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Editorial

In most civilized countries in the world, there is a well established social security program for elderly citizens, as well as those with disabilities who cannot work. The overriding concept behind any of the social security systems, regardless of the country, is to provide a financial support system or 'safety net' to help protect those citizens who are less able to take care of themselves or those individuals who have reached the age of retirement and are eligible to receive what is, in effect, a small government pension. It is important to realize that different countries approach the philosophical bases of a social security program in a different way. Some countries, for example, view social security clearly as a pension for all citizens, where other countries view social security more as a means of helping less affluent older citizens or those who have disabilities.

In the United States, social security has become an enormous program financially, and perhaps the one that is the most discussed politically. Because millions upon millions of citizens in the United States receive some form of benefits, or will receive some form of benefits at some point in their life, social security has become an extremely important issue for politicians and federal policy makers to study, discuss, analyze, and consider when funding decisions are made. In the field of vocational rehabilitation, social security has not received anywhere near the amount of attention that it should have received. In fact, only a small percentage of persons who receive social security disability insurance or supplemental security income are successful vocational rehabilitation applicants. Therefore, there is an enormous population of people receiving Social Security funds in the United States that are not

benefitting from the vocational rehabilitation expertise that is available.

While it is not the purpose of this issue to discuss or resolve the issues between vocational rehabilitation and social security in the US, it is the purpose of this issue to delve much more deeply into the whole area of social security programs. Therefore, I have invited Aaron Prero¹, who is a leading research and policy analyst for the US Social Security Administration, to head up an issue that directly pertains to major Social Security points that are of concern to people in the United States. It is my strong suspicion that many of these issues which we are grappling with in the US on Social Security programs are very germane to other major countries in the world such as Australia, Canada, France, Germany, United Kingdom, Ireland, Spain and the Netherlands. Overwhelmingly, the major amount of dollars which society in each country commits to areas of vocational and physical restoration can usually be found in Social Security programs, not in the context of rehabilitation, but in the context of income support. The challenge that is in front of modern day society in these countries is how to extract, transfer, or reallocate some of these funds into the vocational, medical, and physical rehabilitation of people with disabilities so that they are no longer dependent on social security income for the rest of their life. What clearly drives up the amount of money that is expended is not income support for the short term, but life long funding support. In the US, as some of the papers in this

¹The editorial discretion exercised by Prero in the presentation of the articles in this issue represent his own professional judgement and not the position of the Social Security Administration.

issue will show, people generally do not get off the social security rolls once they are placed upon them.

The issue that Aaron Prero has put together has taken more than a year to develop and he has involved some of the leading writers on social security in the United States today. While some of the material is lengthy and quite technical, this is essential reading for anybody who is interested in how to better control social security expenditures, not only in the US, but in other parts of the world. There are some incredibly astounding data and patterns of expenditure projection which are,

to say the least, alarming and will need to be reversed.

I am extremely grateful to Aaron Prero and the contributors for the amount of time and effort they put into this excellent and timely issue. I believe it will be of significant value to many individuals working in the field of disability and health policy, rehabilitation, psychology, and special education, who know relatively little about the way that Social Security programs work in the United States.

Paul Wehman