agencies to implement planning strategies 3. Agency willingness to coordinate activities	1. Implementation of plans frequently not addressed 2. Programs, jurisidictions have differing planning requirements, time frames 3. Need to tie into budgetary process
Ad hoc	Cooperative informal methods devised to meet needs of specific situation	1. Can be tailored to meet needs of situation 2. May contribute to more extensive formal agreements	1. Skills needed to provide technical assistance 2. Development of cooperative opportunities 3. Resource allocation and administrative support of technical assistance activities	1. Sporadic, dependent on development of cooperative relationships 2. Voluntary 3. Dependent on tenure of cooperative individual

- An explanation of how programs serving the handicapped define their target populations
- An explanation of how each program provides services for its target groups
- An explanation of where coordinative linkages currently occur
- An analysis of organizational incentives and disincentives to coordination
- An assessment of where and how coordination can most profitably occur.

Some of the information necessary for this analysis is available in the Federal Assistance Directory prepared by OHI; additional information can be found in publications prepared by the Office of Manpower and other Federal and State agencies. (See Appendix).

4. Analyze OHI's own capabilities and operating constraints to determine the kinds and number of activities which OHI can effectively pursue.

Each of these steps is essential to a determination of which strategy(s) will most effectively lead to the achievement of OHI's coordinative objectives.

Exhibit I-2, pages 8 and 9, presents a summary of the major features of the eight coordinating strategies discussed in the following sections of the paper. It is designed to assist the reader in making an assessment of the utility of each strategy for accomplishing specific coordinative objectives.

II. COORDINATIVE STRATEGIES

The eight strategies described below do not represent mutually exclusive categories. However, they do represent approximate groupings of activities which could be used to promote the coordination of Federal programs serving the handicapped. They are grouped into system levels based on a determination of where a Federal coordinative agency would tend to focus its activities. For instance, although Crosscutting Committees are prevalent throughout the service delivery system, including the private sector, a Federal agency would primarily use this strategy to coordinate Federal activities. The Lead Agency model and Interagency Agreements are also assigned to this category because the primary interaction between the coordinating agency and other agencies takes place at the Federal level, even though the arrangements may be duplicated at State and local levels.

The other strategies, Advocacy, Information Dissemination, Coordinative Planning, and Ad hoc/Informal Methods, are primarily supportive of coordinative efforts at the State and local levels. This classification is helpful in determining at what system level coordination, to meet a specific objective, would be most helpful.

STRATEGIES SUPPORTIVE OF FEDERAL LEVEL COORDINATION

Lead Agency Model

Normally, when two or more agencies engage in coordinative efforts, one of the agencies will emerge as the lead agency. This may occur through designation or agreement. Frequently, however, it occurs naturally when a stronger agency fills the vacuum.

This phenomenon of organizational dynamics has merged with the need for effective coordination of different programs serving specific target groups. Virtually all coordinative activities undertaken by an agency place that agency in a lead or "convener" position.

General Description and Purpose. According to the Advisory Commission on Intergovernmental Relations, lead agencies are intended to bring related activities into a single organization and thus promote coordination in their operation (ACIR, 1977).

Most of the agencies within the Office for Human Development (DHEW) can be considered lead agencies because they coordinate programs and act as advocates for the target groups they represent. Their ability to "lead," however, depends on individual leadership

and staff capabilities within each agency, funding levels, expressions of Secretarial or Presidential interest, and the agency's legislative mandate.

A coordinating agency may also exercise the lead role by providing oversight and review for agency-proposed legislation, regulations and guidelines on a regular basis. Although critics regard this approach as a basically passive activity which generates additional paperwork and delays, there is little doubt that the careful development of standards and guidelines can prevent operating difficulties at later dates.

The Office of Economic Opportunity (OEO) was created in 1964 by the Economic Opportunity Act to marshal forces for the "War on Poverty" in an attempt to develop an institutional mechanism in the Executive Office of the President for the coordination of assistance. OEO used five separate strategies to coordinate poverty programs: Interagency agreements; national anti-poverty planning to eliminate poverty by 1976; creation of the Economic Opportunity Council, an interagency committee; program delegation by which OEO was to retain policy responsibilities while delegating operating responsibilities; and preference procedures to establish priorities for Federal aid. Recent assessments of the OEO experience indicate that the coordinative effort was largely unsuccessful, and that virtually none of the five coordinative strategies worked as effectively as had been anticipated (ACIR, 1977).

The Administration on Aging (AoA) has been assigned lead responsibility for programs serving the elderly in all areas of Federal programming. As part of that responsibility, AoA operates three programs:

- Grants for State and community programs on aging
- Research and demonstration projects
- Training projects.

AoA defines its functions as fostering the development of comprehensive and coordinated service systems which provide a complete range of programs needed by the elderly, such as supportive in-home services, transportation, nutrition and social activities.

AoA is exercising its lead agency responsibilities primarily through the establishment of an Aging Network at the State and area (sub-state) levels. Interagency agreements are negotiated at Federal, State, and area levels to support the Aging Network and to improve the coordination of service delivery to the elderly. AoA also uses crosscutting committees extensively and supports information dissemination activities at all levels. The Aging Network is supported by Federal funding for administrative, planning, evaluative, and coordinative functions. In addition, limited funds are available to support "gap-filling" services, including

nutrition and transportation projects. Extensive evaluation of AoA's Aging Network and Federal and State interagency agreements are currently underway.

The Office of Youth Development (OYD) has partially exercised its lead agency mandate by managing intradepartmental committees, and by developing a model data analysis format which will support OYD's efforts to play a more active role in reviewing legislation and standards affecting youth populations, and in proposing and supporting revised programs and legislation. (Information based on interview with Jeanne Weaver, Director, Youth Activities Division, Office of Youth Development, 12/12/76).

Implementation Requirements. The success of the lead agency model is heavily dependent on the lead agency's ability to develop bureaucratic power. Sources of this power include:

- Program research and development funds which can stimulate and support coordinative efforts
- Presidential and/or Secretarial support of coordinative activities
- Data supportive of coordinative efforts
- Local agencies which can implement strategies devised at the Federal level
- Legislative mandate.

Advantages. The lead agency model provides a clear assignment of responsibility for coordinative initiatives. In addition, the lead agency can easily assume responsibility for monitoring progress toward coordinative objectives.

Limitations. The lead agency is limited by the extent of its access to the power sources, or "clout," outlined in the Implementation Requirements section. In essence, the utility of the strategy is determined by the strength of the lead agency.

Conclusions. The lead agency model is not a good option for OHI unless it can gather additional resources to strengthen its position. Without substantial resources to contribute to a coordinative effort, it stands little chance of playing a lead role with other, more powerful agencies.

Interagency Agreements

Interagency agreements represent a formalized commitment on the part of two or more agencies to undertake mutually agreed upon activities. These negotiated agreements are designed to support coordinated planning, administration, and/or implementation

of agency programs. In most cases, the agreement itself represents the result of a coordinated effort by the interested parties.

General Description and Purpose. Interagency agreements represent a more formalized method of coordinating agency activities than purely cooperative efforts. The participants to the agreement negotiate responsibilities agreeable to each and then complete the agreement in an exchange of letters or memos, or in a standard "formal" interagency agreement format. The content ranges from expressions of mutual good will to precise specifications of exchanges of goods and services.

The Rehabilitation Services Administration (RSA) has negotiated agreements with both public and private agencies for over 20 years. National-level agreements are negotiated when a mutual need is seen by both parties, and are revised and updated as necessary. For example, an RSA agreement with the Veterans Administration was revised most recently in December, 1975. National agreements provide general guidelines for State program relationships. In some instances the agreements are supplemented by more detailed documents, often based on extensive studies, which elaborate on the nature of the arrangement.

The Administration on Aging (AoA) is using formal interagency agreements as a major coordinative strategy. At least 14 Federal-level interagency agreements have been negotiated with agencies in HEW and other Federal Departments and with independent agencies. The Federal-level agreements vary in format, length and specificity. This system of interagency agreement supports and complements the decentralized nature of the Aging Network.

Implementation Requirements. Interagency agreements require the recognition and development of mutual objectives by participating agencies. Negotiating skills and resources are needed to contribute to the agreement.

Advantages. Interagency agreements provide the following benefits:

- The agreements are voluntary and therefore can be relatively casually designed and altered to meet the needs of the particular situation.

- Although not legally binding, they are useful as models for State and local efforts. For instance, a Federal-level formal agreement between the Administration on Aging and the Office of Education for the use of schools as nutrition sites can be a stimulus for such cooperation at the local level. At the very least, it can remove the immediate assessment by local officials that such cooperation is "impossible."

- They designate potentially useful channels of communication.

Limitations. Several disadvantages of interagency agreements have been identified:

- IAAs can be formulated only in limited areas where the parties concerned desire mutual action
- IAAs cannot reconcile basic conflicts between participants
- If and when related objectives change, agreements are ignored
- IAAs are not legally binding
- Incoming personnel tend to disregard agreements developed by predecessors
- Action usually takes place at the State and local levels; Washington agreements merely open the door for possible interagency cooperation
- There is no method for repealing agreements when they are no longer useful
- There is little empirical evidence to suggest that voluntary agreements between co-equal agencies offer practicable means of coordination (Wise, 1976). However, the National Institute for Advanced Studies is currently evaluating the utility of such agreements for the Administration on Aging.

Conclusions. Interagency agreements appear to be useful means of encouraging coordination of service delivery programs at the local level. They are voluntary in nature, and depend on the goodwill and initiative of the participants. Interagency agreements are unlikely to be useful for OHI, however, because OHI has no operating programs or funds to contribute, and therefore no method of monitoring or encouraging implementation of such agreements. For this reason, attempting to negotiate formal agreements may be detrimental to OHI's advocacy efforts unless the Secretary of HEW or the President expresses substantial support of such coordinative efforts.

Crosscutting Committees

Crosscutting committees are one of the oldest and most prevalent organizational solutions to the need for coordination. In fact, the Bureau of the Budget estimated that in 1970 there were approximately 850 interagency committees. These and other crosscutting committees vary in function and purpose:

- The meetings of committees can be ad hoc, called at the pleasure of the committee chairman, or regularly scheduled

- The committees may be established to serve specific purposes or they may be formed essentially because it seems to be a good idea

- Committees may or may not be assigned support staff and separate funding

- Committees may or may not be expected to produce reports, recommendations or other projects.

General Description and Purpose. Despite structural and operational variation, all committees bring together expertise and representation from a variety of sources. A recent HEW planning staff study addressing the effectiveness of interdepartmental committees identified several objectives for the different committees it had studied. (Information based on interview with Harry A. Harr, Management Analyst, Office of the Secretary, HEW, 11/24/76). These objectives were:

- To assure necessary coordination while addressing department-wide issues

- To encourage information-sharing among participants

- To guide operating components in addressing department-wide problems including decisions on policy implementation and oversight responsibilities.

Analyses of why such committees fail to achieve their objectives focus on the nature of the committees themselves. Committees are composed of individuals of approximately equal standing, each representing a separate organization or constituency. Often, in fact, they are only intermediaries for their respective organizations with no decision-making power. Such groups are not suited to function as decision makers in areas of policy, implementation, and oversight. Rather, their capabilities lie in their ability to investigate, advise, make recommendations and exchange information and views. These are useful functions, provided such advice and reports are desired and used by an appropriate decision-making authority.

Implementation requirements. Generally speaking, the only effort required to call a committee meeting is to send out a memo. Much more effort is required to assure productive committee meetings, however. An HEW planning staff report recommended that the following procedures be observed in establishing crosscutting committees:

- Limit functions to advising, investigating, formulating recommendations and reports, and exchanging information and views

- Clearly state objectives, functions and duties of the committee

- Establish the committee under a clear authority from a departmental secretary, legislature, the President, or agency administrator

- Assign committee management functions to a lead agency and clearly define the authority of the chairperson

- Develop, at the initial meeting of the committee, an explicit agreement on the role and responsibilities of member agencies, and establish guidelines for reaching committee consensus

- The agency establishing a departmental committee should provide the chairperson and assume responsibility for committee meetings including provision of financial and staff support

- The lead agency should be responsible for working out financial commitments at the outset, and for planning and monitoring a budget cycle if necessary

- The document establishing the committee should specify a termination date

- A responsible officer outside the committee itself should periodically, at least annually, review committee charters and operations to determine the following:

    - Has the established time period for the committee elapsed?

    - Is the committee functioning effectively in moving toward the achievement of stated objectives?

Advantages. The major advantage of committees are their ease of formation. When a need for coordination is identified, a committee is established. Something has been done. Committees do provide a forum for sharing information, developing consensus, and identifying mutual objectives. They can also be very useful sources of advice.

Limitations. For all practical purposes, committees are limited in function to giving advice and making recommendations. With a great deal of effort, they can be goaded into determining policies which are based on consensus. They are not suitable agents for implementing policy or for decision making.

Conclusions. Harold Seidman summarized the prevalance of interagency committees by commenting: "Interagency committees

are the crab grass in the garden of government institutions. Nobody wants them, but everybody has them. Committees seem to thrive on scorn and ridicule, and multiply so rapidly that attempts to weed them out appear futile. For every committee uprooted by Presidents Kennedy's and Johnson's much publicized 'committee-killing' exercises, another has been born to take its place." (Seidman, 1976, p. 197).

Seidman justifies the existence of interagency committees as "the result, not the cause, of our inability to agree on coherent national objectives and to find a workable solution to our organizational dilemma." (Seidman, 1976, p. 197). Such committees provide an administratively appropriate "ground cover" of coordinative activities which perhaps explains their continuing presence.

Since OHI has limited resources, they could easily be consumed by ineffectual crosscutting committees. Therefore, this strategy has limited usefulness for OHI unless strong Secretarial and/or Presidential backing is obtained and a careful strategy is developed for managing committee activities.

Management by Objectives

General Description and Purpose. The Operational Planning System (OPS) is DHEW's management by objectives approach to management. In theory, it is a bottom-up system whereby agency objectives are first identified and defined within operating programs. These objectives are then submitted to the agency level where they are screened and refined to formulate overall agency objectives. Agency objectives are then submitted to the Office of the Secretary where a determination of Department-wide, Secretarial level objectives is made. Secretarial objectives are used in determining Presidential objectives.

Implementation Requirements. The following criteria are used in determining OPS objectives suitable for attention and tracking at the Secretarial level:

- Are the objectives crosscutting?
- Do the objectives require a large expenditure of resources?
- Do the objectives represent sensitive or highly visible issues?
- Do the objectives involve implementing (operational) activities? (Information based on interview with Harry A. Hadd, Management Analyst, Office of the Secretary, HEW, 11/24/76).

Objectives meeting some or all of these criteria become Department-wide or Secretarial objectives. In practice, an agency

desiring to initiate a Secretarial level objective must successfully complete the following activities:

- Determine a highly visible objective, preferably having the support of Congress and a constituency in the private sector
- Determine an area in which the agency should be, by virtue of its legislative authority or past activities, the lead operating component
- Determine a goal which will require the delegation of resources to the agency
- Determine a goal which directly impacts on service delivery: If the nature of the goal is primarily analytic or involves planning, it will be deferred to the Office of Planning and Evaluation's analytic agenda.

Advantages. The OPS can be a useful strategy for helping a coordinative office focus its own activities. If the political environment surrounding handicapped programs can be structured to engender strong support for a coordinated approach to the delivery of services to the handicapped, with specified objectives, the OPS system could be profitably used to orchestrate an HEW response.

Limitations. Some of the following conditions must exist before a crosscutting OPS objective can be successfully generated at the Secretarial level:

- Strong expressions of consumer support
- Strong expressions of Presidential and/or Secretarial support
- Existence of significant program funding
- Strong legislative mandate
- Staff capability to develop supportive coordinative efforts within the agencies involved.

Conclusions. Coordination is a voluntary activity. The successful implementation of new initiatives always requires a commitment from the various actors. The OPS recognizes this reality by attempting to develop a consensus on coordinative approaches before they are mandated by a higher administrative level. Many of the other Federal-level coordinative strategies discussed in this paper are essentially variants of this consensual process. In assessing the utility of the OPS as a coordinative strategy, OHI must determine whether it can obtain the substantial political and administrative support necessary for the successful development of

a major crosscutting initiative. This approach is time consuming, and requires a great deal of supportive staff work by the lead agency.

STRATEGIES SUPPORTIVE OF STATE AND LOCAL COORDINATIVE ACTIVITIES

Advocacy

The term advocacy refers to a wide range of activities which promote the interests of particular groups of individuals. Most of the strategies discussed in the paper are aimed at facilitating access to a wider range of services and opportunities for groups such as children, youth, the elderly and the handicapped. Specific techniques have been developed which directly impact on the provision of services for certain individuals or groups identified as needing extra assistance.

General description and purpose. The term "advocacy" is used two ways. In general usage it refers to the active espousal of support for particular causes, as practiced by the various national offices and lobbying organizations located in Washington, D.C. Formal advocacy programs are aimed at protecting the rights of individual citizens and assuring access to appropriate services.

The general advocacy activities of citizen groups can be described as "coalition building" in support of specific legislative and administrative changes. Individuals and groups with specific, specialized goals negotiate among themselves to identify common objectives which can be supported by a unified effort. For instance, many women's groups cooperated in support of the Equal Rights Amendment. The same kind of unified support has been provided by many handicapped groups for a civil rights act for the handicapped.

Effective formal advocacy programs use legal and administrative mechanisms to assist specific individuals and groups in gaining access to particular services and opportunities. The most effective formal advocacy programs have autonomy from service delivery mechanisms to avoid possible conflicts of interest. Freedom of access to all appropriate remedies is also essential in order to provide the program with sufficient authority to perform its function.

The literature search has provided data concerning five related forms of advocacy programs:

- Ombudsman
- Legal advocacy
- Citizen advocacy

- Class advocacy
- Coalition building.

Following sections discuss both general advocacy, or coalition building, efforts and formal advocacy programs.

Strategy Variations.

1. Ombudsman. The traditional model defines an ombudsman as a legally sanctioned officer who is operationally independent of both the legislative and executive branches. The individual ombudsman is ideally a nonpartisan expert, specializing in public administration, whose role is client-centered but not anti-administration. The ombudsman is charged with lodging citizens' complaints with the proper government administrators and working to achieve relief for those clients. The office, therefore, should be visible and accessible.

   The literature search identified working ombudsman structures in New Zealand, the State of New Jersey and the Rehabilitation Services Administration (RSA-HEW). Considerable variation in purpose and administrative structure is represented by the three ombudsman programs. They require legislative authorization to counteract the considerable agency hostility which they encounter; but when carefully structured, the ombudsman approach appears to be effective in redressing inequities and exposing administrative and legislative actions which inhibit the effective delivery of services to consumers.

2. Legal advocacy. The question of the legal rights of disabled persons arises when efforts to secure services and consideration place demands on limited resources. A willingness to represent the interests of handicapped individuals in court is essential to the pursuit of lasting relief.

   It is important to recognize when discussing legal advocacy, that Congress intended Section 504 of the Rehabilitation Act to be construed as a civil rights package for the handicapped. The Act reads:

   > "No otherwise qualified handicapped individual in the United States, as defined in section 7 (6), shall solely by reason of his handicap be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." (Villing, p. 19).

   There is little room for creative interpretation in the Section. The intent of this piece of legislation is

The Ohio Legal Rights Service (OLRS) was established in 1975 as part of the 1974 Bill of Rights for Mentally Retarded Individuals (Senate Bill 336). OLRS was created and funded by the State legislature, to which it is directly accountable. The OLRS has three basic functions:

- To act as an ombudsman for institutionalized individuals
- To make certain that all persons within its jurisdiction are informed of their rights
- To guarantee adequate representation of individuals involved in commitment proceedings, and those attempting to secure rights through courts.

The Service is independent of other State agencies and has the power to become involved in litigation on behalf of its clients. In essence, the Service becomes extensively involved (beyond the point of offering advice or providing referrals) only in cases which are likely to impact on the class of institutional individuals as a whole.

5. Coalition building is a strategy used by special interest groups to create a united front in support of certain legislative and policy initiatives. It involves the conscious definition and development of issues which will appeal to a wide base of support, and the negotiation of certain issues with the groups involved to maintain and support the coalition. For instance, the 1961 White House Conference on Aging was able to use the Medicare issue as a catalyst for organizing older citizens in support of programs for the elderly. Advocacy agencies can encourage the development and coordination of interest groups which will support major policy initiatives by funding State and local advocacy agencies and by disseminating information.

Implementation Requirements. The literature search has revealed two consistent requisites for an effective formal advocacy program:

- Independence from service delivery mechanisms to avoid the problems of conflicting interests
- The power to enter into litigation on behalf of a client or client group to allow for the pursuit of all appropriate remedies.

The power to seek judicial recourse is as important in its effect, the promotion of cooperation, as is actual litigation. Implementation of formal advocacy programs at the Federal level by OHI

would require legislative authorization and strong political support. OHI could support such initiatives at the State and local levels by disseminating information about advocacy activities and/or providing grant monies to local programs.

OHI is currently involved to a limited degree in coalition building activities. It could increase its activities in this area by focusing on particular initiatives and systematically building a base of support for them. The Seminar on Coordination can help focus OHI's coordinative activities, and the White House Conference on Handicapped Individuals provides an opportunity for determining the support of OHI's handicapped constituency for these initiatives.

Advantages. Advocacy may represent the only way certain groups can gain full access to the rights and privileges enjoyed by other members of society.

Limitations. Formal and legal advocacy efforts require enabling legislation and funding. Effective coalition building is dependent upon OHI's ability to orchestrate support for a common objective in the handicapped community.

Conclusions. Formal and legal advocacy are not options unless OHI obtains enabling legislation. Coalition building efforts can easily dissipate unless objectives are carefully identified and systematically encouraged.

Information Dissemination

General Description and Purpose. Different methods of coordinative information dissemination were identified in the literature search. For instance, conferences are widely used to bring together individuals from a variety of backgrounds to discuss common problems as a first step toward establishing coordinative linkages.

The need for local-level service coordination has been made less acute by the provision of information centers in many States and communities. These centers gather information about available services and provide it to consumers in an accessible format. Systems may be as simple as an indexed card file in a social services office. Others, such as those used by many area agencies on aging, consist essentially of published directories. Some are highly systematized, such as the SCRIP (Statewide Computerized Referral Information Program) in New Jersey for the developmentally disabled.

Various modes of information dissemination, often under the general rubric of "information clearinghouses" have been developed to disseminate specialized information to a widely dispersed audience. Clearinghouse activities include abstracting documents; publishing specialized bibliographies, journals, newsletters,

services. Effective performance of these functions can, in some instances, reduce or eliminate the need for coordinative mechanisms at the Federal level (Seidman, 1970).

Federal government involvement in local coordinated planning activities consists of promulgating regulations requiring coordinated planning, providing technical assistance and training, and developing planning models and materials.

The coordination of planning has been promoted in several planning areas, including social services, manpower training programs, and within the Office of Developmental Disabilities. For instance, HEW Region X has produced "A Decision-maker's Guide to Program Coordination and Title XX," which systematically addresses the various factors involved in coordinated planning for human services at the local level. In addition, a great deal of material is being prepared for block grant programs by private consultants under contract with HEW.

A set of guides prepared by the Office of Manpower for the Comprehensive Employment and Training Act (CETA) and DHEW programs provides considerable detail about major DHEW programs. The caveat that a complete understanding of the other programs' operating conditions is required before coordination can occur is frequently repeated. These guides present a straightforward approach to analyzing the inhibiting and facilitating aspects of the many alternative approaches to coordination.

The Office of Developmental Disabilities has taken the process one step further by preparing a comprehensive planning guide for use at the State level. It presents a series of alternative secondary sources available at the State level which can be used to complete each data set. The model was designed primarily to be applicable for use at the State level as an advocacy document for the developmentally disabled, and only secondarily for use by the Federal Central Office as a data and monitoring source. (Information based on interview with Frank Leonard, Evaluation Specialist, Office of Developmental Disabilities, 12/8/76.) However, the State plans will eventually be aggregated at the Federal level to provide a national data base.

Advantages. Ideally, coordinative planning will further rationalize resource allocation at the State level. Coordinative planning will therefore be advantageous for groups currently receiving less than their deserved share of available resources.

Limitations. Coordinative planning will be resisted by programs receiving more than a "fair" share of available resources. Because of advocacy requirements, the consumer groups conducting the most effective lobbying campaigns may receive more benefits. Coordinative planning does not always take

into account the difficulties encountered in implementing the coordinated plan, and needs to be tied to the budgeting process. It requires a lead agency at the State and local levels to perform the required planning activities.

Conclusion. In the human service programs serving the handicapped, a major purpose of planning is advocacy. Evaluation of the utility of such plans must focus on the increased access of client populations to more and better services. Plans expected to play an advocatory role at the local level must be designed to meet State and local management planning requirements.

The preparation of more planning guides and requirements should be carefully considered in the face of State and local frustration with red tape. The attitude of State officials toward increased planning requirements can, perhaps, best be summarized by a comment from Washington Governor Daniel Evans:

> "It's time the Federal Government set performance standards for the states and stopped issuing how-to-do-it guidelines and booklets. In other words, in blunt terms, get off our backs. We can do many jobs better while accepting fewer Federal dollars if you'll just give us the administrative flexibility." (HEW Region X, "Ties That Bind," p. 2.)

Ad Hoc (Informal) Methods of Coordination

Formal coordinating mechanisms are time consuming and results are frequently inconclusive. Often true coordination can be achieved only by going outside formal administrative processes. In fact, the need for formal coordination can be precluded by the conscientious development of informal mechanisms. Harold Seidman commented:

> "By overemphasizing coordinative mechanisms we have created the false impression that most Federal activities are uncoordinated. This is by no means the case. Without informal, or so-called 'lateral' coordination, which takes place at almost every level within the Federal structure, the government would grind to a halt." (Seidman, 1976, p. 196.)

General Description and Purpose. Informal methods of coordination are defined here to mean methods which are not sanctioned or mandated by any specific rules, regulations or formal agreements. Although informal approaches are entirely ad hoc, they can be deliberately pursued as coordinative mechanisms.

The development of an informal communications network is dependent on the development of interpersonal relationships among staff members of different organizations. The network passes information to interested and concerned members, who develop a sensitivity to the special needs of other groups needing services and a knowledge of different agency approaches to service delivery.

Network members "sensitized" in this manner are less likely to develop programs which exclude or discriminate against network agencies' target groups.

A more structured approach, "cooperation," involves the conscious development of opportunities which the coordinating, or advocacy, agency can use to actively provide assistance to another program. Personal relationships are developed among staff members of different programs, and when a need is expressed which can be met by the coordinating agency, an offer of assistance and cooperation is made.

The most structured informal approach, the provision of technical assistance, is used by agencies with a mandate to coordinate. HEW's Office of Manpower, for instance, provides technical assistance to programs developing coordinative linkages.

Implementation Requirements. Informal methods of coordination require a staff dedicated to program purposes and willing to devote the extra effort required to systematically pursue coordinative links with other agencies. The coordinative agency must have something to contribute to the effort, whether it be expertise, funds, or other resources. Usually, these resources must be relatively freely given, since there is no official recognition or tabulation of benefits received.

Advantages. Cooperative modes of coordination, skillfully employed, can often succeed where more formally negotiated methods fail, since the cooperative agreement can be tailored to meet the needs of each situation.

Limitations. Relatively unstructured informal methods are not suitable for establishing major new approaches or initiatives, or for reversals of agency policies. Because the process is incremental and builds on previously established relationships, it flounders when there is high staff turnover or little commitment to the program of either agency. Since most informal coordinative efforts are, by design, indirect, they are dependent upon a supportive administration which understands their utility and is willing to commit the necessary time and resources to their completion. This commitment is less likely to occur in an agency with major operating programs; it is more frequently encountered when agencies and offices with relatively little influence desire to facilitate the access of special groups to operating programs.

Conclusion. Informal methods of coordination seek to establish a sensitivity on the part of decision-makers and planners to the needs of special groups and the opportunities available for coordination. Because it is difficult to formally negotiate, legislate or regulate the development of such an awareness over the full range of service programs, advocacy groups and coordinative offices frequently attempt to develop it by informally

providing technical assistance to other agencies. By developing awareness, it is hoped that other programs will become less exclusionary, more accessible to a wide range of the population, and more open to the use of coordinative mechanisms to overcome gaps, duplications and contradictions in the service delivery patterns. Informal linkages may pave the way for the institution of more formal methods, such as interagency agreements, and joint program funding and research efforts.

III. FACTORS INFLUENCING CHOICE OF COORDINATIVE STRATEGY

Certain aspects of the Federal system influence the utility of various coordinating strategies. Two major factors were identified in the literature search as affecting strategy choice:

- Decentralization and reorganization of the granting system
- Federal managerial approaches.

A brief discussion follows of how such factors relate to the development of a coordinative strategy for coordinating Federal programs.

DECENTRALIZATION OF THE GRANTING SYSTEM

General Description and Purpose

During the Nixon administration, an effort was made to decentralize many Federal programs. The rationale was that the Washington, D.C. offices were too large, complex, and distant from implementation sites to effectively administer Federal programs. As a result, initiatives such as the following were instituted:

- Grant consolidations: Block grants consolidated some project and formula grant programs, placing greater responsibility on State and local governments for deciding how funds should be allocated in the areas of manpower, social services, law enforcement and health planning.
- Decentralized agency models such as the Administration on Aging were developed; and an Aging Network was developed consisting of local (area) and State Agencies on Aging.
- Ten Federal Regional Councils were established and given responsibility for initiating intergovernmental activities and coordinating grant administration.
- General revenue sharing was initiated.

The granting system in many ways defines how the Federal government designs its assistance programs. Alterations can be made to provide significant coordinative incentives.

Relationships of Changes in Granting System to Coordinative Objectives

In addition to a consideration of how handicapped programs can coordinate with existing decentralized programs, the option of consolidating programs serving the handicapped should be considered. When programs are consolidated with block grants, the responsibility for assessing needs and planning services rests on local level officials and managers. Accountability may be focused there as well, although monitoring responsibility is retained at the Federal level. As a result, national and Federal level advocatory efforts provide information and technical assistance to the localities and States as they attempt to influence local service programs. Advocacy efforts related to overall funding levels continue to be appropriate at both Federal and State levels.

Basic changes in the granting mechanism can significantly alter both the existing incentives and impediments to coordinative service delivery. Generally speaking, an advocatory agency can affect the granting mechanism only by marshalling support among its clientele -- consumers and programs -- for the changes it advocates. A focus on these broad initiatives would only be justified if the White House Conference on the Handicapped and the OHI Coordination Seminar identify granting mechanisms and procedures as major impediments to coordinated service delivery, thereby justifying a major alteration in the granting system.

Some narrower changes in the system, which would directly affect the target group of handicapped individuals, could be feasible. These changes, however, would require strong support from either the White House, the Secretary of HEW, or powerful legislators.

Changes in the grant system designed to favor handicapped individuals would have to provide either a "stick" or a "carrot" as an incentive to program agencies. The stick could involve invoking some sort of penalty against agencies which do not meet specified guidelines regarding services to the handicapped, such as a five per cent cut in Federal appropriations when guidelines are not followed. Perhaps a more beneficial approach is to change the grant planning system to provide benefits, or "carrots", to cooperating agencies by providing positive inducements to putting the handicapped in a favored status. Such inducements might include placing services to handicapped individuals outside the Social Services' Title XX ceiling. This change would allow the many States at the ceiling level to provide additional services to the handicapped.

In addition, money designated for services to the handicapped might be converted to "wild card money," i.e., Federal money which can be matched against Federal money. This procedure has been used in the Model Cities and Community Development programs.

The examples cited indicate a few of the potential changes which could be made. They are presented as examples to stimulate thinking, and not necessarily as recommendations. They do illustrate, however, the fact that it is possible to make fundamental changes in the granting structure which can support OHI's coordinative efforts and the target group of handicapped individuals as a whole. The extent to which the grant planning system can be shaped into necessary "carrots" or "sticks" will, in the final analysis, be a function of the clout which OHI can generate to support its goals and objectives.

FEDERAL MANAGERIAL APPROACHES

The managerial philosophies employed by the Federal government influence the choice of strategy for coordinating Federal programs. One approach promised by the Carter administration, Zero-Based Budgeting (ZBB), focuses on a periodic re-examination of the entire budget rather than the current practice of closely examing only the proposed increments.

Zero-Based Budgeting

General Description and Purpose. Zero-Based Budgeting is a resource allocation strategy. The theory is straightforward; the entire budget of each agency must be justified and approved during the budget review period, rather than subjecting only budget increments to close scrutiny. This approach emphasizes the importance of articulating the relative priorities assigned to expected program outcomes through the assignment of resources. In this manner, resource allocation decisions, both within and among programs, can be made in terms of the values assigned to the intended outcomes.

Relationship of Zero-Based Budgeting to Coordinative Objectives. A full implementation of ZBB would potentially enhance the effectiveness of coordinative strategies. As noted, ZBB forces an examination of a program's "base" budget, i.e., the current ongoing rate of total funding, in contrast to simply examining the value expected from proposed increments. This "dissection" of the base budget in terms of its assignment to various program outcomes carries with it an examination of the value of those outcomes in relation to alternative resource uses. It is at this point that various coordinative strategies, carrying with them proposed alternative uses of the funds, could impact on improving public responses to the needs of the handicapped. In short, ZBB opens up program base budgets, and the past resource allocation decisions embodied in them, for examination and possible alteration to accommodate changing public needs.

This change in responsiveness should have major implications for OHI. Its advocacy role in defining and documenting program deficiencies should be strengthened since there will be more

opportunities to impact on Congressional budget hearings. The importance of advocacy efforts in the private sector in support of budgetary priorities should also be increased.

IV. CONCLUSIONS

The coordination of Federal programs is by nature the most bureaucratic of tasks. It is heavily dependent on the development of working relationships and the identification and negotiation of mutual objectives by the agencies participating in coordinative ventures.

The first and most important step in developing a coordinative model for OHI is the identification, in specific operating terms, of a coordinative objective. This objective should reflect major coordinative issue areas receiving attention in the private and public sectors. The objective(s) should be tailored to reflect OHI's ability to generate support in the political and administrative system. A small, successful effort provides a working base for larger future accomplishments. Political and administrative support includes factors such as Secretarial and/or Presidential support and interest; support by public and private interest groups; and the availability of necessary resources -- funds, managerial skill, expertise and/or operating programs -- to contribute to the coordinative venture.

As a second step, the prerequisite roles and responsibilities of each major agency which must participate with OHI in achieving the objective should be carefully defined.

The third step involves a careful and complete assessment of the operating environment of all affected agencies to determine where coordinative linkages presently occur and how additional linkages could most effectively be developed. This assessment is of critical importance in choosing a successful strategy of coordination.

These assessments will establish the criteria to be used in determining appropriate strategies for inclusion in a coordinative model for improving service delivery to handicapped individuals.

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INDIVIDUAL PARTICIPANT COMMENTS ON SEMINAR PROCEEDINGS

The following comments were submitted following the seminar, after the participants completed a review of the draft proceedings.

Comments by George Fellendorf, Executive Director, Alexander Graham Bell Association for the Deaf:

I continue to doubt the usefulness of a National Information Center for the Handicapped. Why not invest in the existing voluntary organizations -- maybe even support their access to a computer-based information system such as the Notre Dame Center and Pittsburgh Law Center. But let's not set up more massive Federal systems to do what the voluntary organizations have been trying to do for years with inadequate funding.

Comments by Jayne Shover, Executive Director, The National Easter Seal Society:

In general, the recommendations tend to focus on what the Federal level should do, forgetting that the community, and to some degree, the State level are where action frequently occurs. There seems to be entirely too much preoccupation with one level of government, i.e., Federal. We have only to review EPSDT and Medicare to see how local communities and individuals at the service level can emasculate programs.

Two of the recommendations are unrealistic and reflect little recognition of what is. One case in point is the recommendation for an office for handicapped in the White House, thereby extending downward through the government bureaucracy at all levels. The cost of such a network was not discussed (we never did discuss costs) but I believe the Federal cost could reach roughly $10 to $25 million.

Comments by Frank Withrow, Special Assistant to the Deputy Commissioner, Bureau of Education for the Handicapped:

There were a number of widely diversified discussions among the members of the Federal Practices group. The group decided to expend its energies on six basic issues areas:

- CONSUMER BASED PROGRAMMING
- AUTHORITY
- COOPERATION/BARRIERS
- LEADERSHIP
- COMMUNICATIONS
- INTERAGENCY COORDINATION

The group discussed briefly each area but made its strongest

and most detailed input in the area of Consumer Based Programming. The strategy ultimately developed was the creation of a Special Assistant to the President for the Disabled. In addition, the group desired that a Presidential Council for the Disabled be established which would subsume the authority of all advisory committees such as PCMR, DD Councils, NACH, and other committees formed for the advancement of disabled persons. A strong recommendation was made that the membership of all such groups serving under the authority of this umbrella group include a majority of members chosen from the ranks of the disabled. Each Cabinet member should have a special assistant for the disabled on his or her top staff. Sufficient staff power should be assigned to these positions to assure that a reasonable effort is made to fully implement the total program.

Full staffing details of the program were not developed by the working group. Therefore, I will outline the personnel and management resources required to implement this program. (See Exhibit 1, page 6.) In addition, I suggest possible alternative strategies.

I feel these recommendations were made under the assumption that the White House Conference on the Handicapped will establish a single over-arching first priority, which is THAT A NATIONAL PRIORITY FOR THE HANDICAPPED BE ESTABLISHED TO ASSURE ALL HANDICAPPED INDIVIDUALS THE FULL AND EQUAL RIGHTS GUARANTEED TO ALL CITIZENS OF THE NATION FOR HEALTH, EDUCATION, EMPLOYMENT, TRANSPORTATION, HOUSING, AND IN GENERAL THE RIGHT OF THE FREE PURSUIT OF LIFE, LIBERTY, AND HAPPINESS.

Discussion

How can such positions and advisory panels impact upon the staff and line operations of the agencies involved in programs for the handicapped? Even with an evaluation component which would provide more accurate feedback about agencies' successes in meeting their individual goals, it is doubtful that much more than advisory impact will be developed through this type of activity. Program authority would have to be delegated to the Council from the legally responsible agents, i.e., the Secretaries, Commissioners, etc., in whom such authority is vested.

The practical world mitigates against this system, which has elements of window dressing and non-functionality. In short, it does not get at the leverage points which can allow changes within the system. It further seems to be in opposition to the stated priorities of President Carter, who has emphasized his desire to reduce the White House staff and to cut down on the number of Advisory Committees. My ball park estimates would indicate that such efforts would expand the level of advisory activities by at least $175,000 and also diversify their impact.

Exhibit 1

Budget and Staff Requirements

Staff Operation Special Assistant to the President for the Disabled

Special Assistant	GS 15-16		$40,000	
Support Staff				
Professionals (2)	GS 13	@ $30,000	60,000	
Secretarial (1)	GS 7-8		14,000	
(1)	GS 5-6		9,000	
Travel, publications, etc.			23,000	
				$146,000

Special Assistant to Cabinet Members

Special Assistant	GS 15	$36,000	
Support Professional	12	25,000	
Secretary	7	9,000	
Travel and miscellaneous		17,000	
		$87,000	

Total for 11 Departments		$957,000

Operating Expenses for the PRESIDENTIAL COUNCIL FOR THE DISABLED

17 Council members at 20 days each ($100 per day)	$34,000	
Travel, per diem, support, etc.	59,500	
Publications	25,000	
Contractual authority for third party evaluation	250,000	
Contractual authority for Public Awareness	250,000	
		$618,500

(It is assumed that the Special Assistant to the President will staff this Council.)

Coordination of existing Advisory Committees

(Budgets are gross estimates.)

PCMR	$ 750,000	
NACH	100,000	
NACED (not functioning at this time)	100,000	
DD Council	250,000	
PCEH	1,000,000	
Committee on the Arts	100,000	
		$2,300,000
TOTAL		$4,021,500

These are gross estimates and probably under estimate the actual expenditures if staff time, space, and other allocations required for staffing and management of such a program were included.

Alternative Suggestion Number 1

There is some merit to having a disabled person at a major policy level in each Department and OMB. Such staff could be employed via affirmative action plans to employ the handicapped. Budgeting for such positions and support activities should be between $90,000 and $110,000. These Special Secretarial Assistants, along with the operating heads of agencies serving the handicapped, such as the Commissioner, Bureau of Education for the Handicapped; Commissioner of RSA, NIH, etc., should make up a coordination planning board charged with interagency mission-based planning which crosscuts the various programs. Each agency in turn should develop all of its programs based upon CBP (Consumer Based Programming). This strong interagency planning effort, especially if it is tied to OMB activities through its representation on the Planning Commission, will be more likely to directly affect the operation of programs serving the handicapped since the legally constituted operating managers are a vital part of the interagency coordination and planning process. Such an interagency planning council can provide hearings, appeals, and program justification procedures. The council can also develop uniform systems for consumer participation in the development of policy, program, and project development. Participation by the consumer should be at all levels of development and operations if it is to truly affect the outcome of programs. While top-down impact with respect to broad general goals is a factor within the national program, it is not effective with respect to the day-to-day changes in priorities which are sought by the consumers.

In addition to the above strategy, all existing advisory committees on the handicapped could be merged into a single Presidential Council on Disabled Persons. In such a move, working task forces of existing staff of the advisory committee could be retained to maintain specific efforts with respect to education, employment, etc. This procedure would also subsume the Office for Handicapped Individuals and the National Information System. Such a system of information would require an annual expenditure of between $2.5 million to $3 million. However, the reduction in duplication of effort by the various advisory groups might balance this additional expenditure. Such an information system could tier information from the local, State, regional and national programs on any subject of major interest to handicapped individuals or their families with respect to health, education, rehabilitation, employment and general life maintenance.

Alternative Suggestion Number 2

Although the participants wished to retain programs within their respective institutional agencies such as education for the handicapped within the U.S. Office of Education, employment programs within the Department of Labor, and transportation programs within the Department of Transportation, there was an underlying theme of a need for a single agency. Taken to its logical conclusions, such an effort would ultimately lead to a Cabinet level Department for Disabled Individuals which addresses at a national level all of the needs of handicapped individuals from the cradle to the grave. Obviously, such a department would meet the goal of focusing on the handicapped person as a national priority. At the national level, the $20 billion to $25 billion estimates of expenditure might warrant the development of a single department. Certainly, a number of Departments have smaller budgets and probably less effect upon the target or constituent populations. Other nations have organized their Federal programs around such target populations. There have also been some efforts at State levels to organize programs around Offices of Human Development. These offices have seldom been organized around missions based solely upon the handicapped, but have broadened these missions to serve basically dependent persons. Such a marriage would in my opinion defeat some of the thrust of the handicapped population towards self sufficiency, since it would tie in too closely with disincentive programs within the welfare system.

Nonetheless, if major revisions and organizational changes should come to the Federal government, a single Cabinet-level program for the handicapped would at least be an alternative system worthy of discussion.

The disadvantages of such a Department are obvious in that handicapped programs would be separated from their traditional institutional roles within existing agencies such as State Departments of Education, Health Agencies, etc. To fully understand the implication of such a radical reorganization, a careful weighing of the advantages of the present system and the disadvantages is required. Current programs are not mission-based with respect to consumer or target populations, but to societal organizations and institutions such as education, health, and welfare. In a period of radical reform in Federal and State organizations, departmental missions might be more effectively defined in terms of humane clusters of needs and target populations to prevent duplicative and nonsensitive programs. A prime example of a non-related disincentive occurs when some medically dependent people lose their medical benefits as soon as they start to work. In a single department, such disincentives would be less likely to occur.

There was considerable discussion in the group of a need for Public Awareness with respect to handicapped individuals. Time did not permit a complete development of this area of interest. It has often been said that the handicapped are the current CIVIL

RIGHTS group fighting for equality. To a certain degree, this is true. Therefore, we can learn from the struggles of other minority groups in moving toward a system of public awareness and acceptance of the handicapped. One must ask what the effect upon the black struggle for equality would have been if the television epic ROOTS had been available in 1954 immediately after the Supreme Court Desegregation Decision. Obviously that was a different time with a different level of technological availability. However, it is possible today to develop a mass media program that is as positive as ROOTS. The impact of such public programming can break down more walls than any amount of Federal programming. It can establish the rights of the handicapped as equal members of society, rather than as recipients of the charity due the unfortunate few to salve the consciences of the able bodied.

OFFICE FOR HANDICAPPED INDIVIDUALS
SEMINAR ON THE COORDINATION
OF PROGRAMS SERVING THE HANDICAPPED

For the White House Conference on Handicapped Individuals

January 23-25, 1977

Sheraton Inn
11810 Sunrise Valley Dr.
Reston, Virginia 22019
(703) 620-9000

AGENDA

Sunday, January 23

5:00 - 7:00 p.m.	Registration and Cocktails (Cash Bar)
7:00 - 8:30 p.m.	Dinner
8:30 - 9:30 p.m.	Initial Work Group Session

Monday, January 24

8:00 - 9:00 a.m.	Breakfast with Work Groups (Reserved Area in Dining Room)
9:00 - 10:00 a.m.	Speaker: Intergovernmental Coordinative Problems - David B. Walker, Ph.D. Assistant Director Advisory Committee on Intergovernmental Relations
10:00 - 12:30 p.m.	Work Groups
12:30 - 1:30 p.m.	Lunch (Reserved Area in Dining Room)
1:30 - 2:30 p.m.	Speaker: Private - Public Interrelationships - Edward V. Roberts, Ph.D. Director, California Department of Rehabilitation
2:30 - 5:30 p.m.	Work Groups
5:30 - 7:30 p.m.	Dinner (Reserved Area in Dining Room)
7:30 - 8:30 p.m.	Panel Presentation: Federal Practices Panelists: - William M. Eshelman, Assistant Commissioner for Special Programs Rehabilitation Services Administration - Edwin W. Martin, Acting Deputy Commissioner, Bureau of Education for the Handicapped

Agenda (cont.)

Monday, January 24

7:30 - 8:30	- William R. Feezle, Chief Field Operations Branch Office of Management and Budget Moderator: - Fred Fay, Ph.D., Director of Research, Tufts Rehabilitation Institute

Tuesday, January 25

8:00 - 9:30 a.m.	Breakfast Meeting with Work Groups
9:30 - 10:30 a.m.	Speaker: A Consumer's Viewpoint - Harold E. Krents Surrey, Karasik and Morse
10:30 - 11:00 a.m.	Charge to Participants - Jack Smith, Executive Director White House Conference on Handicapped Individuals
11:00 - 1:00 p.m.	Work Groups
1:00 - 2:00 p.m.	Lunch
2:00 - 3:00 p.m.	Reporting Session

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