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THE PUBLIC ASSISTANCE WORKER

HIS RESPONSIBILITY TO THE APPLICANT,
THE COMMUNITY, AND HIMSELF

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FOREWORD

THIS volume is designed for the use of workers in the field of public assistance and is primarily concerned with the ways in which aid may be given. Its theme is that people in need differ markedly one from another and that only by individualization can the various processes in the granting of assistance be made effective. Its emphasis is on the "human" rather than the routine aspects of the service rendered.

A family to whom relief has become a necessity presents needs beyond those that can be met by a mere grocery order. Dependent children challenge our resourcefulness with individual problems of physical health, mental attitudes, social relationships, character development. The aged and handicapped are more than "cases" on an allowance roster. As Fred K. Hoehler said in a recent issue of *Survey Graphic*, "There is a growing realization on the part of officials and public alike that behind the figures and the charts of the public assistance programs are anxious bewildered people, people even as you and I." Sometimes these simple truths are lost sight of by workers overburdened with the more formalized requirements of their jobs. This volume stresses their observance as the very basis of good social service administration.

The editor and authors have not been unaware of the

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difficulties presented by the attempt to treat so vital and complex a subject in a book of this size. By way of justification there may be cited the almost utter lack, in the literature of social work and public welfare, of similar brief analyses designed to help the new assistance worker "find" himself in a task for which he may have had no previous preparation. It is hoped that the present effort will succeed at least in opening doors and pointing the way to growth through further reading and study.

RUSSELL H. KURTZ

Editor

January 15, 1938

I

PUBLIC ASSISTANCE IN THE UNITED STATES

ALL human beings have certain basic physical requirements of which the need for food, clothing, and shelter are the most elementary. Not all, however, are able to satisfy these requirements through their own efforts. Children are natural dependents; we expect that they will be cared for by their parents until they are of an age to become wage-earners and to make their own way. Aged persons who cannot support themselves comprise another group of natural dependents.

Moreover, in practically every community there are other dependent persons who do not fall in these groups. A miner may be killed in an accident, leaving a widow and children with barely enough to cover his funeral expenses. A wage-earner may develop tuberculosis and require treatment in a sanitarium for months or years. An aged woman, relying upon small investments for a modest income, may have this source of support wiped out by a business failure. An unskilled worker may toil for a lifetime at irregular or underpaid work, and find himself at last without means of subsistence because he has become

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too infirm to hold a job any longer. Still others are prevented from working by blindness, by disabling crippling conditions, or by mental illness, mental defect, or serious maladjustment of personality. Families may be rendered homeless and penniless by the sudden disaster of fire, flood, or tornado. Above all, men and women who are eager to earn their own way may be unable to obtain work anywhere and may thus become dependent through prolonged unemployment.

In these and similar situations where normal means of subsistence fail, the community itself or some group in the community, actuated by humanitarian impulses, must play the "good neighbor." Those who are in need must be aided, whether by some private group—such as a voluntary welfare agency, church, lodge, or labor union—or by some agency of government through "public assistance." It is this latter type of aid which we wish to consider here.

Public assistance, as used in this discussion, is synonymous with the older term "public relief" and means aid given from public funds to persons in need. There are various kinds of public assistance in operation today, to be described later. Before going on to a discussion of their similarities and differences let us look first at the way in which public assistance has come down to us on the current of that living stream of human experience which we call history.

If one looks at the whole sweep of the story of public assistance in America, it is possible to discern four periods of development which, like other historical periods, are

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not sharply marked off from each other. These are as follows:

1. The interval from colonial days to about 1909, during which "poor relief"—through almshouse care and "outdoor relief" to families in their homes—was the prevailing type of public aid. During these years there was, however, a gradual withdrawal of certain groups from the almshouses and provision of specialized types of care for them. In the latter part of this period, starting about 1877, came the beginnings and growth of the "charity organization" movement, with the establishment of those voluntary agencies which were the precursors of our modern family welfare societies.

2. The years from about 1909 to 1929, which were marked by the rise of "category relief," or relief to special groups in their own homes.

3. The depression period from 1929 to about 1936, when unemployment relief was the focus of attention in the field of public assistance and when it was, in fact, one of the central features of American life.

4. The contemporary period, beginning about 1936, which has thus far been characterized by the initiation of the social security program and a widespread reorganization of public welfare in many states.

BEGINNINGS OF PUBLIC AID IN AMERICA

When the English colonists came to settle in the New World they naturally brought with them the ideas and patterns of government to which they had been accustomed in the mother country. Thus the English poor relief system was transplanted to the American colonies and became the basis for American public relief practice. The

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English system, as established in the Elizabethan Poor Law of 1601, recognized the principle of public concern with the relief of destitution, defined the dependent classes, set up local governmental machinery for relief administration, and outlined the methods of relief. It combined two quite different social purposes, however. "One was the humanitarian impulse—'a decision by the people that no one in their midst should be allowed to starve.' United with this was a grim intent to deter vagabondage and dependency through more or less punitive measures. This impulse toward deterrence and coercion has perhaps been an element more insistent than the humanitarian impulse in the evolution of the early English poor relief system from which the American system was originally derived."¹

During the eighteenth century and the first half of the nineteenth, Americans were busy with the conquest of the wilderness and the building of a new nation. It was a time of rugged individualism. A society composed of pioneers throwing all their energies into pushing back the forest, foot by foot, wresting a living from a new country, and laying the foundations of a democratic government, had little time or inclination to concern itself with poverty and failure. As long as the frontier existed there was an outlet for the man or the family who could not "get along" in the more crowded eastern communities; and the opportunities of homesteading in the West, up to

¹ Family Welfare Association of America, *Governmental Relief: The Report of a Pathfinding Study*. 104 pp. 1932. Mimeographed. Page 8.

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almost the end of the last century, prevented the development of any great stationary problem of mass poverty.

But despite these factors, larger numbers of people found increasing difficulty in maintaining their self-reliance as the country developed. Not all could "go West"; and increasing congestion in industrial communities resulted in a sharp increase in the need for aid to marginal families. By the middle of the nineteenth century this situation was causing deep concern among persons who felt some obligation for relieving the distress they saw around them. The poor relief given by town or city poor-masters was, they recognized, inadequate, degrading, and frequently subject to political manipulation. Accordingly, these persons formed private agencies to supplement public relief in selected cases and to attack the causes, in individuals and community, which made it necessary for persons to seek aid. Further, they strove for an organization of the community's private charitable activities in order to prevent duplication and cut down waste in administration.

This "charity organization" movement brought the methods of social case work—to be discussed in a later chapter—to the process of relief-giving. It emphasized a fuller understanding of the problems of the family or individual in trouble and stressed an attempt to work out, with each family or person, an individualized plan of treatment to help meet those particular needs or problems.

In a few instances, these methods were carried over and took root in public relief agencies but such cases were exceptions to the general rule. The leaders of the charity

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organization movement really had small hopes of improvement in poor relief and in a number of large cities actually succeeded in having it abolished in the belief that dependents in these communities could and should be cared for by voluntary agencies.

THE RISE OF CATEGORY RELIEF

Traditional poor relief has two different aspects: "indoor relief," given in the form of institutional care in the almshouse or a similar institution, and "outdoor relief," or relief to families in their own homes.

The most significant trend in the history of American poor relief up to 1929 was the withdrawal from it of various groups and the establishment of special provisions for their care. This process began first with the almshouse population and spread later to outdoor relief.

In the "mixed almshouse" of a hundred years ago were herded the aged poor; orphans and other dependent children; unmarried mothers and their helpless infants; the crippled, the blind, the deafmute, and the paralytic; the mentally ill, the feeble-minded and the epileptic; the sick and the venereally infected adult; the prostitute; and the vagrant.

As the civic conscience at length became awakened to these conditions, certain groups of dependents began to be withdrawn from the almshouse to be cared for elsewhere. The beginnings of this process may be seen in the provision for the first American public hospital for the mentally ill, in Virginia, in 1768. During the nineteenth cen-

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tury children were, for the most part, removed to receive care in specialized children's institutions or, later, in foster family homes. In like manner there gradually came about the withdrawal from the almshouse of most of the physically handicapped, the mentally ill, mentally defective, and epileptic, and the development of special institutions for their care, treatment, or training. This process of withdrawal is not complete even today, but in the main it is now recognized in all states that children and persons with special disabilities or handicaps should receive specialized treatment, and the almshouse has tended to become more and more a public home for the infirm aged.

During the first quarter of the present century, there was a widespread growth of laws providing for public assistance to special groups in their own homes. These forms of relief included mothers' aid (since 1935 called aid to dependent children); old age assistance; aid to the blind; and veterans' relief. Such forms of public assistance are frequently called "category relief" because the recipients are set off by law into special classes or categories with special requirements of eligibility clearly differentiated from those pertaining to general poor relief.

In 1932 a group of social workers, looking back over the history of American public assistance, pointed out that the general drift in public relief in the United States during the preceding hundred years had been "in the direction of diverting from the main stream the handling of certain specialized groups such as dependent children, the mentally ill, mental defectives, and the various groups re-

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ceiving special types of relief. It is significant, however, that these diversions have not, on the whole, affected the current or direction of the main stream of poor relief. Generally speaking, the fundamental elements of the traditional system have not been greatly changed by the passage of time. It is still true to a large degree that 'in its essentials, our public poor relief system is the system of Elizabeth, made applicable by a few superficial changes to the new conditions.' ”¹

The widespread development of category relief dates from the year 1909, when the first White House Conference on Dependent Children met in Washington, D. C., at the call of President Theodore Roosevelt. From the White House Conference came this pronouncement:

Home life is the highest and finest product of civilization. It is the great molding force of mind and of character. Children should not be deprived of it except for urgent and compelling reasons. Children of parents of worthy character suffering from temporary misfortune, and children of reasonably efficient and deserving mothers who are without the support of the normal breadwinner, should, as a rule, be kept with their parents, such aid being given as may be necessary to maintain suitable homes for the rearing of the children.

The Conference added:

This aid should be given by such methods and from such sources as may be determined by the general relief policy of each community, preferably in the form of private char-

¹ Family Welfare Association of America, *op. cit.*, p. 11.

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ity rather than of public relief. Except in unusual circumstances the home should not be broken up for reasons of poverty, but only for considerations of inefficiency and immorality.¹

In spite of the preference for voluntary relief by the White House Conference and the actual opposition of some of the leading social workers of that day, mothers' aid developed as a form of public assistance rather than private charity. The first mothers' aid laws were passed in Missouri and Illinois in 1911; the Illinois act was the first state-wide law for this purpose. Twenty-three years later, on the eve of the passage of the Social Security Act, 46 states, the District of Columbia, Alaska, Hawaii, and Puerto Rico had enacted such legislation in one form or another, not all of it mandatory or fully operative.

The philosophy back of the mothers' aid laws has been thus expressed:

Fatherless children belong with their mothers. It is a wise and proper investment in future citizenship for the State to make it possible for fatherless children to remain in their own homes, with their own mothers, rather than to have those homes broken up by poverty and the children placed in institutions or in foster families. . . . *The preservation of family life is the foundation of all child care.*²

Old age assistance laws have sought to aid another

¹ White House Conference on Child Health and Protection, *Dependent and Neglected Children*. 439 pp. 1933. Includes bibliographies. Pages 59-60.

² Public Charities Association of Pennsylvania, *Four Million for Mothers' Assistance Clears Up the Waiting List*. 20 pp. 1931. Page 7.

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group of "natural dependents"—the aged. Massachusetts had a Commission on Old Age Pensions studying the problem of the aged during 1908–1909. Arizona passed an old age assistance law in 1914, but it was declared unconstitutional. An Alaskan statute of 1915 provided that aged pioneers might receive a monthly allowance in lieu of public institutional care at the Pioneers' Home. In 1923 old age assistance laws were passed in Montana, Nevada, and Pennsylvania; but the Pennsylvania law was declared unconstitutional and the Nevada law was later repealed, leaving the Montana act as the first permanent state statute on this subject. Ten more states had passed such legislation by the end of 1929. With the passage of laws in California (1929), and Massachusetts and New York (1930), a substantial number of aged persons began to receive assistance. At the end of 1935, before the Social Security Act became effective, 38 states, the District of Columbia, Alaska, and Hawaii had laws permitting or requiring such allowances.

As early as 1830 the Indiana legislature passed "an act to provide for the support of the indigent blind of this state." This act provided for special allowances for blind persons so that they might remain with their families, if they had any, and thus avoid separation by being sent to the county poorhouse. Four other states passed blind relief laws between 1830 and 1909.¹ Six more states had entered this field by the end of 1920, and 11 others by the

¹ Ohio, 1898; Illinois, Massachusetts, and Wisconsin, between 1900 and 1909.

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end of 1930. In August, 1935, laws providing for cash grants to the blind had been passed in 27 states.

The three types of category relief mentioned above are based upon the idea of making special provision for certain groups of natural dependents—children, the aged, and the blind. Veterans' relief is another variety of public assistance, based not upon the concept of providing a special type of relief to meet a special cause of dependency but rather upon the philosophy of setting up a separate form of relief to give special consideration to those persons who have rendered military service. Veterans' relief is allied to other legislation conferring special privileges on veterans, such as laws relating to military pensions, the bonus, veterans' preference in civil service and naturalization procedures, and so forth.

Less exact information is available regarding veterans' relief than concerning any other form of category relief. In 1934, 24 states were listed as having laws providing for veterans' relief, and apparently the situation was little different in 1937.¹

RELIEF DURING THE DEPRESSION (1929-1936)

No other depression in the history of America is comparable to the great depression of 1929-1936. There were no precedents for much that happened. Mass relief on a nation-wide scale, the state relief administrations,

¹ American Public Welfare Association, "Types of Public Relief in the U. S.," in *Midmonthly Survey*, December, 1934, p. 382; and Spray, Edith, "Veterans and Service Men," in *Social Work Year Book*, 1937, p. 525.

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federal leadership in the provision of relief, national work programs—all these were new phenomena in American life.

During the first years of the depression, many business and political leaders felt that it was unwise if not actually unpatriotic to admit its existence or at least to talk about it publicly. The "business recession" and the consequent unemployment and abnormal need for relief were, they said, merely temporary and would be of short duration. Prosperity was "just around the corner."

The futility of some of the early local "emergency" measures seems all but unbelievable as one now looks back on them. The unemployed were set to selling apples on the street corners. "Share-the-work" plans were advocated, but the amount of work to be shared grew steadily less while bread-lines lengthened and street-begging increased. The belief in local private charity as "the American way" of giving relief reached its climax in the "block-aid" plan, under which it was proposed that the people in each city block should see that the unemployed in that block were cared for.

By the summer of 1931 it was clear that local funds, both public and private, were in many places becoming exhausted. In September, 1931, the Legislature of New York State enacted the Wicks Act, establishing state aid for home relief and work relief to relieve the distress created by unemployment. The state administering agency was hopefully christened the Temporary Emergency Relief Administration (TERA), but the "temporary emergency"

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kept the Administration in existence for nearly six years. Other states followed the lead of New York. New Jersey, Rhode Island, Illinois, Wisconsin, Ohio, and Pennsylvania were among the first to enact legislation providing state aid.

In spite of state aid, the situation grew steadily worse. In view of the financial plight of some of the states and the constitutional limitations upon their borrowing power, many persons began to doubt that even state funds would suffice to meet the situation, and there was an increasing agitation for federal aid. When Congress convened in December, 1931, Senators Costigan and LaFollette introduced bills for federal assistance to the states. These bills were referred to the Senate Committee on Manufactures and a subcommittee of that body, under the chairmanship of Senator LaFollette, held a notable series of hearings which spread upon the public records the grim picture of the tragedy of unemployment.

A school of 100 children with 99 underweight; families evicted from their homes, their furniture set on the street and their goods "sold out" by the constable; a family of ten moving in with a family of five in a three-room apartment; school children hungry and insufficiently clothed; 3,500 homeless men in one emergency shelter; counties bankrupt, banks closed, mines shut down; destitution and suffering in abandoned mining villages; men and women and children trying to support life on miserably inadequate relief allowances; suffering on every side, with hunger and cold threatening to engulf thousands of normally

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self-sustaining homes—these were some of the facts laid before the committee.

The administration, however, opposed the entrance of the federal government into the relief field, Congress was unconvinced, and the Costigan-LaFollette bills were defeated.

But by the end of the winter it became clear that something must be done. In July, 1932, Congress passed the Wagner Act authorizing the Reconstruction Finance Corporation (RFC), a federal emergency organization concerned chiefly with the financial rescue of industrial and commercial enterprises, to lend to the states and territories \$300,000,000 of federal funds for direct and work relief. A staff was organized which included a number of persons with marked experience and ability in social welfare administration. However, the provisions of the law were such as virtually to preclude any vigorous federal leadership. These federal funds were legally loans and not grants, even though there was a widespread feeling that the states would not actually be required to repay them. The federal government thus did not technically assume direct responsibility for unemployment relief and since it did not do so, the RFC felt it impossible to require definite standards of administration from the state agencies.

The winter of 1932–1933 was marked by the growth of state emergency relief administrations (ERA's), with the increasing use of state and federal funds for unemployment relief. In some cases, the administration of unemployment relief was assigned to an existing state depart-

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ment of public welfare; more often a new state emergency commission or agency was established. The state relief administrator became one of the commanding figures in the field of state government—exercising wide powers, charged with vast responsibilities, heading a far-flung army of relief, and working with his staff always under pressure and often under fire from the suffering and desperate unemployed, from taxpayers anxious to keep down government expenditures, and from political opponents of the state administration. Under the ERA's, mass relief became one of the major functions of government. Beginnings were made—sometimes crude enough—in working out administrative methods, procedures, controls, and records.

Between the election of President Roosevelt in November, 1932, and his inauguration four months later the outlook grew darker and darker. Banks closed, desperate farmers banded together and used armed force to prevent foreclosures on their homes, the federal relief-loan fund approached exhaustion, fear and panic spread. When the new President took oath of office in March, 1933, he faced one of the most serious crises in American history.

The vigorous and drastic actions of the next few months and the various aspects of the "New Deal" are not a part of this narrative except as they relate to public assistance. In May, 1933, the Federal Emergency Relief Act was passed. This Act established a Federal Emergency Relief Administration (FERA), with a Relief Administrator to be appointed by the President with the ad-

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vice and consent of the Senate. The Administrator was authorized "to make grants to the several States to aid in meeting the costs of furnishing relief and work relief and in relieving the hardship and suffering caused by unemployment." The FERA went into action on May 22, 1933, with the appointment of Harry L. Hopkins as Relief Administrator.

The Federal Emergency Relief Act of 1933 is a landmark in the history of public welfare in the United States. It flatly reversed an historic federal policy established as far back as 1854, when President Pierce vetoed Dorothea Dix's bill for federal aid for care of the mentally ill. President Pierce's veto was based on the belief that the federal government had no constitutional power to grant funds for such welfare purposes. For three-quarters of a century this veto had controlled federal welfare policy. The Federal Emergency Relief Act of 1933 blazed a new trail; it accepted federal responsibility, supplied federal leadership, and appropriated federal funds for unemployment relief in the emergency.

The first rule issued by the FERA was the far-reaching declaration of policy that grants of federal emergency relief funds were to be administered only by public agencies after August 1, 1933. While this rule was sometimes evaded or imperfectly enforced, it did establish in the field of unemployment relief the principle that public funds must be administered by public agencies, and it prevented the possible growth of a vast and mischievous national system of subsidies or grants of public funds to private

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agencies. Further regulations dealt with adequacy of relief, investigation and service, direct and work relief, relief for transients, self-help and barter, and medical care in the homes to recipients of unemployment relief.

The FERA was characterized by the huge amounts of the funds administered, by the vast sweep of its program, by rapidity of organization, and by the vigor, ingenuity, and resourcefulness of its leadership. Many persons of unusual competence were drafted into the service of the FERA and state ERA's. "That program meant great improvement in the care of the destitute unemployed and also in the development of public social services. In spite of the fact that budgets were not adequate to meet the nutritional needs of children, that failure to pay rent in many communities meant great insecurity in the home, and that reliance upon the policy of relief in kind was unnecessarily humiliating to the unemployed, still the job was enormously better done than it ever had been done before and great improvements were made in relief practice."¹

In November, 1933, the federal government established the Civil Works Administration (CWA) "to provide regular work on public works at regular wages for unemployed persons able and willing to work." One distinguishing feature about CWA was the provision that half of the workers should be drawn from those of the unem-

¹ Abbott, Grace, "Social Workers and Public Welfare Developments," in *This Business of Relief*—Proceedings of the Delegate Conference, American Association of Social Workers. 1936. Page 22.

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ployed who were on the relief rolls and half from the "self-supporting unemployed" who were not on relief. This program was launched with great enthusiasm, was organized and developed with amazing rapidity, and employed more than 4,250,000 persons at its peak in January, 1934. It was terminated at the end of March, 1934, primarily because the rate of expenditure (approximately a billion dollars during the period of about four months) proved too costly to be continued.

On February 28, 1934, the President announced a new three-fold relief program directed to meet the peculiar needs of three separate and distinct groups. These were: distressed families in rural areas; "stranded populations" or persons living in communities heretofore supported by a single industry which had become non-existent; and the unemployed in large cities.

During 1934 a special program of relief for rural areas was sponsored by the federal government and over 209,000 families were given some kind of rehabilitation assistance. The drought in the summer of 1934 necessitated an appropriation by Congress of \$525,000,000 for additional rural relief.

On June 8, 1934, the President addressed Congress on the subject of social security and announced his intention of appointing a Committee on Economic Security to study this whole subject and report with a definite program to Congress in January, 1935. In a later message, on January 4, 1935, he foreshadowed the administration's recommendations on social security and unemployment relief

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and said of the direct relief system in which the federal government was then participating:

To dole out relief in this way is to administer a narcotic, a subtle destroyer of the human spirit. It is inimical to the dictates of sound policy. It is in violation of the traditions of America. Work must be found for able-bodied but destitute workers. The Federal Government must and shall quit this business of relief.

The President's plans envisaged: first, new social security legislation; second, the withdrawal of the federal government from participation in direct unemployment relief by the end of 1935; and third, a new work program for "employables," financed largely by federal funds.

The federal Social Security Act, to be discussed later, was passed by Congress and was signed by the President on August 14, 1935. A Senate filibuster prevented the passage of a bill appropriating funds for the purposes of this Act, and its actual administration was therefore delayed until February, 1936.

In May, 1935, the Works Progress Administration (WPA) was constituted by executive order as the federal agency to administer the new work program. Mr. Hopkins was designated as WPA Administrator.

The federal government did withdraw from direct relief; and in the main this was accomplished by the end of 1935, although certain relatively small grants were made as late as June, 1936.

The months following the withdrawal of the federal government were marked by great confusion in the field

of direct relief. Some states—among them New York, Pennsylvania, and Michigan—continued their state relief administrations and their appropriations of state funds for relief. Unemployment relief showed an increasing tendency to merge with general public assistance and to embrace much or most of the traditional poor relief load. In other states—such as New Jersey and Illinois—the state relief administrations came to an end and the responsibility for general public assistance reverted to the local poor relief authorities. In some states relief became a political football, in a year when political antagonisms were sharpened by the approach of a presidential campaign. Where state aid was withdrawn, local governments frequently found themselves unable to handle the relief load with any pretense of adequacy.

TRADITIONAL POOR RELIEF SURVIVALS

Since the beginning of 1936 there have been two new developments of major interest in the field of public assistance: first, the initiation and beginning of active operation of the social security program; and second, the accomplishment of far-reaching reorganizations of public welfare programs in various states. While these developments are of great significance, it should be realized that they have not made more than a fair beginning toward rescinding the old poor laws upon which American relief practice has traditionally been based.

These state systems of poor relief still represent, in many of their aspects, archaic survivals from medieval

days. They are replete with arid legalism and with inhumanity, stupidity, and cruelty in the treatment of the defenseless recipients of public aid.

Edith Abbott has pointed out that most of the state poor laws embody three principles, each of which is far removed from the social thinking and social needs of today.¹ These principles are as follows:

1. Local responsibility. This "is based on the old theory that the necessary tax-collected funds for a system of public relief must be provided by the local governmental authorities, such as townships and counties. . . . It is a principle that belongs to the days of the oxcart and the stage coach." In the state of Ohio alone there have been 1,535 local governments responsible for some form of outdoor relief. The local administration of poor relief is notoriously inadequate and inefficient. In many instances the local unit has been too poor to furnish adequate relief and efficient administration without state aid, and the ancient theory of local responsibility collapses like a pricked balloon in the face of modern facts.

2. Settlement or legal residence. This is the principle that the local unit is responsible for the support of only those who meet statutory residence requirements. The settlement laws of the various states are a jungle of tangled legal enactments, and a fertile ground for endless litigation. Such laws are relics of the past. Clearly the law of settlement and the automobile were never intended to exist together in the same civilization. Today, the sources of need are not local, and "the sources of assistance must be as broad as the sources of need."

¹ Abbott, Edith, "Abolish the Pauper Laws," in *Social Service Review*, March, 1934, p. 10.

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3. Legal family responsibility. This principle involves the prosecution of relatives of the applicant for relief, within certain specified degrees of relationship, when those relatives are unwilling but are believed to be able to contribute to the support of the applicant. While agreeing that "the moral obligation of helping the members of one's own family is universally recognized," Miss Abbott argues that "such relationships and such moral obligations cannot be maintained or strengthened by statutory enactments. The present laws prescribe expensive litigation which is often very painful to those in need of help, which does not yield any returns in family solidarity, and which yields monetary returns which are far below the expense of litigation."

Some modernization of the poor laws occurred in a few states before the recent wave of public welfare reorganization set in. The outstanding example was the New York Public Welfare Law of 1929, which provided among other things that:

It shall be the duty of public welfare officials, insofar as funds are available for that purpose, to provide adequately for those unable to maintain themselves. They shall, whenever possible, administer such care and treatment as may restore such persons to a condition of self-support, and shall further give such service to those liable to become destitute as may prevent necessity of their becoming public charges. As far as possible families shall be kept together, and they shall not be separated for reasons of poverty alone.

THE SOCIAL SECURITY ACT

The federal Social Security Act, enacted in 1935, "rep-

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resents the most ambitious and comprehensive attempt ever made by American government to promote the economic security of the individual."¹ The Act is an omnibus measure; it provides for three types of governmental services. These are:

1. Social insurance
 - Unemployment compensation (unemployment insurance)
 - Old age benefits (old age insurance)
2. Public assistance—federal grants-in-aid to the states for three types of category relief
 - Aid to dependent children (mothers' aid)
 - Old age assistance
 - Aid to the blind
3. Other health, welfare, and vocational services
 - Maternal and child health
 - Public health work
 - Services for crippled children
 - Child welfare services (rural child welfare programs)
 - Vocational rehabilitation

An executive body, the Social Security Board, is charged with administration of the social insurance and public assistance provisions of the Act. The other functions are allocated among the United States Children's Bureau, the United States Office of Education, and the United States Public Health Service.

The Act establishes the conditions under which grants

¹ Burns, Eveline M., "Social Security Act," in *Social Work Year Book*, 1937, p. 472.

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are to be made by the federal government to the states for the three types of public assistance embraced by the law. In the case of aid to dependent children the federal grant is equal to one-third of the relief given for each dependent child in the home, up to \$18 a month for the first child and \$12 for each other child. In the case of old age assistance and aid to the blind the federal government pays one-half of the cost, up to \$30 a month to an individual. In addition the federal government pays an amount equal to 5 per cent of its grants, which amount may be used for administrative costs.

As of September 30, 1937, state plans had been accepted by the Social Security Board and federal grants for public assistance were authorized for the following numbers of jurisdictions:¹

Aid to dependent children	39
Old age assistance	50
Aid to the blind	37

As we have noted, the Federal Emergency Relief Act of 1933 reversed former policy and established the principle of federal responsibility and the fact of federal participation in public assistance, *in an emergency*. The Social Security Act of 1935 provided for federal participation in public assistance not as an emergency measure but *as part of a permanent public welfare program*. The complete change of front on the part of the national government

¹ Social Security Board, *Summary of Progress, July 1—September 30, 1937*. The total number of jurisdictions is 51 and includes the 48 states, Alaska, the District of Columbia, and Hawaii.

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marked by these two Acts is one of the most significant developments in American public welfare history in the past 150 years. An even more important aspect of the Social Security Act is the establishment by federal enactment of the two forms of social insurance—unemployment compensation and old age benefits. Social insurance is an essential and infinitely more satisfactory approach than relief to the problem of meeting the common hazards of life. With the Social Security Act the United States has set her feet upon the road which has already been successfully traveled by many of the European nations in the provision of various types of social insurance.

PUBLIC WELFARE REORGANIZATION

The reconstruction of public welfare programs in the states has been going on apace since the opening of the legislative sessions of 1935. Within the past few years the governors in at least eight states have appointed official commissions to study the reorganization of public welfare or public assistance services, and during the three years 1935–1937 more or less sweeping measures of public welfare reorganization have been enacted in at least 37 states.¹ This is an unprecedented degree of activity in the reconstruction of public assistance and public welfare.

During the past few years, then, at least two-thirds of the states have carried out some measure of reorganization of their public welfare services. These new laws vary

¹ This statement is based upon bulletins of and correspondence with the American Public Welfare Association.

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endlessly in their details, but as far as public assistance is concerned several tendencies may be noted: the setting up of permanent state public welfare agencies to succeed state emergency relief administrations; the assignment to these departments of supervision over all or most forms of public assistance; the establishment of integrated local (usually county) public welfare departments, administering all or most of the types of public assistance; and the provision of cooperative state and county plans, usually with local administration and state financial participation, and with varying degrees of state supervision.

In New York the Temporary Emergency Relief Administration has been merged with the Department of Social Welfare after almost six years of separate identity. In Pennsylvania one of the oldest, most powerful, and most politically entrenched poor relief systems in the country has been abolished; and integrated county welfare departments are being established, with practically complete state financing of relief and with a high degree of centralized control by the newly established State Department of Assistance. The Washington State Department of Social Security is experimenting with the plan of bringing together in one department public assistance, unemployment compensation, and employment service.

THE PRESENT SCENE

If we try to get a bird's-eye view of public assistance as it is in the United States today, what do we find? In the

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first place we see a variety of types of aid, including at least the following:

1. General public assistance, or general relief to families in their homes. In some cases this is still old-style outdoor poor relief, administered by traditional poor relief officials in the time-honored manner of dealing out doles to "paupers." In other cases, the name and concept of poor relief has given way to the modern idea of general public assistance. In most states unemployment relief and poor relief have tended to flow together into one pool of general public assistance.

2. Almshouse relief as a form of institutional care for the dependent. With old age insurance and old age assistance in force, the old type of almshouse, we may hope, is on the way out. Regional hospitals or infirmaries, in the real sense, would most appropriately serve the sick and infirm aged who are today about the only logical inmates of the almshouse.

3. Category relief or relief to special groups. Three types of category relief—aid to dependent children, old age assistance, and aid to the blind—are included, as has been said, under the Social Security Act and federal aid is available for them. Each of these is found in most of the states. Veterans' relief, another much less extensive form of category relief, is found in about half the states.

4. Work relief for the "employable" unemployed provided through the WPA and financed primarily by federal funds. The national government maintains also the somewhat similar work programs of the National Youth Administration and the Civilian Conservation Corps.

5. Direct "unemployment relief." This is still legally in effect in some states as a separate type of relief, although in practice, as noted above, it tends to merge with

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general public assistance, particularly since many of the "employables" are at work under WPA, leaving chiefly, it is assumed, the "unemployables" on direct relief.

There is room for difference of opinion as to where the field of public assistance begins and ends. Even if we consider the foregoing areas as constituting the core of public assistance, we must recognize that people need various sorts of help from public funds, and that some specialized *services* must be considered either as aspects of public assistance or as closely adjoining fields.

One of these fields is the care of the sick poor—in their own homes, through dispensaries and clinics, and in hospitals. Some medical care, particularly that given to dependents in their homes, is inextricably intertwined with general public assistance; and in some states medical relief seems almost a separate type of category relief. The care of dependent children away from their own homes—that is, in foster family homes or institutions for dependent children—is another area of service which lies partly within the field of relief. It is also closely related to the provision of services for neglected children, children born out of wedlock, and children who present behavior problems which bring them to the attention of juvenile courts or other public agencies. The care of dependent persons who are physically or mentally handicapped also obviously presents a relief aspect as well as a medical, educational, or mental hygiene aspect.

There is a much clearer boundary line between public assistance and social insurance than between public as-

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sistance and the fields mentioned above. Insurance benefits are paid automatically upon proof by the insured of disability as defined under the insurance plan. Moreover, insurance benefits are normally paid out of reserve funds; and the premiums, reserve funds, and benefits are calculated on an actuarial basis. Relief, on the other hand, is given on the basis of the determination of need and is paid out of current appropriations of public funds, without the existence of any reserve funds or actuarial computations. Thus, under an old age insurance plan, a person who reached the age of eligibility would receive his old age insurance benefit automatically, even though he might recently have inherited a fortune. But the same person would not receive relief under similar circumstances because he would fail to meet the primary eligibility requirement of need. It should be noted that once need is established, along with other eligibility requirements, certain types of relief—such as old age assistance or blind relief—may follow more or less automatically and even with a high degree of standardization as to the amounts of the relief grants; but the establishment of need still stands as a primary means of distinguishing between relief and insurance.

We find in the United States today not only a variety of types of relief but a multiplicity of local, state, and federal agencies administering and supervising public assistance. In a state with an unreconstructed or old-style public welfare system, one may find three or more state agencies and five or six different kinds of local agencies involved in the

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administration of public aid. However, as we have noted above, there is a tendency in current programs of public welfare reconstruction to integrate state and local public assistance agencies.

Some idea of the present scope of public aid can be obtained from the following figures for "cases" receiving public assistance during the month of September, 1937, as reported by the Social Security Board:¹

Cases receiving public assistance under the Social Security Act	1,703,000	
Old age assistance		1,470,000
Aid to dependent children		194,000
Aid to the blind		39,000
Cases receiving general relief	1,277,000 ^a	
Number of persons certified as in need of relief employed under the Works Program	1,866,000	
Works Progress Administration		1,407,000
Other federal agencies, including the Civilian Conservation Corps		459,000 ^a
Cases for which subsistence payments were certified by the Farm Security Administration	67,000	

^a Preliminary figures subject to revision.

These items may not be added together, because in some instances the same family may be counted in two or more items. If the number of dependents of relief recipients is taken into account, the total number of *persons* dependent on public assistance will of course be several million more than the number of "cases." Total obligations for payments to recipients in the above-mentioned group for the same month were \$159,729,000.

It seems altogether probable that we shall have a large

¹ Social Security Board, *Public Assistance Statistics for the United States*. September, 1937. Table 14.

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burden of unemployment and a heavy public relief load—perhaps several times as large as the pre-depression loads—for a long time to come. Public assistance is now a major part of the field of public welfare and public welfare is a major function of government.

PROBLEMS OF THE FUTURE

What are the chief problems of public assistance today and for the future?

One of the long-range questions of policy which we must face relates to category relief. Is category relief essentially sound or unsound as a method of organizing public assistance? Do we want category relief or “pooled relief”—one comprehensive system of general public assistance—for a long-time program?

It may be admitted that we are likely to have category relief for some time to come, since it is embodied in the Social Security Act; but this does not furnish an answer to the question as to whether it is sound and desirable.

There are cogent arguments on both sides. In favor of abolishing category relief it may be argued that we need a simpler, clearer, more inclusive relief program. We cannot meet all needs through categories; we cannot out-guess all the forms of human distress and set up a separate category for each one. With all our network of categories, people slip through the meshes—and have to be taken care of just the same. The categories are not inclusive. Moreover, it may be urged, they are illogical. The existence of

human need is the rational basis for giving relief—not the possession of certain formal, artificial eligibility requirements as a dependent child, as an aged person, or as an ex-soldier. The categories are likewise inequitable, it may be said. Why have a category for aid to the blind and none for the helpless cripple? Why extend the benefits of old age assistance to the hale and hearty man of sixty-five and deny them to an infirm and more needy neighbor of sixty-four? Can human needs be successfully or equitably pigeon-holed? Finally, it may be said that pooled relief would immensely simplify relief laws, organization, and administration; that it would tend toward more uniform standards, a unified relief policy, and a unified approach to the whole problem of public assistance.

In reply to these arguments, those who favor the retention of category relief would be likely to assert that there are practical considerations which go deeper than neat organization charts or administrative convenience. It will be pointed out that most of the advances which we have made in public assistance have been made in the categories. For three centuries general public assistance—poor relief—has remained a stagnant and noisome backwater of public administration. What assurance have we that pooled public assistance will not be poor relief under a new name? How do we know that it will be flexible or comprehensive? How can we be certain of reasonable adequacy under a pooled system? How do we know that we shall not lose all that we have gained in establishing at least a measure of adequacy and of decent standards of ad-

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ministration, if we lose the categories in which these objectives have been won? Also, if we lose category relief shall we not lose certain values that are inherent in some of the categories? It is more than a form of words to say that aid to dependent children is an investment in future citizenship; that the mother is in partnership with the state. She does not now feel that she is receiving charity. The aged person does not view old age assistance in the same light as poor relief, whether in or out of the almshouse. Category relief tends to carry much less stigma than general relief. The recipients prefer it, and for good reason. As a practical matter, also, it will be argued, it will almost certainly be easier to obtain more adequate relief appropriations if we proceed by categories. Legislators and the public can visualize definite groups such as widows and orphaned children, the aged, the blind: they do not picture "the poor" except as a vague, shadowy, and unreal group. The categories have more "appeal value" than does general public assistance. Moreover, we are now seeing the beginnings of nation-wide social insurance in this country. Social insurance is based on categories; will not category relief afford an easier transition to categories of insurance than would be the case if we had only generalized relief? Finally, the Social Security Act is set up on the basis of categories. A state which now pooled its relief would lose its public assistance benefits under the Social Security Act. We have federal participation today in public assistance, on a category basis. Shall we abandon all these hard-won gains, throw away the categories to

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follow an administrative will-o'-the-wisp, and run the risk of losing all federal participation in public assistance?

There is, of course, the plan of "administrative integration" wherein the categories are retained as separate programs, as they are now legally constituted, while their administration is fused in the operations of one local public assistance agency serving various classes of recipients. In a growing number of jurisdictions plans of this nature are being adopted.

Another group of problems relates to the organization of public assistance. What shall be the setting and organizational structure of public assistance services in our federal, state, and local governments? Shall they be organized in separate departments of public assistance or merged in broader departments of public welfare? How much use should be made of citizens' boards in such departments? If they are used, should such boards be policy-determining and directive boards or should they be merely advisory to the executive heads of departments?

Allied to this question of organization is the problem of securing and retaining qualified personnel for public assistance services. If partisan politics determines relief policies and dictates staff appointments, the service is poisoned at its source. Common decency as well as every consideration of efficiency and economy demands an end to political trafficking in human lives. Politics must be divorced from the administration of public assistance. We can have qualified personnel in this field and in the rest of the realm of public administration if we apply

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what we already know about civil service merit systems. A sound law, an aroused and informed public opinion, competent technical leadership in this area of government, and patience and persistence in solving the many practical problems of day-by-day civil service administration—these are the foundations of a successful merit system.

Still other problems focus about the actual recipient of public assistance and the way in which the giving of public aid shall be carried out. How far are the principles of individualized treatment applicable to public assistance, and especially to mass relief programs? Shall we attempt to do more than merely meet economic needs? What about health problems and the special problems of children? How adequate shall our public relief grants be? Where shall they be fixed between bare subsistence standards on the one hand and health and decency standards on the other?

Again, what is the relation of adequacy to the whole problem of financing public assistance? What shall be the sources of relief funds? By what types of taxation shall they be raised? What shall be the relative financial and administrative responsibilities of federal, state, and local governments? On what basis shall state funds be allocated to the counties or other local subdivisions of the state? Intimately related to the problem of finance is the question, what shall be the place of work relief or works programs in a long-time plan?

We come, finally, to even more fundamental questions. Must we always have public assistance? Relief is at best

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ameliorative; it is a substitute for self-support through employment or support from natural guardians or relatives. For a normal adult to be "on relief" for any considerable length of time is an affront to human personality and a challenge to the society that permits it.

Public assistance is desperately necessary today to sustain the lives of millions of our fellow citizens. But if we think of it in relation to the long future, we find ourselves facing this question: is not the economic security of the average individual one of the primary objectives of organized society? If this is true, may we not hope and resolve that public assistance shall in the long run be at least drastically reduced, if not eliminated, through the establishment of broad programs of social insurance and the incorporation in our social order of fundamental measures for establishing economic and social security for all?

ARTHUR DUNHAM

II

WHO SHALL BE GRANTED PUBLIC AID? HOW MUCH? IN WHAT FORM?

DISSATISFACTION with the old poor laws has led, as we have seen in the previous chapter, to the gradual establishment of a series of public assistance programs designed to provide better care to particular groups of beneficiaries such as dependent children, the aged, the blind, the sick, and employable unemployed persons. The segregation of these groups for special treatment has depended upon political pressures, public sympathy for certain kinds of distress, or other fortuities. The result has been contradictions in the programs established and failure in some states to provide assistance to all groups in need. A state giving relatively generous help to its aged may give none to its children; one that cares adequately for its fatherless children may provide nothing for the children of an unemployed worker.

So long as public assistance continues to be administered on the basis of "categories" (and there are many who believe that any continuance is too long) it is desirable that all the groups selected be given equally adequate care and in addition that provision be made for those who

do not fit any established category. Among these are old men who are just a little too young; young children who are just a little too old; normally healthy men who are not quite strong enough for manual labor; sick women who are a trifle too well to go to the county farm; and deserted families whose fathers remain just a little too near home. Many an applicant for public assistance is convinced that no rich man entering the kingdom of heaven ever faced greater obstacles than does a poor man getting into a category. It is sometimes argued that the poor law still remains to guarantee subsistence to those who fail to qualify for special aid. In part, this is true; but the standards of such care are often so low as to be intolerable. Frequently there is so much confusion as to which governmental agency is responsible for aiding the various categorical groups that certain persons, usually the so-called employable unemployed, are denied assistance from all sources, even from the poor law.

Whether or not a person is eligible for public assistance depends, therefore, upon whether any special program has been established to care for the group into which he happens to fall, or whether general assistance is available for those who cannot squeeze, or be squeezed, into a certain category. Laws establishing these programs usually specify the general nature and amount of benefits that may be provided and define in broad terms the kinds of people to be benefited. Within this framework, details of administration are left to administrative agencies which are responsible for deciding what persons shall be granted

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benefits, how much they shall be given, and in what form. The way in which these three questions are answered will determine whether public assistance fulfills its intended purpose and meets human needs constructively, or whether it demoralizes those whom it is supposed to help.

ELIGIBILITY FOR ASSISTANCE

Immediate responsibility for deciding the form and amount of public assistance to be granted to a given individual usually rests upon a worker in a local administrative office. Such a person, sometimes called a visitor, interviewer, investigator, case worker, case aide, or intake worker, is free only within narrow limits for his decisions are controlled largely by state and federal laws and administrative regulations, by enactments of local county or city councils and public welfare boards, and by rules issued by the local administrative agencies themselves.

The worker's discretionary power is greatly affected by the way in which the assistance programs in his community are organized, and varies according to whether his agency administers all forms of public assistance or only one of several forms, the others being administered by other agencies. A worker's decision regarding an applicant's eligibility and the form and amount of assistance to be granted is seldom final but is usually subject to the approval of a superior. In some localities all decisions must be approved by a supervisory state office or a local committee or board, such as a county welfare board or the

county commissioners. In large part, the success or failure of public assistance depends upon the integrity and capability of those officials whose decisions determine who shall or shall not be granted benefits, for it is theirs to say whether the programs are to be prostituted to ulterior political or personal ends or whether they shall benefit adequately those for whom they are designed.

The standards of eligibility and assistance, thus determined by legislative and administrative action, are in turn conditioned by public opinion. Legislators cannot pass laws which the public does not favor, nor can administrators carry out for any length of time policies to which public opinion is opposed. Thus the ultimate judge of standards of eligibility and assistance is the public. Fortunately, public opinion is malleable and may be won over to support policies which it once condemned. Conversely, unless programs of interpretation are carefully maintained, shifts in public opinion may compel administrators to reverse policies which to them appear desirable and which had once been acceptable to the public.

Responsibility for marshaling evidence of eligibility is sometimes placed upon the applicant, sometimes upon the administrative staff of the agency granting assistance. In the first instance the applicant is considered ineligible until he proves himself eligible. It is his task to organize the necessary evidence into an impregnable case that can successfully withstand the scrutiny of administrative employes. This burden of proof often becomes a heavy one indeed, entailing delay and consequent suffering while

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the applicant casts about for an elusive bit of required evidence. When the agency assumes part of the responsibility, its employes are charged with the task of helping to piece together the facts which determine the applicant's eligibility. Although this policy takes more of the administrative staff's time, it places at least part of the burden where it really belongs—upon workers familiar with the techniques of gathering these facts, who know the best sources of information, and have access to such necessary facilities as telephones, automobiles, stenographic service, stationery, postage, and carfare.

Evidences of eligibility may vary from formal public documents to verbal affirmations of private individuals. Between these extremes agencies frequently secure necessary information from old tax receipts, electric light or water bills, fishing licenses, family bibles, baptismal certificates, passports, bank books, or any other of hundreds of informal sources. In lieu of a birth certificate, a clergyman's spoken word may have to suffice to prove an applicant's age, paternity, maternity, citizenship, or birthplace. Most agencies have their own rules as to what forms of evidence are acceptable in establishing eligibility, and attempt to strike a course somewhere between the Scylla of overly strict and legalistic standards which many applicants could not meet and the Charybdis of too lenient standards which would give undue discretionary powers to administrative employes. Evidence supporting the eligibility or ineligibility of applicants should be incorporated in case records of applicants so as to show how

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they do or do not meet the necessary conditions of eligibility, and the reasons for granting or withholding assistance. In case of criticism, whether it be from auditors checking on the justification for granting assistance to any given individual or from organizations of the unemployed challenging the agency's denial of it, such records serve as a protection for both agency and worker.

Need

As we have seen, public assistance services may be established for many kinds of people: children, the aged, the blind, the sick, and the able-bodied; but there is one condition that all must meet—they must be in need. This is the most characteristic aspect of public assistance.

It is difficult to distinguish between social services which should be provided for the general public and those which should be limited to persons who are in need. During most of our national history opinion on this question has been shifting. Many public services now available to all originated as special programs for disadvantaged groups. The public schools, for instance, began as tax-supported schools for "child paupers" only.

Public opinion today is sharply divided over the justification of limiting certain services to people who are in need. At one extreme are those pressure groups who demand that certain benefits, now restricted to necessitous persons, be granted without regard to need. They argue that free medical care should be made available to all who are sick, and not only to the sick poor; that assistance

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should be granted to all who are out of work, or who earn less than a stipulated income, or who are old, regardless of their need. The government, they assert, owes everyone at least this much security in the absence of a positive national policy to provide all workers with uninterrupted employment at adequate wages. In reply to these arguments, another group insists that the costs of extending the benefits demanded by such a system would be prohibitive. However, even though the costs could be paid, these opponents contend, benefits should not be granted without regard to need lest this undermine the initiative and self-reliance of the American people. When asked whether granting unemployment compensation and old age benefits without regard to need will have the same effect, they reply that in social insurance this risk is minimized because beneficiaries will have contributed to their own old age benefits and also, in some states, to the compensation provided them in case of unemployment. But even when a man contributes nothing, the argument goes, unemployment compensation cannot wreak much damage to a recipient's spirit because of its short duration.

The need of the applicant is not only the most characteristic consideration in regard to eligibility but also the most important, for it can outweigh all the rest. All rules are waived in "emergency cases." An otherwise ineligible applicant suddenly becomes eligible if his need becomes extreme, for no public official would dare become directly responsible for allowing any person actually to starve.

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It must not be presumed that the term "need," as used in establishing eligibility for assistance, provides a definite, objective standard common to all times and places. Its meaning varies not only from state to state but also from time to time and place to place in a given state, depending upon differences and changes in wage levels, general standards of living, and the mores of the people. There is, however, practical unanimity among state laws regarding the responsibility of close relatives to support one another and the responsibility of an individual to exhaust all his own resources before applying for public aid.

Since pioneer days the principle of family responsibility has been written into American public assistance policy. The purpose of this is to compel fathers, mothers, children, brothers, sisters, grandchildren, or grandparents of needy persons to contribute to their support. State laws differ as to which relatives are held responsible for another's need, and social agencies vary in their enforcement of existing statutory provisions. Some agencies follow the practice of denying assistance to any applicant having a responsible relative who is employed, while others expect such a relative to help only if his earnings enable him to do so in addition to providing for himself and his immediate dependents. Court orders are sometimes resorted to in an effort to compel contributions from relatives. In some jurisdictions deserted mothers are denied aid for their dependent children until they swear out warrants for non-support against their erring husbands. Compulsory support by relatives is defended on the

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ground that it helps to conserve public funds, and that it is necessary to prevent complete breakdown of family life.

Many dispute these claims, maintaining that changing concepts of family and state responsibility no longer justify this principle and that enforcement of the policy often robs an independent earner and his immediate family of money they can ill afford to share, taking needed food, recreation, or educational opportunities from children, thereby jeopardizing their future growth and development. Furthermore, they claim, forced payments and court orders tend to destroy whatever family ties do exist and may lead to complete estrangement. It is pointed out, too, that costs involved in compelling support often exceed whatever contributions may be forthcoming. Because of these factors, many social agencies are becoming less strict in enforcing such provisions, even where they are established by law, and many leaders in the social welfare field are ardently advocating their erasure from public assistance laws.

A second important consideration regarding need is the extent to which an applicant has exhausted all his personal resources. An applicant would not be considered eligible by some agencies so long as he had any money in a bank, knew one grocer who would give credit for another order for food, or possessed one salable article of furniture or an unpawned piece of jewelry. When carried to an extreme, this policy results in compelling applicants to forfeit all equities in insurance policies or property, regardless of the losses thus entailed, and even to sell for little

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or nothing long-treasured pieces of furniture or family possessions. Whatever saving of funds might result from such economy is often offset by the bitterness and resentment engendered among those who are compelled to give up for so little, things which to them had meant so much. Many workers feel that one sure way to pauperize applicants is to force them to part with the few little treasures which make up all they have to call their own, link them to the past, and give them something to carry with them into the future. Some agencies allow and help applicants to maintain insurance policies, to continue payments on their homes, to own and operate an automobile if it is used in seeking or holding a job, and to retain personal belongings, within generous limits, both to preserve morale and to salvage some possible financial resources for the future.

Although need is the most important consideration in establishing eligibility for public assistance, it is by no means the only one. A person whose need was indisputable might not qualify for assistance because of his failure to meet other requirements; for example, those regarding citizenship and civil status, residence, age and physical condition, family status and character, occupation and conditions of employment or unemployment, or willingness to provide required information and to sign prescribed forms.

Citizenship and Civil Status

Under some state laws, aliens are ineligible for certain

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benefits to which citizens are entitled. In many states citizenship is still a prerequisite to receiving old age assistance or aid to the blind but it is not a requirement in most recent laws providing aid to dependent children. The federal Works Program virtually bars all aliens including those who have taken out their "first papers." Since standards of eligibility for the various assistance programs frequently differ in their requirements, a non-citizen barred from receiving one form of aid may be eligible for another in the same community. For example, aliens denied Works Program employment may be granted general relief in some localities, but not in all. Unfortunately, the unit of government most able to provide assistance may be the very one to discriminate against aliens, throwing an unfair responsibility upon some other unit with less adequate resources.

Discrimination against aliens results in denying aid to wives and children who may themselves be American citizens, or who in many cases are not responsible for their lack of citizenship. Social insurance programs already established in this country allow benefits to aliens and citizens alike. There is much public sentiment favoring also the granting of public assistance benefits without discrimination on this ground, since hunger is no respecter of citizenship.

A person's civil status, like his citizenship, is an important factor in determining eligibility for public assistance. Benefits are frequently denied to persons under sentence in jails or prisons and some states even forbid certain

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forms of assistance to persons with prison records. Aid is sometimes denied to the wives and children of imprisoned men.

Residence

Residence is an extremely important consideration affecting eligibility for public assistance. Benefits for which an applicant may apply will be determined largely by where he lives. Neighbors living on opposite sides of a state line may find very different kinds of assistance available to them should they fall into need. Similarly, residents in two counties within the same state, or two residents of the same county—one living inside and one outside the corporate limits of a city—might find marked differences in regard both to kinds of public assistance offered and to standards of eligibility for similar forms of aid. These differences are due to the fact that many forms of public assistance are under the jurisdiction of local units of government—townships, towns, cities, or counties. They are frequently defended on the grounds that public responsibility for relieving need has always been a local responsibility; that local officials know best what their own residents need; and that the greatest economy in administration can be achieved when there is a maximum of local control, since local officials are thought to be highly responsive to the demands of taxpayers.

In many quarters, the present wide variations in public assistance programs and standards of eligibility are considered indefensible. Why, the critics ask, should an ap-

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plicant living in one jurisdiction be deprived of assistance which would be available to him if he lived in the adjoining jurisdiction? How can one justify allowing such an accidental factor as place of residence to spell the difference between assistance and suffering?

The place of residence affects eligibility for public assistance in still other ways. An aged person is ineligible for old age assistance in most states if he is an inmate of a public institution. Incidentally, the federal Social Security Act specifies that states cannot be reimbursed for old age assistance granted such inmates—a restriction which prevents state and local governments from transferring to the federal government part of the cost of maintaining almshouses or of supporting aged inmates of jails, penitentiaries, insane asylums, or hospitals. Some states grant assistance without federal reimbursement to aged persons receiving temporary care in public hospitals. Inmates of private institutions are granted old age assistance in some states, but are denied it in others.

Residence affects eligibility of dependent children to receive public assistance. To accord with the terms of the Social Security Act, most state laws specify that in order to receive aid a child must be living with a relative closer in degree than a cousin, in a place maintained as a residence by such relative. In some states only female relatives may receive assistance grants and sometimes only mothers, as in earlier "mothers' aid" legislation. However, mothers' aid was sometimes granted to grandmothers and fathers for the benefit of dependent children

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even before the passage of the Social Security Act, and in most states either a male or female relative may now act as guardian and receive grants. Only a few states grant aid to dependent children living with guardians or relatives other than those specified in the Social Security Act. In fact, the provisions of the Act regarding reimbursement undoubtedly have led some jurisdictions to refuse benefits to persons who had formerly been eligible. Some leaders in the public welfare field are urging state and federal governments to amend their legislation on this point and to allow grants to dependent children living in the home of any approved guardian, whether or not a relative. Liberalization in this direction is opposed by some children's institutions which fear depopulation if care of children in foster homes were thus to receive governmental subvention.

Length of residence required to make a person eligible for the various forms of public assistance varies between states and between different public assistance programs in a given state. Thus, it is usually required that an applicant for old age assistance must have resided in the state for five of the past nine years, and continuously during the year immediately preceding application, while an applicant for general relief may have to prove three years' residence, and a mother of dependent children may need to show only one year's residence prior to application. It is difficult to see any logical basis for these variations.

Length of residence alone is not sufficient to satisfy

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residence requirements for some forms of public assistance. It is frequently stipulated that periods during which public relief has been accepted must be deducted in computing the minimum period required to establish residence. These provisions are especially applicable to eligibility for general relief and do not usually apply to aid to dependent children, the aged, and the blind. In certain instances, periods during which assistance was received from private agencies—or even from friends and relatives—are likewise deducted, while in a few localities it has been ruled that an unsuccessful application for relief, since it acknowledges inability to be self-maintaining, interrupts the process of establishing residence and achieving full relief status.

Residence requirements are vestiges of the past, when the only assistance provided to persons in need was that furnished by local governments—each of which attempted to conserve its funds by barring “outsiders” from any but emergency aid. Although participation of the federal and state governments in relief financing has modified most public assistance policies, it has left relatively unchanged the principle requiring residence. The result is the existence of a “forgotten” group—the migrant, transient, and non-resident population—which is denied the protection of relief and security provisions accorded to residents.

For a period (1933–1935) the federal government attempted to meet the urgent relief needs of this group by a special program of care popularly called the federal transient program. This effort was abandoned, however,

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when the Works Program replaced federal grants for direct relief. Today a few states assist their subdivisions in meeting the cost of care to non-residents, but they are exceptions to a general rule of neglect in this area.

When assistance is given to non-residents, local officials often attempt to secure reimbursement from the local public officials of the locality where the applicants are considered to have residence. Or perhaps applicants are returned to a former place of residence with or without the knowledge or consent of local officials there, with the result that sometimes these officers promptly return them to the place from which they had just been sent. This bandying about of men, women, and children, and the resulting denial of relief or delay in granting it while residence is being verified, bring suffering upon the most helpless of our population and constitute inhumanity which is a reproach to our system of public welfare.

Age and Physical Condition

Age and physical condition are important considerations in establishing eligibility for assistance. Federal reimbursements under the Social Security Act are limited, in the case of old people, to grants made to persons sixty-five years of age and over; and with the case of dependent children, to those under sixteen years of age. The Act's influence is plainly discernible in the uniformity of age limits established in the corresponding state laws.¹

¹ In a few states the minimum age limit for old age assistance is seventy years (as permitted by the Social Security Act until January 1, 1940), and in at least one state it has been reduced to sixty years.

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In practically all states aid to dependent children is limited to children under sixteen years of age in keeping with the terms of the Social Security Act. Considerable sentiment has developed in favor of amending federal and state laws to permit continuance of aid until dependent children reach the age of eighteen. There are at least three reasons in favor of such a change. First, because of the currently glutted market for unskilled labor, young persons from sixteen to eighteen years of age find it especially difficult to get jobs. Second, dependent children who remain at home without jobs after they reach the age of sixteen are frequently obliged to deprive their younger brothers and sisters of adequate food if they continue to eat at the family table. Assistance which might otherwise have been sufficient thus becomes totally inadequate to maintain the health and well-being of the family group unless supplementation is available through some other form of aid. The effect of this situation on sensitive youngsters can easily be imagined. It has undoubtedly contributed toward increasing the numbers of homeless and wandering juveniles. Third, it is urgent that young people should continue vocational training both because of the dearth of highly-skilled workers and to minimize the possibilities of becoming stranded later in "blind alley" or low-paying jobs.

Age limits affecting the eligibility of applicants for aid to the blind are far less uniform than those relating to dependent children or the aged, since federal law governing reimbursements for their aid contains no age limitations.

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State laws consequently show wide variations: several have no age restrictions, some make applicants eligible at sixteen, others at twenty-one. Where age restrictions are found they bar assistance to blind children and often forbid aid to young people during the years when they are securing their education and most need help. Education is a more costly process for blind children than for those of normal vision and often involves extra costs for transportation and personal service, which may make it impossible for families of limited means to give blind children as much education as their sighted brothers and sisters receive, or as their natural gifts might warrant. Abolition of age restrictions in the states having them might thus result in great social benefit, not only to young people with defective vision but also to their families.

Age limitations for employment on the federal Works Program are established in part by federal regulation and in part by state action. Federal rules establish no maximum age limit but fix a minimum age of eighteen years except on employment programs of the National Youth Administration. Some states have established a rule that persons must be excluded automatically upon reaching the age of sixty-five but others follow the less rigid policy of placing emphasis upon a worker's ability to do the required work, regardless of his chronological age. A federal rule forbids employment on the Works Program of a person whose "age or physical condition is such as to make his employment dangerous to his health or safety, or to

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the health or safety of others.”¹ Of even greater effect than this provision has been the attempt of state administrations to limit employment to so-called “employables.” No satisfactory standards for diagnosing employability of workers have yet been devised. Of all methods attempted, physical examinations have been used most frequently. These may be made by relief agencies prior to referring workers, or by the Works Progress Administration (WPA) prior to accepting them, or by private physicians who give prospective employes certificates of employability or unemployability. Differences of opinion among relief agencies, WPA officials, and physicians have led to some indefensible impasses. A person refused employment by WPA officials—because they consider him unemployable—may be denied public aid in any other form because local assistance authorities consider him employable. Where relief is granted to “employables” the gravest aspects of this problem are avoided, yet even this does not eliminate attempts to shift responsibility from one agency to another, with all the attendant delays and suffering inflicted upon the victim whose employability is being debated.

Definitions governing the degree of lack of vision which qualifies applicants for aid to the blind differ from state to state. Some states have adopted broad definitions of blindness—so-called social definitions—permitting aid to be granted to anyone whose eyesight is so defective

¹ Works Progress Administration, *Administrative Order No. 44*. July 11, 1936.

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that he cannot carry on his education or vocation, or earn enough to provide himself with the necessities of life. Flexible provisions of this kind, which can be adapted to the peculiar needs of different persons whether their work requires relatively keen sight or relatively little, are usually regarded as preferable to more rigid physical standards which are not equally appropriate to all applicants.

Some state old age assistance laws make ineligible for assistance aged persons needing institutional care because of physical or mental disabilities.

"Character" and Family Status

Eligibility for public assistance may be affected by the applicant's "character" and family status. Provisions relative to family status are most commonly found in connection with aid to dependent children. We have already considered the limitations entitling only certain relatives to receive aid for the benefit of children. Most state laws follow the definition established in the Social Security Act, and allow grants to children who are "deprived of parental support or care by reason of death, continued absence from the home, or physical or mental incapacity of a parent." Some state laws go beyond the federal law, and specify that the home must be "suitable" or that the person responsible for the care of the child must be a "fit" one. These qualifications are admittedly difficult to determine; but even where state laws specify nothing in regard to such standards, good social practice demands careful study of the child and the home to ascertain that

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it is one in which he can find the necessary love and security, as well as opportunity for physical and mental development.

In some states, aid for dependent children was formerly limited to those whose fathers were dead, but more recent legislation has been notably liberalized. In great part this has been due to the influence of the Social Security Act. Practically all states now grant benefits regardless of whether the breadwinner's absence from the home is occasioned by death, divorce, separation, abandonment, imprisonment, or confinement within an institution.

Careful study sometimes indicates that an unmarried mother may be the best possible person to care for her child. Many states therefore grant assistance to such mothers if they need help in meeting their responsibilities. This policy marks a distinct advance over that of automatically denying aid to unmarried mothers on the assumption that they cannot be "fit and proper" guardians of their children.

Family status is often an important consideration affecting the eligibility of persons who are unmarried or "unattached," or who have only small families. Such persons frequently find themselves ineligible for general relief and employment on the Works Program, especially when relief funds run low or employment quotas are inadequate. The excuses offered for this practice are that unattached persons are best able to get about to find whatever jobs may be available, and that the refusal of benefits or employment to those who have few or no dependents

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will cause less suffering than if larger family groups were denied aid. These arbitrary practices often cause intense suffering, however, for each of two or three children in a family can get as hungry as each of seven or eight; and all single people do not find jobs. It was an "unattached" worker who carried in a parade protesting relief cuts a banner inscribed, "It is un-American to starve alone."

Thirty years ago a discussion of eligibility for public aid would have centered around the "worthiness" of the beneficiary. This term referred to the way in which one met or did not meet his responsibilities toward his family and the community. Consideration of eligibility was tightly bound about by many moralistic concepts and colored by what local relief officials thought about the overt acts and inner lives of applicants. Resulting judgments were often unfair, since they were highly subjective; were seldom based upon adequate, not to mention full, information; and made allowance neither for mitigating circumstances nor differences in cultural standards. Vestiges of these policies are still plainly discernible in state laws regarding aid both to dependent children and to the aged. These remnants of the past provide that, to be eligible, an applicant must have a record of decency and respectability. They contain such specific provisions as that he must not have been a professional tramp, beggar, or vagrant; that he must not have deserted nor failed to support, within a specified number of years, a spouse or family.

Exigency of present need even in the face of past mis-

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conduct, and difficulty of passing objective judgment in view of possible mitigating circumstances, have led thoughtful and conscientious public officials in the main to abandon serious attempts to justify denial of relief on such grounds, even in jurisdictions where the law so reads.

Occupation and Conditions of Employment

An applicant's occupation is usually a relatively unimportant consideration in establishing his eligibility for public assistance, although it may be the deciding factor in determining the form in which it is granted. Occupation is an all-important factor in determining eligibility for social insurance benefits, since employees in certain occupations are specifically excluded from coverage. Where occupation does affect eligibility for public assistance, the only distinction usually made is between farmers and non-farmers or between employees and the self-employed. Farmers and others who are normally self-employed are frequently denied employment on work projects since this would interfere with proper attention to their farms and stock or their businesses. They may also be denied direct assistance; but special forms of assistance are often provided for such persons, usually in the form of loans.

Although the nature of an applicant's occupation has but slight effect upon his eligibility for most forms of public assistance, there are other considerations regarding his employment which are important. Is the applicant totally unemployed or is he working full or part time? Are his earnings for full-time employment inadequate to

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meet his family's needs? Was he justified in quitting his last job? Is he now out on strike? Has he really tried to find work? Has he refused a proffered job? The answers to questions like these may determine the applicant's eligibility to receive, or of a beneficiary to continue receiving, public assistance.

Agencies vary in policy toward supplementing earnings of workers employed either part time or full time. Some refuse to give assistance to applicants who have any employment, regardless of how little they may be earning; others deny it only to those working full time. Still others supplement the difference between earnings and the amount of assistance allowable, or even grant enough to raise the total of earnings and assistance above the level of full assistance alone in order to offset increased costs incident to employment, such as carfare, lunches, and work clothes, and to give the worker some incentive to keep on working.

Supplementation of earnings has often been attacked because it enables unscrupulous employers to continue paying starvation wages or to maintain part-time schedules unnecessarily. Refusal to supplement inadequate earnings, it is claimed, would help to drive out of existence those businesses operating upon such an uneconomic basis that they cannot provide regular employment and earnings adequate to maintain their employes without assistance. On the other hand, to refuse supplemental assistance tempts men to leave jobs in order to receive full relief. Furthermore, while it must be conceded that un-

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principled employers may take advantage of the policy, granting supplemental assistance may be a benefit both to the socially minded employer doing everything within his power to regularize employment, and to his employes. It may be the means of helping workers to retain contact with their employers and to maintain their skills, and of enabling employes to continue operations on a part-time basis instead of shutting down altogether. No quarter is asked here for employers who deliberately use public assistance grants to subsidize their own uneconomic operations; but is refusal of supplemental assistance the best way to curb such exploitation? Some say yes: it is good public policy to encourage beneficiaries to leave underpaid jobs by granting them full-budget relief. Some say no: relief is never adequate and would be even more inadequate unless applicants were encouraged to earn whatever they could. Furthermore, the dissenters claim, employment conditions should be regulated by legislation governing wages and hours of work and not by denying aid to the exploited; this savors too much of beating the horse because its master refuses it food.

The conditions under which a worker leaves his job may make him ineligible for public assistance, since relief is sometimes denied workers who give up jobs of their own accord or because of a strike. Whether the justification is reasonable or not, in any given instance, is a difficult point to decide. Giving assistance to men who quit their jobs for any reason at all is believed by some to lessen workers' responsibilities for their own self-main-

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tenance. But refusal of assistance to those who leave jobs voluntarily may condemn men either to continue to work under intolerable conditions or to undergo suffering when they protest by quitting their jobs, if union "war chests" or other resources are not available to them. A worker may be doomed to an insufferable lot when he can obtain neither supplementation of insufficient earnings nor assistance if he stops work. Many assistance authorities follow the practice, established nationally in 1933 by the Federal Emergency Relief Administration, of granting aid to strikers and job-leavers unless some recognized agency, such as an established governmental labor board or employment office, declares the workers' action unjustified. This policy is designed to protect both worker and employer.

Finally, eligibility to receive or to continue to receive assistance is sometimes determined by diligence in seeking work and by willingness to accept it if offered. Two general methods are pursued to make sure that employable workers seek every possible work opportunity. One is to throw upon the worker the burden of proof. Assistance may be granted on a temporary basis, thus compelling the applicant to reapply periodically and to submit each time to an inquiry regarding his assiduity in job-seeking. He may be required to submit signed statements from a specified number of employers certifying that he sought but could not find a job in their establishments. An extreme example of this policy, begotten of an unholy alliance between politicians and sweatshop operators, is the demand

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that applicants secure statements of this type from *certain specified* employers. Pressure from reputable business men, disgusted with the necessity of certifying to these searches for non-existent jobs, has sometimes led to discontinuance of such policies. Less effective has been pressure from the searchers themselves, who are compelled to suffer rebuff after rebuff, to wear out shoe leather they can ill afford to replace, and to undergo added drains upon their already depleted energy and vitality. Some progressive assistance agencies pursue a second method of getting applicants and beneficiaries in touch with possible employers. They assume the responsibility for finding jobs and for referring workers to them, denying assistance only when there is refusal without sufficient reason. These agencies sometimes maintain their own employment departments; or they may insist that all applicants and beneficiaries maintain current registration with a designated public employment office.

Wide variations are found in policies requiring applicants to accept jobs upon pain of being denied assistance. Some agencies insist upon the applicant's taking any work available, regardless of its nature or wage. Other agencies maintain that the wage rate prevailing in the community for the kind of work involved must be accepted, even though this is less than the amount of aid that the worker might receive. Most progressive agencies compel acceptance of jobs only when (1) they pay prevailing rates which would enable a worker to earn at least as much as he would be entitled to if granted public assistance,

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(2) established standards of work are observed, (3) openings are not due to labor disputes, and (4) the jobs are within the occupational competence of the workers who have been referred.

Willingness to Provide Required Information and to Sign Prescribed Forms

Applicants have frequently been denied aid because of failure to furnish required information about themselves or their relatives. "Lack of willingness to cooperate" in this way is held by many public assistance agencies to justify denial of the application. Others realize that the applicant may have failed to comprehend just what information was requested, or may be unable to furnish it because he does not know the answers. Furthermore, he may be so upset emotionally because of his difficulties and the necessity of requesting public assistance that he can scarcely be held responsible for his failure.

The personality and approach of the assistance worker who first interviews the applicant may have a great deal to do with the latter's willingness or unwillingness to give in full the information requested. In most progressive agencies, it is recognized that only well-trained workers capable of dealing intelligently and sympathetically with people who are under emotional stress should be stationed at the intake or application desk.

Applicants for public assistance are often compelled to sign many kinds of forms, one of which may be the so-called "paupers' oath," a sworn statement declaring the ap-

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plicant to be destitute, and affirming that he has not withheld any pertinent information regarding his own or his relatives' resources. Falsification is frequently punishable, upon conviction, by fines or imprisonment or both. The applicant is thus faced at the outset of his relations with such an assistance authority with the idea that he is expected to attempt to commit fraud and must be prevented from doing so. Signing this statement, often under duress of hunger and need, is for many applicants the most humiliating experience encountered in running the gauntlet established to determine eligibility. It represents surrender of the last vestige of self-respect. From an administrative point of view, its use is a short-cut method, adopted to avoid the necessity of thorough social studies of eligibility by qualified administrative employees. Many administrators feel that the device is both unnecessary and indefensible; that needed information can be secured by qualified workers in almost every instance without resort to legal coercion; and that it is unfair to the majority of applicants to treat them as imposters because a few might misrepresent their situations. Experience with the paupers' oath yields no evidence that facts thus sworn to are more reliable than those elicited less formally. Efforts to make the forms understandable to the average applicant have led to their oversimplification, so that they fail to provide information that would be really pertinent to the proper consideration of the application and the later social treatment of the beneficiary. Often they are not accompanied by detailed instructions,

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with the result that even honest and intelligent applicants cannot be sure what the questions demand in the way of answers.

Some of these disadvantages would be overcome if skilled interviewing accompanied the use of the form. However, where interviews have been used most intelligently the oath has been found unnecessary. Where it has been used most extensively, one of its chief purposes has been to eliminate interviewing, either because qualified workers were not available or because the agency was unwilling to pay the cost of employing them. No decision regarding the ultimate economy of such a device can be reached without due consideration of its effect upon the morale of all applicants forced to sign it, and of the worry experienced by many who live in constant fear of possible punishment, either for inconsequential misstatements which they made knowingly, or for possible misinformation which they may have unwittingly set down.

Another device frequently made use of by public authorities is an agreement that the applicant will, if he is ever able to do so, reimburse the public treasury for any assistance that he may receive. Emergency medical care has even been denied in some jurisdictions until agreements to repay its cost have been negotiated. Restitution is occasionally made voluntarily by former beneficiaries or responsible relatives who recognize an obligation; more frequently, however, this responsibility is neither acknowledged nor is it explained by the public assistance authority, and beneficiaries or their relatives have often been sur-

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prised to find themselves sued for the recovery of funds they never knew they were expected to repay. For instance, a single woman who was awarded \$1,000 for damages caused by an automobile accident suddenly found herself obliged to pay it over to the state in return for old age assistance which had been granted her father. Some public assistance agencies take a lien on an applicant's property to facilitate collection from his estate of the amount of assistance granted during his lifetime. In other agencies the practice is to exact from applicants more or less formal agreements to repay any assistance that may be granted. These policies are thought to bring sufficient return to reduce the net cost of relief, prevent unwarranted requests for aid, and strengthen individual and family responsibility. On the other hand, they have sometimes led to the withdrawal of applications for help that was undoubtedly needed, when the applicant was suddenly required to pledge his future and that of his relatives in this way. Many have felt delinquent through inability to restore amounts granted them. The glad prospect of being independent of further need of assistance through some sudden windfall has been snatched away by the realization that the money must be refunded for value already received.

Although the justice of these demands is approved by public opinion in which the beneficiaries themselves often concur, it may be questioned whether the financial gains therefrom are not more than offset by the social losses occasioned by making relief recipients debtors to the state.

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Some laws, by omitting references to reimbursement or collection from estates of deceased beneficiaries, seem to imply that the practice is not worth while. In many laws, collections from recipients of pensions or bonuses for military service are expressly forbidden, and the right to hold free from lien property below a specified value is guaranteed to recipients.

Only major conditions of eligibility have been presented in the foregoing discussion. Many jurisdictions impose further conditions such as demanding that beneficiaries account fully for their previous grant before they are eligible for another. In many states blind beneficiaries who solicit alms lose their eligibility for grants under that category, and most states declare ineligible applicants who purposely dispose of property in order to qualify for public aid. Conditions of eligibility may take many forms, but should have only one purpose—quick identification of those members of the community whose need entitles them to public aid.

FORMS OF PUBLIC ASSISTANCE

Public assistance may be given in many different forms, such as institutional care, actual goods or orders authorizing their purchase, special services, cash—either outright or as wages for employment—or loans. The merits and defects of these various forms of assistance are discussed more at length below. The forms in which relief shall be given may be prescribed by law, but are more often determined by administrative rules and regulations which in

turn depend upon such considerations as average cost, ease of administration, hope of discouraging applications, the degree to which individualized treatment is planned, and public attitudes toward the assistance program.

The comparative financial cost of a particular type of relief is often the most important consideration in determining its form. Especially when funds are insufficient to meet all needs, a less expensive though less desirable kind of aid may of necessity be granted. It is possible, on the other hand, that the community may be induced to pay a higher price for what is claimed to be a superior type of assistance, especially if it can be shown that a larger immediate investment may prove more economical in the long run, or may be expected to yield greater, though intangible, returns in preserving the morale of beneficiaries. The American preference for work relief and the popularity of the Civilian Conservation Corps are pertinent illustrations. Ease of administration together with low administrative cost are further desiderata, but are not necessarily controlling factors if it can be shown that the greater difficulty and expense of administration will provide a superior form of assistance.

The degree to which it is sought to make public assistance distasteful to the recipient will also help to determine the form in which it is granted. Early in our history we borrowed from the English poor law the concept that public relief should be made so repulsive that it would deter as many applicants as possible from requesting it, and there are still persons among us who cherish this con-

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viction. If assistance is made repellent enough, their argument goes, only those whose need is desperate will be willing to seek it and this will help to conserve public funds. It is now generally recognized, however, that this policy does not present a fair test of need but only of people's sensibilities. The calloused cannot be thus deterred; it is only the more sensitive who are thereby dissuaded from asking assistance. Specialized skill is demanded to distinguish equitably between those to be granted and those to be denied public aid. Dependence upon any automatic device for eliminating ineligibles is illusory, leading on the one hand to waste of public funds and on the other to unmerited deprivation and humiliation of helpless people.

The form in which public aid is granted will be further affected by the extent to which assistance is to be considered an integral part of social treatment to remedy the personal and environmental ills of beneficiaries, instead of merely keeping them alive. To have genuine therapeutic value, assistance should build up the morale and initiative of beneficiaries, prepare them for self-support, and advance their general well-being. The skilled service which will contribute to these ends will add to the immediate cost of the program, but modern social work is based upon the premise that this will prove most economical in the long run. Obviously, all beneficiaries will not need the same kind of social treatment. The therapeutic value of any form of assistance can be determined only upon an individual basis, and in the light of each person's needs.

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Public opinion concerning the nature of relief helps to determine the form in which it is granted. If assistance is assumed to be a gratuity from the state to a class of incompetent paupers, it will be administered in one way; if it is conceived of as a public obligation to people who are rendered destitute by social and economic forces beyond their control, it will have an entirely different emphasis; and still another if it is considered an earned reward, either as wages for direct employment upon jobs created for the purpose, or as compensation for services rendered the community as citizens, workers, consumers, or parents.

The specific form of public assistance to be granted a particular beneficiary depends in large part upon the category into which he fits. If he is employed upon a work program he will be paid cash wages; if he is granted aid for dependent children, the aged, or the blind, it will be in the form of cash allowances. If the applicant is a farmer or is normally self-employed he may be eligible for a loan. Applicants not falling in any of the above categories may be given aid in the form of cash, goods, orders on dealers, special services, or custodial care. Beneficiaries may, within limitations, receive several forms of assistance at the same time. For example, a recipient of old age assistance might be eligible also for free medical care, but if he suffered from visual defect, he would probably be ineligible to receive aid for the blind concurrently with his old age grant. Public assistance workers are sometimes free, within narrow bounds, to decide what form of assistance a given applicant may be granted even

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though this is determined primarily by the categorical aid for which he is eligible.

Cash Grants

Public assistance grants are now most commonly given in the form of bank checks. Having cash to spend gives beneficiaries freedom in making purchases and enables them to shop and bargain to the best of their ability. No one need know that the beneficiary is receiving aid except the person who actually cashes the check. This form of assistance is relatively easy to administer, especially when individual grants tend to remain fairly constant as they do in the programs providing aid to children, the aged, and the blind.

Argument is sometimes raised against use of cash and checks on grounds that beneficiaries are likely to spend their money for such things as liquor and tobacco instead of milk and other necessities; that possession of cash sometimes subjects them to undue pressure from creditors; that all beneficiaries are not adept at shopping so that freedom to bargain simply means freedom to be exploited and to waste public funds. A further argument is that, as compared with other forms, cash relief has no deterrent value—it is too popular to be good for the poor! Defenders of the cash principle retort that experience has shown that misspending by beneficiaries has been a greatly overworked bogey; but that when it does occur, it is part of the price of helping them to develop judgment and ability to handle their own affairs, without which they will

never be able to live independent lives. Instead of trying to avoid these difficulties by controlling their purchases, many agencies render a counseling service to help beneficiaries who need direction in spending their cash judiciously.

As for pressure exerted by creditors, proponents of the cash principle say this is not so much a criticism of the policy of granting assistance in cash as of the inadequacy of the grant. Possession of actual money does not give rise to this pressure, since debt-ridden beneficiaries would probably be plagued by their creditors if they received no cash, and many of them would have no peace of mind so long as their obligations were unmet. Whatever the form of assistance granted, it cannot be regarded as adequate until old debts are somehow adjusted so that beneficiaries are not harassed upon all sides by creditors and unpaid bills. Incidentally, this difficulty is often a by-product of the policy of refusing all public assistance until applicants have exhausted every possibility of "charging" goods and services.

Work as Public Assistance

Employment is generally regarded as a more desirable form of assistance than direct aid. There are certain qualifications, however, to be noted. When labor is required of beneficiaries simply to test their willingness to work, or as a return for the assistance they receive, it constitutes a sort of punishment for being in need, rather than a con-

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structive benefit. The only value claimed for "work tests" is their value as a deterrent.

Attempts are sometimes made to provide protected or sheltered employment for workers who are so handicapped physically, mentally, or emotionally that they are considered unemployable under normal standards of competition. These programs are wholly therapeutic in purpose, and require careful planning to attain their ends without further weakening beneficiaries through overprotection and coddling.

Between these extremes there is the usual form of work provided to enable certain kinds of eligible persons to earn wages in lieu of accepting some other form of public assistance.

Values claimed for employment as a form of aid are that it entitles workers to earned wages instead of gratuitous aid, and is thus free from the stigma sometimes attached to public relief; that employment helps to preserve and develop skills and working habits, thus benefiting both workers and industry by maintaining in readiness the nation's labor reserve; that it creates social assets and amenities such as buildings, parks, streets, and concerts, in addition to the wages paid. Construction projects require the use of materials like cement, steel, and stone, giving rise to the additional employment required to produce, fabricate, and transport them. These claims are justified only when the projects produce objects and services which are really needed, the value of which is apparent to the workers themselves; when persons are employed at tasks

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and under working conditions which challenge their capabilities; and when precautions are taken to avoid displacing workers who would normally have been employed to perform the work, probably at higher rates of pay.

Assistance in the form of employment sometimes permits more adequate aid than could otherwise be granted. Public opinion undoubtedly holds that people who "work for what they get" are entitled to more than those who do nothing in return for assistance granted them.

The morale-preserving power of work as a form of assistance is indubitably lessened by the requirement that applicants must be certified as destitute before they are eligible for employment, but this is usually insisted upon because the chronic scarcity of funds makes it imperative that jobs be made available first to the neediest. In considering the value of preserving morale through employment, it must also be remembered that it is possible to spend so large a share of the available money on supervision, materials, and wages for a limited group that insufficient funds are left to provide help of any kind to those unfortunate persons who cannot get assigned to the work program or secure private employment. In striking a balance of social well-being, the suffering of this latter group might easily be found to outweigh the therapeutic value of the work provided for the fortunate few.

The most frequent criticism directed against work as a form of assistance is that it costs too much since wage payments to beneficiaries commonly exceed what would be granted them as direct aid; and, as has been pointed out,

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additional expenditures are required for materials and supervision. Other criticisms commonly heard are that the kinds of jobs and working conditions necessary to maintain and develop skill and working habits can seldom be established in such programs and that this has a demoralizing effect upon beneficiaries themselves and upon those employed in private industry, who believe that they have to work longer hours for less money than do workers receiving public aid. Furthermore, critics claim, the absorption of large numbers of workers on employment programs tends to create shortages of various kinds of workers and to keep wages at unduly high levels. Work assistance is also said to be uneconomic, in that the costs of production are often higher than when the same work is done by private contract or by regular governmental employes.

The morale-building value of work assistance, according to its critics, has undoubtedly been greatly overemphasized. More and more people are beginning to wonder whether other and better means might not be used to reach the same ends. May it not be that skills and working habits can be better preserved and developed through educational programs and vocational training? Perhaps morale may be better maintained by voluntary participation in cooperative productive or recreational activities, and by removing the stigma attached to direct aid through helping both the public and the beneficiaries themselves to an understanding of its true nature and constructive values.

Many of the American people have undoubtedly been

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oversold on the superior advantages of work over other forms of aid. This has resulted, in part, from the way in which alternate choices have been presented to them. Demands for work assistance have often been based upon the claim that it is preferable to "pantry snooping" and the distribution of food baskets. But this contrast is unfair, especially since a social investigation of needs and resources, which is not properly described by this derogatory term, is usually necessary to determine eligibility for work. Furthermore, direct assistance in most localities has long since passed from the primitive stage of distributing baskets. The unfairness of many arguments for work assistance lies not only in the biased statement of the choice between it and direct assistance but in ignoring altogether some potentially better alternative. There may be conditions under which work is superior to all other forms of assistance, but let its superiority be carefully demonstrated. It should not be too quickly assumed that every work assistance project shares this superiority.

Provision of Actual Goods

Assistance "in kind," as the distribution of actual goods is termed, is gradually being abandoned and is now granted only to applicants who cannot qualify for any form of categorical assistance. However, persons receiving some form of categorical aid or those employed on the Works Program may be eligible for supplemental assistance in the form of clothing, fuel, bedding, or food. Sur-

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plus commodities and goods produced on work assistance projects, especially, are frequently distributed to such beneficiaries.

Arguments commonly advanced in favor of granting assistance in this form are that it is cheap, since goods can be bought at wholesale whereas individual beneficiaries would have to pay retail prices; that authorities are able to control by this method what the beneficiaries receive; that recipients have no opportunity to waste money for unnecessary articles; that the system provides a good outlet for surplus commodities purchased by the government or produced on work projects; and that it serves as a deterrent—for anyone who is willing to stand publicly in line and carry his rations home (perhaps in identifying bags) must indeed need help.

The cheapness of goods-distribution is subject to question. "Commissaries," the name applied to the stores or depots from which the goods are issued, are frequently without facilities for refrigeration, resulting in a high spoilage rate; and their personnel is often untrained. Political considerations rather than economy sometimes influence purchasing, and even when this is not true, recipients frequently feel—probably with reason—that they could have done better if they had been free to bargain for their own purchases. The worst objection to assistance in kind is that it allows beneficiaries little independence and freedom in planning and ordering their own lives. They are given what they are supposed to eat, wear, cook with, and sleep on. This develops none of those qualities which

people need if they are to live by their own efforts. Goods distributed are frequently said to be inferior or deteriorated, and are usually so limited in variety that menus necessarily become intolerably monotonous. Fresh meats and green vegetables are not usually available; and small articles like shoestrings and hairpins, which assume mountainous importance when not available, are usually not carried in stock.

Under this system public assistance authorities may know what beneficiaries get but they never know what they actually use. Despite rules to the contrary, goods are frequently sold or traded—sometimes at great sacrifice—to procure articles that are not provided, to secure cash for carfare, or to spice an otherwise unpalatable diet with a pinch of this or a garnish of that. Sometimes recipients simply waste food which is unfamiliar or disliked.

The cost of transportation to and from commissaries is another argument against them, often necessitating expenditures for carfare or long walks by hungry men and women.

Orders for Goods

Beneficiaries are sometimes given written orders authorizing specified dealers to give them certain goods or services for which the assistance authority agrees to pay. Arguments for and against this system are much the same as those concerning relief in kind. It is said to be cheap, for beneficiaries are sometimes given advantage of special discounts negotiated with dealers by the public assistance

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authority. Nevertheless, recipients often feel that their individual bargaining ability would offset this supposed advantage, if they were free to buy in different stores and watch for special sales. It is also claimed that assistance authorities can feel sure that public money is not being wasted, since the orders limit purchases to specified articles. But this argument breaks down in practice because of understandings reached between beneficiaries and storekeepers. Instead of bread, tobacco or cash may be given—often at an unjustifiable discount because of the risk of detection and prosecution involved. The need for small articles for which orders are not issued or which are not carried by the designated stores causes extensive collusion of this kind. The system is likewise responsible for the abuse of unloading upon beneficiaries inferior goods, such as stale meat, decayed vegetables, and broken packages. When they object, they are frequently reminded that certain kinds of people can't be choosers and that certain horses' mouths aren't subject to scrutiny; or are threatened with disclosures about the "bread" they received in the form of tobacco or cash. To people living in constant fear of being cut off relief, these arguments frequently suffice to compel them to accept whatever the dealer wants to give them.

Orders are subject to the same criticism as relief in kind in so far as they deprive beneficiaries of the fullest possible freedom in managing their own affairs. The presentation of an order in a store calls attention to the nature of the transaction and subjects the relief client to scrutiny

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from other patrons of the shop, so that sensitive persons find every visit to the grocer an ordeal.

The order system entails a tremendous amount of book-keeping expense. Separate orders for several different items—food, clothing, fuel, rent, and so on—may be issued to each beneficiary in one month or perhaps several times in one month. Every bill sent in by the dealers who fill the orders must be checked and double-checked, entered in the proper accounts, and eventually audited. By contrast, the issuance of checks is simplicity itself.

Institutional and Foster Care

Among the social practices we adopted from England was the policy of offering applicants for public assistance almshouse care or nothing. This was called "the offer of the house." The doors of "the house" were wide. It made no difference whether the person needing aid was an aged inebriate or a new-born babe; a victim of insanity, tuberculosis, or venereal disease; an orphaned child, a feeble-minded woman awaiting confinement, or a vagrant awaiting spring.

As we have seen in an earlier chapter, the old system of congregate care for all kinds of persons in a single institution has been gradually abandoned, in favor of granting beneficiaries assistance in their own homes, in foster homes, or in specialized institutions. Foster home care is becoming an increasingly important method of providing for children whose needs cannot be met adequately in their own homes. Specialized institutions provide care to

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carefully selected groups who are unable to get along properly in their own homes, even with the aid of public assistance, or to those who are denied other forms of aid. Typical of these groups are the aged sick who require constant medical attention, children who have no relatives capable of caring for them and who cannot be placed in foster homes, juvenile offenders, unmarried mothers awaiting confinement, homeless men and women who are denied all forms of aid except temporary shelter care, and aged people not needing medical care, who want the sociability of congregate living. At least two experiments are now under way in the United States to provide to recipients of old age assistance an opportunity to live together, voluntarily, in cooperative communities, where physical, social, and recreational needs are met.

So long as congregate care is carefully planned to meet the particular needs of special classes of beneficiaries, these institutions serve a useful social purpose. Frequently, however, such care is provided simply because it is thought to be cheap and an effective deterrent. It is often synonymous with mass care, providing no differentials in treatment for individuals of vastly different social, personal, or physical needs. In entering an institution, one must of necessity give up living in his old community, see his friends rarely, and lose contact with former employers. Prolonged institutional life causes great difficulty in later resumption of normal living in society. In so far as institutions fail to prepare their inmates for such return through constructive, personalized treatment, custodial care must be regarded as

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a socially undesirable and expensive form of assistance. On the other hand, it serves a very real purpose in the total welfare picture and its importance cannot wisely be ignored in the development of a well-rounded public assistance program.

Loans

Reasons have been advanced earlier for questioning the advisability of assuming that grants to recipients should be liens on their estates or on any future independent income or earnings of themselves or their responsible relatives. This is not to say, however, that advances should never be made from public assistance funds as definite loans to appropriate borrowers, with terms agreed upon in advance. Such loans are often made to farmers, business men, and others who are self-employed, since they can ordinarily offer as security real property, livestock, future crops, or anticipated earnings. To such persons a loan is considered preferable to direct assistance, both because it is intended to preserve the independent spirit of the borrower and to further his economic rehabilitation, and because of the further expectation that all or part of the sums thus advanced will eventually be repaid. Loans are preferred to work relief because the borrowers are then free to give their time and energies to the improvement of their farms and businesses instead of spending it on work projects. Unless adequate counseling service is provided to help borrowers, however, loans may yield no permanent good.

The presumed superiority of loans over other forms of

aid as a preservative of morale and initiative depends entirely upon the respective attitudes of borrower and lender. If lenders imply or borrowers infer that the loans really need not be repaid, they become mere face-saving devices which weaken rather than strengthen character. Public assistance workers must be unusually discriminating in this regard, and explicit in the agreements they draw up with borrowers. Unfortunately the idea is widespread that funds borrowed from governmental units need not be repaid, but that it "sounds better" to ask for aid in the form of a loan.

On the other hand, borrowers who take responsibility seriously may defer too long their requests for assistance because of reluctance to assume obligations which they may be unable to meet; or, if unable to meet their payments when due, may suffer such mental anguish that the supposed superiority of the loan policy is entirely negated.

Despite these difficulties, so long as public opinion remains what it is, grants to self-employed workers cannot be made in amounts sufficient to give them a new start in business except on a loan basis. In so far as loans, properly safeguarded, make possible the economic rehabilitation of borrowers they constitute a valuable social policy.

Social Services as Forms of Assistance

A major aim of authorities administering public aid is to help people to be no longer dependent upon it. Agencies often find it advantageous, therefore, to equip themselves to render special services designed to secure

this end. Some agencies assign specially trained workers to families that present difficult personality problems, such as discord within the family, inability to get along with employers or fellow-workers, or loss of confidence or ambition. In some agencies, particularly those in large cities, other special services—such as medical and dental treatment, placement in private employment, debt and insurance adjustment, legal advice, or business and vocational counseling—are provided by specially trained persons on the agency's staff. How many of these services a public assistance agency will attempt to develop depends upon several factors: the size and financial ability of the agency, the skill of its workers in detecting the need for special services beyond their own ability to supply, and the presence or absence in the community of other agencies equipped and willing to make the needed services available to the public agency.

If the community supports a private family welfare agency, a family guidance or a child guidance clinic, a department of visiting teaching in the public schools, or family or juvenile courts whose probation departments are able and willing to do preventive work, it may be possible for the public assistance agency to enter into cooperative relations with such organizations and secure from them intensive service in appropriate situations. Similarly the established clinics, dispensaries, hospitals, and visiting nurse services of the community, whether publicly or privately supported, may be relied upon to meet the need for medical treatment; the public employment service may do the

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assistance agency's job-finding; the legal aid society may handle adjustments of debt, property complications, garnishments, adoptions, guardianship; and so on. However, in places where there are no independent agencies offering these skilled services or where their resources are entirely taken up with the care of their own patients and clients, it is often necessary for the public assistance agency to add specialists to its staff and to employ on its own payroll physicians, psychiatrists, psychologists, dentists, nurses, case workers, lawyers, vocational and business counselors, or employment managers.

THE AMOUNT OF INDIVIDUAL GRANTS

The size of grants awarded individual beneficiaries is influenced by the same general factors as those determining the form which assistance shall take. In addition, the amounts granted will depend, among other things, upon the general standard of living which prevails in the community, the climate, availability of land for subsistence gardens, the degree to which odd jobs and part-time employment are obtainable, and the form in which assistance is offered. As pointed out already, grants are frequently larger when made in the form of wages or loans than when given as direct aid.

The old poor-law principle of "less eligibility," which held that public assistance grants should be kept lower than the earnings of the lowest paid laborer, was once the all-important factor influencing their size. Fortunately this policy is gradually being abandoned. There is a grow-

ing conviction that governmental agencies cannot be a party to beating down standards of assistance to the level of the most exploited and oppressed workers. This is especially true since government has been assuming increasing responsibility for establishing a national minimum standard of living below which no one, whether dependent on or independent of public assistance, shall be permitted to fall. In fact, the pendulum is now swinging the other way and public assistance, as indicated above, is frequently used to supplement wages that are too low to maintain a family in health and decency or to support workers who refuse jobs at substandard rates.

Specific amounts to be granted individual beneficiaries may be established by law, but are usually governed by administrative regulations. To date, legislation has usually set only maximum limits and has not attempted to specify minimum grants nor amounts to be given individual beneficiaries. There is a growing sentiment throughout the country in favor of eliminating all statutory limits from public assistance laws since the very nature of legislative processes makes it difficult to establish them upon a scientific basis, free from the effect of the many capricious forces to which legislators are subjected. What defense can be made for establishing maximum payments of \$30 a month for a family of three—a mother with two dependent children—and allowing the same amount to a single aged person, as is the law in many states, when both forms of assistance are supposed to be granted on the basis of need? Furthermore, fixed statu-

tory limitations are difficult to amend once they are established and cannot be made responsive to sudden changes in prices nor to more gradual changes in standards of living. Neither do they allow sufficient flexibility to meet special or unusual needs of beneficiaries. For these reasons it is considered preferable to place in the hands of administrative agencies rather than legislative bodies the function of establishing regulations governing amounts of assistance to be granted. In several states, recent laws have eliminated all maximum limits and permit the administering authorities to grant assistance in any amount considered necessary to meet a beneficiary's need. This administrative freedom may be illusory, however, if legislators do not appropriate sufficient funds to permit carrying out a flexible and adequate program.

Methods of Computing Grants

Regardless of whether maximum limits are established by law, methods of determining the size of grants to individual beneficiaries are usually prescribed by administrative agencies. In computing these grants two general methods are used. Their primary difference lies in the consideration which each gives to an individual's resources.

Grants established without regard to differences in the available resources of beneficiaries are usually based on some predetermined schedule like that establishing the wages paid on projects of the federal Works Program, which are scaled according to three factors: the general geographical region in which work is done, the kind of

work which each worker does, and the population of the immediate locality in which the project is located. Under this system, one worker earning a low wage might have a larger family, greater needs, and fewer resources than another who was paid a higher wage. Or, scheduled amounts of assistance might be prescribed, without regard to other resources, for men, women, or boys and girls of different ages. Further gradations might also be set up for adults whether doing manual labor, light labor, or none; and for children whether at home, working, or in school. Computing family allowances, when grants are made upon this basis, merely means adding together the sums thus allowed for each member of the family group.

Grants based upon fixed schedules have a great popular appeal. They savor of democracy and equal treatment for all. They appear, at first sight, to permit elimination of inquiry into individual income and resources; but this they cannot actually do as long as assistance itself continues to be based upon need. If scheduled grants could be made large enough to meet the varying needs of all persons eligible for them, much could be said in their favor. However, as long as public assistance funds continue to be as inadequate as they are now, it appears to most people that they should be distributed according to need, with full regard to other resources of beneficiaries. The so-called democracy of fixed grants is a mockery, unless such grants can be established at a sufficiently high level to provide a really adequate standard of assistance even to those in greatest need. Equal treatment of persons in un-

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equal circumstances may result in the most glaring and indefensible inequalities.

In contrast with the procedure just described, most agencies follow the so-called "budgetary deficiency" method of fixing the amount of individual allowances. This involves three steps: (1) determining the needs of each beneficiary and his family according to some prescribed method; (2) listing all the beneficiary's resources and those of his responsible relatives, in so far as these can be counted upon to apply to his needs; and (3) fixing the amount of the "deficiency" by subtracting the total of the resources from the "budget," or total needs.

The first of these steps is frequently oversimplified by legislatures when they fix an arbitrary sum which every beneficiary of a particular assistance program should have from all sources. Under these circumstances, the difference between a person's resources and the predetermined figure represents the amount of assistance allowable. Although this method makes allowances for differences in individual resources, it meets none of the other objections raised against scheduled grants nor the establishing of assistance standards by legislative action.

The budgetary deficiency method, at its best, requires carefully prepared policies regarding the items which may be included in the budget, the maximum cost allowable for each, and the kinds and amounts of resources that are deductible in computing the amount of the deficiency. Items allowed in the budgets of public assistance agencies vary from food alone to everything which is usually

thought necessary for the preservation of health, morale, and family well-being—such as rent, fuel, clothing, recreation, carfare, educational needs, medical care, insurance, taxes, and so forth.

In the standard budget, as in the scheduled grant, allowable items and amounts are graduated according to the number of persons in a given family group, their sex, ages, and special needs. They also vary according to the season of the year and sometimes according to a family's previous standard of living. When not established by some primitive rule of thumb, standard budgets depend upon data worked out by home economists. These show the kinds and amounts of low-cost foods which can be combined into a dietary suitable for sustaining in good health and efficiency families of different composition as to age, sex, condition of health, and occupation. Similarly, the amounts and kinds of clothing which the various members of the family need, the number of rooms which different-sized families should occupy, the fuel required for heating and cooking, proper amounts to be given for cleaning materials, lighting, replacement, and incidentals, are all computed and made available in published form. To determine the money equivalent of these items in a given community, it is necessary to secure local retail prices of the articles and services enumerated and to calculate the total cost upon this basis. Since price levels are subject to change, it is desirable to repeat the process once a year or oftener, and revise the standard budget up or down accordingly.

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Family budgets are sometimes adjusted according to the previous standards of living of individual families, allowing extra consideration to professional people, for example, should they fall into need, or restricting the allowances of those whose standards of living fall below average community standards. These adjustments often give rise to discrimination against minority groups and serve to perpetuate, with governmental approval, the social and economic inequalities imposed upon them. Policy on this matter will determine whether public assistance becomes another pillar to support the *status quo*, or a force to maintain and advance a minimum standard of life for the whole community.

The second step in determining the budgetary deficiency is to compute the total resources within the family group which can be applied to its budgeted expenses. The practice of agencies in computing resources is greatly affected by their policies regarding family responsibility and the granting of assistance in supplementation of other income. Agencies generally regard as resources the entire earnings of responsible heads of families; but they differ as to allowing other individuals within a family group to retain for their own use a certain proportion of their income. For example, one agency might calculate as family resources the entire wages of a working boy, while another would allow him to retain for his own exclusive use a generous portion of his earnings, which would not be considered part of the family's resources. The purpose of this latter policy is fourfold: to give such a person as much in-

centive as possible to continue in his employment; to allow him sufficient money to cover the costs of clothing, carfare, and lunches which are incidental to his employment; to permit him a normal degree of social life; and to preclude the possibility of his moving away from his family in order no longer to be held responsible for its support.

Similar complications in calculating resources occur when an individual within a family group is receiving some sort of categorical assistance or insurance benefit, such as compensation for industrial accident, a veteran's pension or bonus, or an assistance grant for blindness or old age. When, as is frequently the case, the agency administering these special grants is not the one that administers general public assistance, and when the whole family is in need of relief, perplexing questions arise which agencies answer differently. For example, should the entire amount of a nephew's service pension or a grandfather's assistance grant be counted as resources of the relatives with whom they make their home? Should each be required to contribute a fixed sum for board and lodging or should each pay his proportionate share of the entire living costs of the group? There has already been some discussion of the difficulties of securing from relatives who are legally responsible, but not members of the household, dependable agreements to contribute to its resources. The value of goods produced and consumed by the family itself must also be taken into account including farm and garden produce, fish or game regularly caught,

fuel gathered without cost, and rental if secured free or in return for services.

Whatever the method of computing family resources, public assistance workers agree it should not penalize the individual having resources by depriving him of the means necessary to meet his own needs, nor stifle his initiative by imposing seemingly unfair responsibilities upon him.

The final step in determining the budgetary deficiency is to deduct the total of all that may fairly be regarded as income for the family group from the total subsistence cost shown by the standard budget. The resulting difference or budgetary deficiency represents the amount which should be supplied as public assistance. It should be noted, however, that in practice, budgetary deficiencies thus arrived at are not identical with the amount of assistance which actually reaches beneficiaries, owing to chronic lack of funds for these programs. After computing such deficiencies according to prescribed standards, workers are frequently compelled to cut allowances on a percentage basis or according to some formula, should the agency's available funds prove insufficient to grant the total budgeted amounts. To avoid confusion some agencies distinguish between "awards" and "grants": the former being the amount for which the beneficiary is considered eligible and the latter the amount he actually receives. When, however, the agency's formula for cutting allowances means dropping out altogether some necessary item—such as rent—the time devoted to the minutiae of budget-making would seem to be largely wasted.

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The standard budget is in most agencies a flexible instrument; the fact that the need for clothing, fuel, and—to some extent—food fluctuates with the season of the year, and that income is likely to be variable and irregular, makes the public assistance grant of necessity variable also. The argument for careful budgeting is that it gives an assistance worker the best possible grasp of a family's economy, in order intelligently to adjust grants to changing conditions and to make sure that persons are helped according to their need.

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III

DEALING WITH PEOPLE IN NEED

IN PROVIDING for a general public assistance program and for relief to special groups—such as the aged, the blind, and dependent children—the federal, state, and local governments have defined the conditions under which relief may be granted as well as the kinds and amounts of aid to be given. The assistance laws assume, and rightly so, that all persons have in common certain basic physical and material needs that must be met if life is to be maintained. The amount and kind of food necessary for the health of the body, the minimum housing requirements consonant with decency and health, and other physical needs have been carefully studied and standardized. The assistance statutes recognize also that in satisfying even these purely physical necessities the worker must take cognizance of the fact that what the individual shall eat, what he shall wear, and where he shall live varies from person to person according to the particular tastes, habits, and standards of living of the separate individuals who make up the mass of the population.

But all human beings have also certain intangible needs

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that are not easily defined nor are the ways of meeting them easily standardized. Those elements that feed a man's morale, sustain his self-respect, encourage his initiative, give him a feeling that he is worth while as a person have to be ascertained individual by individual. Our concern with meeting physical needs and safeguarding relief funds in no way controverts an equal concern with conserving those individual and social values which are indispensable in helping recipients of public assistance to live lives as nearly normal as may be, both now and in the years to come. The well-being of society is as dependent—perhaps more so—on the morale and self-respect of its individual members as it is upon their continued physical existence. Injury to the individual's morale results in loss of ability to perform his normal function as a member of the community, and in a consequent injury to society. Efficiency in administering relief therefore depends not only on accuracy and precision in the routine of establishing eligibility and need, but on the "spirit within the wheels"—the supplementation of routine by an understanding of the personal and social values that each person has evolved for himself and that mark his difference from every other human being. The handbook of one state relief administration has thus defined this objective: "The paramount responsibility of the Commonwealth and of every person associated with it in this vast undertaking is to render assistance . . . in a manner and in ways which will help them [relief recipients] to maintain their self-

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respect and sustain their courage, which will strengthen, not impair, body and spirit.”¹

The importance of individualizing the person who is to be helped is not peculiar to the relief program. Physicians have learned that in treating illness they must understand not only the disease but the way in which the particular individual is affected by his illness. In education the trend has been increasingly toward “the adjustment of the curriculum, of equipment, and of teaching method to the needs first of different types and groups of children, with different educational objectives, and then of individuals within the groups.”² The method of individualizing the patient as well as his disease, of understanding the pupil as well as the subject matter of the curriculum, does not result from uniform rules and regulations. It depends rather upon the attitude of the physician or teacher toward the persons he is serving, upon his understanding of human behavior, and his ability to adapt certain generalized principles to each individual situation.

The essence of the process of individualization, which in social service is known as social case work, lies in understanding the way the particular individual responds to his different experiences and in treating him with respect for his differences. It is obvious that we can do no more here than suggest certain general procedures of social case

¹ Commonwealth of Pennsylvania State Emergency Relief Board, *Pennsylvania Emergency Relief Handbook*. August, 1933. Foreword.

² The Role of Individualized Services in a Public Welfare Program: Kenneth L. Pray. Paper given at Minnesota State Conference of Social Work, University Farm, St. Paul, September 16, 1937.

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work or individualized treatment that may contribute to the administration of public assistance. Their effectiveness in practice will depend largely on the attitude of the worker and his ability to establish a helpful relationship with the applicant—in other words, on his personal qualifications and training for the task he has undertaken. The consideration of the applicant as a human being with hopes and fears and characteristics peculiar to his individual nature should begin with his first contact with the agency and continue as long as he is receiving aid.

THE FIRST CONTACT

Most people face their first application for public assistance with considerable trepidation, varying in degree and kind from person to person. Quite apart from any feeling the applicant may have as to giving up his independence or as to the stigma of relief, he finds himself in an unfamiliar situation. He does not "know the ropes." He is frequently fearful of what he has heard about red tape, the required investigation of his resources, the "hardness" of the workers. He cannot choose the worker who is to serve him. He has had nothing to do with formulating the conditions of his eligibility for relief. At best he feels himself at a disadvantage in pleading his own cause.

This sense of being at a disadvantage is often intensified for the individual who is eligible only for general as distinguished from categorical assistance. The provisions for categorical relief under the social security program have given a degree of respectability to these selected

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groups, both in their own eyes and in those of the public at large. No such respectability has been accorded the heterogeneous group of unemployed, "unemployable," physically sick, or inadequate persons whose needs are cared for under the less well standardized and usually less liberal provisions for so-called general public assistance. The applicant for general relief, therefore, is likely to have in addition to his other troubles the feeling that he is less well thought of than those eligible for relief in the categorical groups. He is only too conscious that however legitimate his need, however keen his desire to support himself, the community may consider him shiftless and lacking in self-respect—not quite respectable. He himself, before his need for aid became urgent, may have had similar feelings about people on relief. Therefore, he frequently feels that he has lowered himself in asking for help, that he has set himself off as different in quality from those of his fellow citizens who are so fortunate as to be self-supporting or to receive categorical assistance.

The first contact with the agency should be such as to allay, not increase, these unnecessary and hampering feelings. The equipment and atmosphere of the office itself should be such as to make the applicant feel that in coming for help he is not obliged to leave his self-respect at home. The office should be easily accessible; it should be businesslike in its equipment; the reception room for applicants should be well ventilated, with adequate furniture. There should be separate rooms or booths where the applicant can tell his story to the worker. The usual

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procedure in many relief offices is to use the first visit to get only the necessary identifying data—names, ages, address, and information as to need—and, unless relief is urgent, to make an appointment for the applicant to see an interviewer at a later date. This method has done much to obviate the crowded waiting rooms and the resulting tension for both applicants and workers. Frequently the applicant is given an application blank to fill out at home and bring with him, together with required documentary evidence of age, residence, and so forth, when he returns for his appointment.

The office staff, particularly the clerk who may be in charge of making appointments, should be impressed with the importance of courtesy at all times, both in personal conversations and over the telephone. So far as possible the office organization should be such that the applicant does not have to tell his story to a number of different people, have his name shouted in unnecessarily loud tones, or be subjected to other procedures likely to make him feel at a disadvantage. Applicants may become indifferent to brusqueness and general lack of consideration on the part of the agency staff, but if this indifference is purchased at the cost of a normal sensitivity it may do irreparable injury.

Whether the first or intake interview is held on the applicant's initial visit to the office or by later appointment, it should be as early as circumstances will permit. If it is unavoidably delayed the applicant should understand the reasons for the delay so that he will not feel it is due to lack of interest in him and his needs.

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The initial interview is important because through it the worker secures information necessary to determine whether relief shall be granted or refused. Even more important is the understanding it gives of the way the applicant feels about his problems and his ability to meet other than economic difficulties that may be affecting his use of relief. Last, but not least, the initial interview is the first step in giving the applicant that feeling of confidence in the agency and its workers which is essential to the conservation of his morale. The slight formality implied when the first interview is arranged by appointment may allay some of the applicant's fears and help him feel at ease through its suggestion of special consideration.

We have spoken of the importance of private rooms, however small, for interviewing so that both worker and applicant may be free from the distractions of interruption and the fear of being overheard. There are other factors that make for a successful interview, most of them dependent on the attitude of the worker toward and his genuine interest in the applicant as a troubled human being and his skill in interpreting not only what the applicant says but the undercurrents of feeling indicated by his manner, his silences, his gestures. Someone has said that in every interview the skilful interviewer will get a clear idea of: (a) what the applicant wants to say, (b) what he does not want to say, and (c) what he cannot say without help.

Some of the principles of successful interviewing which are helpful for the worker to bear in mind not only in the

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initial contact but in later interviews as well may be briefly summarized.

The skilful worker starts an interview with the assumption that each applicant is different from every other; that there is no routine procedure which will be equally successful with all; that the response of the applicant will depend not only on his intelligence but on his previous experience. He will have to help some people find words to express their meanings. One man who is terrified at having to ask for outside help will be shamefaced and sullen, resentful of questions, and act as if he were guilty of some crime. Another, equally frightened and reluctant to ask for money, will be blustering and demanding. The skilful interviewer must be able to understand not only words but manners. He will realize that each applicant may need not only money but some assurance that the community in which he has lived and worked is not unmindful of him as a person. It is in large part the attitude and manner of the interviewer that will give this needed reassurance.

The applicant will give more information and a clearer picture of his feelings if he is allowed to tell his story in his own way. Usually he comes with some need that seems urgent and he will be confused and frequently inaccurate if he is met with a series of routine questions. Morris Markey, writing in a popular periodical, has thus described a first interview: "The initial interview was in the free style, rather than a series of answers to formal questions. The applicant was invited to talk about his

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problems at length, not only his financial affairs but his domestic ones, how he was feeling about things in general, how his wife was standing up under the woeful times, how the children were behaving. Did he see any chance of getting a new job? And what was the health condition of his flock? Were the children old enough and well enough to work if places could be found for them?" The "free style" interview actually takes no more time than the question-and-answer interview, because it follows the tracks already laid in the applicant's mind instead of forcing him to travel the unknown country of the interviewer's line of thought. General questions, such as "How have you managed to get along until now? What plans have you for the future?" imply that the applicant has not only a responsibility but a right to determine his own affairs, and prevent his feeling that in accepting aid he has relieved himself from the necessity for all activity in his own behalf.

Even though the time available for the interview is limited, if the worker feels unhurried and relaxed there will be a sense of leisure that will enable the applicant to cover the necessary ground.

The application blank, whether already prepared or to be filled out during the interview, may be helpful to some applicants in giving them something to focus on. Care must be taken, however, to make sure that this form is not introduced in such a way as to bewilder the applicant further. An explanation of assistance requirements will also be helpful, as it will give the applicant a feeling that the

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request for information does not imply suspicion of his integrity. Such an explanation should emphasize the fact that relief regulations are a protection to him as a citizen as well as to the other members of the community. Thus he may become a partner in the relief administration.

The worker should know the resources of the community and use this knowledge to help the applicant find a solution, when possible, not only of his economic but of his other problems as well.

Frequently the applicant has been "milling around" ineffectually in a chaos of difficulties, all of which seem to be insuperable. If the worker is able to suggest some definite action, however slight, that the applicant can take, it may serve to focus his attention on something he can do instead of on all the things he cannot do. The way in which he responds to the suggestion, the way in which he undertakes the task, and his interest in doing it will also give considerable insight into his desire and ability to help himself.

INTERVIEWING REFERENCES

At some time during the initial interview the worker should explain that calls will be made on such references as are in a position to give verification of eligibility and need. It is well to assume in a matter-of-fact way that references are just as necessary where assistance is being asked for as they are where a person is applying to a bank for a loan. The applicant for relief is frequently fearful that the worker will "talk him over" with friends, rela-

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tives, or employer in a way which will be unflattering to him. Often, from a sense of pride, he has kept all knowledge of his difficulties from those he knows best. To confer with references without the applicant's knowing it is being done is likely to arouse resentment and hostility toward the worker and the agency.

In approaching references given by the applicant the worker must, as in all his other procedures, have clearly in mind the two-fold objectives of relief administration—to individualize both the need and the person. Verification of need and eligibility then becomes only part of his total objective in interviewing references. There is always a possibility that the worker may discover resources of which the applicant himself may not have been aware or may have been reluctant to use. More important still, the worker should try to get from employers and other references what they can tell about the applicant's abilities, his standards of living, his personal characteristics. Many assistance workers are likely to think of interviews with relatives as only attempts to uncover hidden resources. The possibility that ways may be found of helping the applicant maintain his morale needs to be emphasized not only in approaching relatives but also in interviewing physicians, clergymen, and others on specific problems.

Information gleaned from references will have little worth unless it is evaluated, correlated, and interpreted in relation to the applicant's need. Frequently the information from two apparently equally reliable sources will be absolutely contradictory. The skill of the worker comes

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into play in the evaluation of the source of the information as well as of the statements made. Contradictory material may indicate the need to approach additional references. For example, the personal resentment of a disgruntled landlord, impatient for his rent, may be so obvious as to lead the worker to question the value of his statement. Documentary evidence is, of course, freer from these dangers of personal bias.

The worker who keeps in mind that the information he gathers from references is for the benefit of the client will not be likely to mistake opinions or rumors for fact. He will stress any evidence as to strengths or weaknesses in so far as it gives additional insight into the applicant's individual personality. Thus the investigation required by law will, in the hands of the skilled worker, become a constructive tool in helping the applicant live a normal life.

HOME VISITS

The home visit that is also a required part of most assistance procedures is an important device for arriving at an understanding of the individual applicant. Its value lies in the opportunity to observe him in the environment, however deprived, which is essentially his own. If the applicant is a member of a family group, the worker will be able to gain some understanding of the feeling of different members of the family toward one another. If the head of the family is unemployed or unemployable, the home visit will give some indication as to whether the

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wife and children are intensifying his feeling of inadequacy and failure. The worker may discover other problems, such as rebellious behavior on the part of children or lack of consideration for an elderly relative, that are as disturbing to the applicant as economic distress. Even where it has been necessary for applicants to move to progressively poorer neighborhoods and to dispose of many of their belongings there may still be some indication either in the furnishings or in the way the home is kept as to what the applicant values. His true standards of living are more likely to be revealed here than in an interview at the unfamiliar relief office.

It is obvious that visits to the home will be of little value unless the worker understands why he is making them. And his use of what he has learned will depend upon his skill in evaluating the intangible as well as the material facts he has observed.

CONTINUING CONTACTS

When need and eligibility have been established, the relationships begun in the initial interview and strengthened by visits to references and the home become part of a series of continuing contacts that may extend over months or years. The suggestions made in preceding sections are equally applicable throughout the whole period in which assistance is granted. There are, however, some additional points that need to be made.

An individual is constantly trying to effect a workable

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adjustment between his inner need to be different from others and his equal need to conform to the demands of society that he follow a definite cultural pattern. This conflict, whether slight or intense, is an important factor in the development of the personality.

With the granting of aid the relief applicant becomes the relief recipient. Whether or not he likes the kind or amount of assistance he receives his condition is better than it was. He may feel that one of the conditions of his continuing to get aid is that the agency shall have the right to decide not only the amount and kind of assistance he receives but how and where he shall live, how he shall bring up his children, and where he shall seek his recreation and companionship. In other words, he may feel that he has become a puppet, with the strings in the hands of the worker. Sometimes an unskilled worker is well satisfied to have the beneficiary take such an attitude. He may even use the threat of withdrawal of relief as a weapon to force the recipient to do what the worker or the agency thinks is "right" for him to do. The recipient may then become "grateful" and "cooperative" and do as he is told. If the situation continues the worker may become impatient with the recipient's expectation that the agency will make all his decisions for him. He—the worker—may indulge in vague grumblings: "Public assistance pauperizes people; all people on relief are lazy; they expect you to do everything for them;" and so forth.

The continuing contacts with the recipient of assistance call, therefore, for something more than perfunctory re-

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view of eligibility and need. They offer opportunities to help the individual grow through the expression, in activity, of his need to live his own life. Here again the skill of the worker is shown in his ability to gauge the responsibility the recipient can carry without breaking under the burden. Is it desirable that he move to a different house or apartment? Within the limitations of the allowance for rent, he should find and select his own living quarters. Does he need health care for himself or other members of his family? He should be given information as to available resources, what the relief agency will pay for, the office hours and procedures at different clinics; and, so far as he is capable of doing it, he should himself select the clinic he will go to and be responsible for following through with necessary treatment. The worker may need to stimulate his interest and allay his fears but as a rule should not take responsibility for leading him by the hand, as it were, to the services which will benefit him.

The parent on relief may be helped to gain insight into why the children behave as they do, or into the sources of marital conflicts, but the worker should not attempt to discipline the children or make decisions as to how the conflicts should be resolved. Even where assistance is granted in kind instead of cash, the worker may find it possible to give the recipient opportunity to follow his own taste by making a selection among items allowed on an order. Always it is desirable to let him understand the process by which his budget is arrived at. Every contact, if skilfully used, will add to the worker's understand-

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ing of the beneficiary and thereby add increasing strength to the relationship begun in the first application for assistance.

Knowledge of resources in the community—private family agencies, child caring agencies, neighborhood centers, and so forth—enables the worker to help the recipient get needed social services which the assistance agency may not be equipped to give. Here again, however, it is the beneficiary's responsibility to decide whether or not he wishes to make use of these resources. The worker should be able to explain the nature of other agencies' services and outline the procedures involved in applying for them, but he should not make the beneficiary's application for him. An interpretation to the other agency of the applicant's situation and need is, however, desirable.

These principles are equally valid whether the applicant is in the undifferentiated group receiving general assistance or in one of the categorical groups—aged, dependent children, blind—established under the social security program. The worker with any of these special groups is, however, faced with certain additional problems, part of them due to the needs peculiar to the different groups, part of them to community feeling about these groups, and part to the worker's own attitude toward them.

Undoubtedly one result of categorical assistance has been to make its recipients regard assistance as a right. This has both desirable and undesirable implications. The stigma of receiving relief, which is likely to injure the applicant's self-respect, has been reduced to a minimum.

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He has been recognized as an individual worthy of special attention. He can and does identify himself with others in the group without loss of personal pride. The conditions of eligibility and need are more clearly established than for the general assistance group. The grants are, on the whole, fairly liberal and are usually given in cash rather than in kind, whereas for the undifferentiated group relief in many communities does not cover the whole cost of food, shelter, fuel, clothes, and so forth, and is frequently given in the form of orders with the implication at least that the recipient cannot be trusted with cash. The general public has likewise accepted the fact that categorical assistance carries no stigma with it; it is comparatively easy to understand the general needs common to a selected group. The worker responsible for giving aid to such a group usually shares the feeling of the recipients and of the community that relief on this basis carries no stigma with it. Workers whose activities are confined to a group presenting similar social needs acquire specialized knowledge and skill in meeting these needs with resultant benefit to recipients.

It is obvious, however, that conviction of his right to public assistance may decrease the resourcefulness and initiative of the individual not only in the economic area but in other areas as well. Identification with a group having similar needs may result in united effort to secure preferential treatment, indicating some lessening of a desirable feeling of social responsibility. Community acceptance of categorical assistance may tend to develop a

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feeling of self-satisfaction, a sense that the needs of these groups can now be dismissed as taken care of, and thus tend to crystallize both relief and methods of administration at a relatively low level. The worker also may tend to oversimplify his task. He may focus attention on the disability instead of the personality of the recipient. Classification of relief recipients should not—as it too often does—entail accepting the classification as a unit of treatment without regard to differences in individual situations within the group. Inflexibility of categorical provisions may lead to evasions and misrepresentations by both worker and applicant in order that an applicant may be accepted for needed care.

OLD AGE ASSISTANCE

The aged are more likely to be thought of as all alike than any of the other categorical groups. They are old; their lives are nearly over; once their eligibility and need of assistance are proven, what do they need beyond the weekly or monthly check? As one young worker said, "Well, after all, is there really anything to do for our aged clients except to see that their checks go out with regularity?"

Perhaps we would be more helpful were we to think of these persons not as "the aged" but as individuals with a longer background of living and experience, who are as different one from another now as when they were twenty or forty years of age. We tend to think that our task is well done when we have made them comfortable, and we

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think of "comfortable" in terms of food and shelter and warmth.

Although the majority of the aged may accept their right to assistance with greater equanimity than does the younger group, this acceptance is not universal. The man of seventy years of age who has lived by his own efforts all his life is often reluctant to give up his independence. He may be convinced that he can still work and that he is as good as or better than his juniors. He cannot bear to think of himself as on the shelf. The aged are not a type any more than the unemployed are a type. "They stand out vividly as personalities, each the product of his own life experiences and the prey of his individual hopes, fears, and necessitous circumstances."¹

The worker with the aged soon finds that the apparently mechanical procedure of establishing eligibility and need presents peculiar difficulties. Many old people who are both able-bodied and able-minded are confused by the routine questions they have to answer and are impatient of delay. One worker has found that it is usually possible to get the pertinent facts if the applicant is encouraged to talk about his childhood and early years—which are often much clearer in his mind than recent happenings—and thus gradually to lead his memory down to the present. Even with the greatest skill on the part of the interviewer, however, documentary evidence as to date and place of birth and residence may still be lacking. Infinite pa-

¹ Browning, Grace, "Social Service and the Aged," in *The Family*, December, 1936, pp. 271-272.

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tience, imagination, and ingenuity are required if the program is to benefit those for whom it is designed.

The worker must understand the special health problems that come with advancing years, treatment of which is frequently blocked by an individual's fear of doctors and clinics as well as by his inability to adjust himself to clinic procedures. It is clear that in such cases the worker will find it necessary to understand the particular feelings of the individual before he can make satisfactory arrangements for health care.

Similar differentiation is essential in arranging for living quarters. The worker must understand the elderly person in order to determine whether he should have institutional care, make his home with congenial relatives, or live elsewhere. But the final choice, except where there is serious impairment of mental condition, should be made by the relief recipient—always, of course, with full information as to the advantages and disadvantages of the different possibilities. Not all old people can or should be cared for by members of their own families even where such exist. Sons, daughters, or grandchildren may resent the presence of members of the older generation and their demands for special consideration. Where houses or apartments are small the old person as well as the younger members of the group become irritated and short tempered. The worker should be able to understand and interpret to relatives or others with whom the old person chooses to live, his need for friends, for a place in the world where he can feel himself important, and his desire

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to be alone occasionally. One fairly common worry of elderly persons is their fear of "pauper" burial. This often makes them afraid to reveal their resources, no matter how small such may be.

In China, we are told, old age is revered not because it is pathetic or helpless but because it has learned so much. If the worker has this attitude toward the elderly people he serves, he has one of the basic qualifications for effecting the intangible as well as the economic objectives of the program for relief to the aged.

SPECIAL NEEDS OF CHILDREN

Provisions for the care and protection of children have been generally accepted as a community responsibility for two fairly obvious reasons. First, from the purely physical point of view children are naturally dependent upon others for care and sustenance. Second, because the children of today are the citizens of tomorrow, it is to the interest of society that they shall have such opportunity for physical, mental, and moral development as will fit them to become useful members of the community. Institutions for the care of orphans or half-orphans were among the first evidences in this country of a community acceptance of social responsibility. As early as the middle of the last century some state governments made provision from public funds for children whose parents were unable or incompetent to care for them properly. Societies for the protection of neglected children were organized in the 1870's.

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The calling of the first White House Conference by President Roosevelt in 1909 gave recognition that adequate standards for the care of children were definitely of concern to the state. This Conference stressed the values to the child of care and nurture in his own home. A second White House Conference, in 1919, reaffirmed the principles set forth in 1909; and a third, in 1930, promulgated the Children's Charter which emphasized still further those factors shown by experience to be essential to a child's preparation for useful adult life.

The Children's Charter

- I. For every child spiritual and moral training to help him to stand firm under the pressure of life
- II. For every child understanding and the guarding of his personality as his most precious right
- III. For every child a home and that love and security which a home provides; and for that child who must receive foster care, the nearest substitute for his own home
- IV. For every child full preparation for his birth, his mother receiving prenatal, natal, and post-natal care; and the establishment of such protective measures as will make child-bearing safer
- V. For every child health protection from birth through adolescence, including: periodical health examinations and, where needed, care of specialists and hospital treatment; regular dental examinations and care of the teeth;

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protective and preventive measures against communicable diseases; the insuring of pure food, pure milk, and pure water

- VI. For every child from birth through adolescence, promotion of health, including health instruction and a health program, wholesome physical and mental recreation, with teachers and leaders adequately trained
- VII. For every child a dwelling-place safe, sanitary, and wholesome, with reasonable provisions for privacy; free from conditions which tend to thwart his development; and a home environment harmonious and enriching
- VIII. For every child a school which is safe from hazards, sanitary, properly equipped, lighted, and ventilated. For younger children nursery schools and kindergartens to supplement home care
- IX. For every child a community which recognizes and plans for his needs, protects him against physical dangers, moral hazards, and disease; provides him with safe and wholesome places for play and recreation; and makes provision for his cultural and social needs
- X. For every child an education which, through the discovery and development of his individual abilities, prepares him for life; and through training and vocational guidance prepares him for a living which will yield him the maximum of satisfaction
- XI. For every child such teaching and training as will prepare him for successful parenthood, home-making, and the rights of citizenship;

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and, for parents, supplementary training to fit them to deal wisely with the problems of parenthood

- XII. For every child education for safety and protection against accidents to which modern conditions subject him—those to which he is directly exposed and those which, through loss or maiming of his parents, affect him indirectly
- XIII. For every child who is blind, deaf, crippled, or otherwise physically handicapped, and for the child who is mentally handicapped, such measures as will early discover and diagnose his handicap, provide care and treatment, and so train him that he may become an asset to society rather than a liability. Expenses of these services should be borne publicly where they cannot be privately met
- XIV. For every child who is in conflict with society the right to be dealt with intelligently as society's charge, not society's outcast; with the home, the school, the church, the court and the institution when needed, shaped to return him whenever possible to the normal stream of life
- XV. For every child the right to grow up in a family with an adequate standard of living and the security of a stable income as the surest safeguard against social handicaps
- XVI. For every child protection against labor that stunts growth, either physical or mental, that limits education, that deprives children of the right of comradeship, of play, and of joy
- XVII. For every rural child as satisfactory schooling

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and health services as for the city child, and an extension to rural families of social, recreational, and cultural facilities

XVIII. To supplement the home and the school in the training of youth, and to return to them those interests of which modern life tends to cheat children, every stimulation and encouragement should be given to the extension and development of the voluntary youth organizations

XIX. To make everywhere available these minimum protections of the health and welfare of children, there should be a district, county, or community organization for health, education, and welfare, with full-time officials, coordinating with a state-wide program which will be responsive to a nation-wide service of general information, statistics, and scientific research. This should include:

- (a) Trained, full-time public health officials, with public health nurses, sanitary inspection, and laboratory workers
- (b) Available hospital beds
- (c) Full-time public welfare service for the relief, aid, and guidance of children in special need due to poverty, misfortune, or behavior difficulties, and for the protection of children from abuse, neglect, exploitation, or moral hazard

For every child these rights, regardless of race, or color, or situation, wherever he may live under the protection of the American flag

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This pronouncement has focused society's attention on the needs of all children and has accelerated the development of skilled services to meet those needs. It has affected the work of the public schools and has resulted in an extension of vocational training and guidance, medical and social care for the physically or mentally handicapped, and efforts through child guidance clinics to prevent or cure emotional problems likely to result in anti-social behavior.

It is noteworthy that the Children's Charter places such importance on the intangible as well as the material needs of the individual child, and that it puts at the head of the list the preservation of the integrity of the child's personality. This implies that any effective service to children must be based on an individualized study of each child.

Emotional Factors

The worker administering general public assistance to families in which there are children should be aware of the emotional factors that further or hinder a child's development. There are definite ways of judging a child's physical surroundings, the adequacy of his diet, his health needs, and so forth. But an evaluation of the emotional factors that enter into his development is a more difficult process. These factors arise from the interaction of personalities within the family group, such as the relationship between the parents, of the parents to the children, of the children to one another; and from the feeling the family has about its dependency—its real or fancied loss of prestige, its disappointment, and its sense of hopelessness.

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ness. Feelings are not easily understood and are even less easily measured: love that is enough for one is too little for another. They vary greatly from family to family and from individual to individual within the same family group. To understand whether the family is furthering or hindering the growth of the child as a person demands every available skill in individualizing the child himself and the other people in his environment.

Of great importance for the child is the feeling that he has a place in a group to which he belongs. His need for affection is as great as his need for food. If he feels secure, feels he is wanted and loved by his parents, he is not likely to resort to lying and stealing or other anti-social behavior. He needs also the opportunity to do things for himself and for others in so far as his mental and physical abilities permit. Too much protection, too much interference with activities that he initiates himself, is likely to result in his continuing the dependency of childhood into his adult life.

The child in the family receiving relief will inevitably be affected by his parents' attitude toward their economic dependency. He will suffer not only if the relief is inadequate but if there is dissension or emotional tension between his parents, even if this is not expressed in words. Different children will show their emotional difficulty in different ways. Some will try to get attention through being "naughty," some will be too compliant—hoping in that way to win the affection of their elders. Some will have digestive upsets or exhibit food prejudices which will

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bring to them the attention they feel they might not get otherwise. Children of foreign born parents may have behavior problems because of the differences between their parents' standards and those of the community. Adopted children and the children of unmarried mothers may be disturbed and hampered because they feel they are queer or different from others.

The public assistance worker will thus need to remember that an orderly house, good discipline, and adequate diet do not constitute the whole of a proper environment for a child's development. Unless the family is giving that understanding which will safeguard and develop personality, the child will fail to receive his due despite all material relief that may be given.

Placement of children in foster homes or institutions is sometimes resorted to when it appears that no other course will furnish the necessary protection. It is generally accepted that no child should be removed from his own home because of poverty alone; hence the increasing assumption by government of responsibility for relief to families, for assistance to mothers with young children, and for special aid to dependent children. Ordinarily the public assistance worker will not himself make the final decision as to whether children should be placed in other than their natural homes. He will ask a public or private children's agency to assume this responsibility and make the necessary plans. A child may need to be protected from the neglect—either moral or physical—of his parents, or he may be manifesting behavior difficulties which,

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unless individually treated, may result in delinquency. If he is mentally or physically handicapped he may require special care or a more protected environment than his family can provide. The public assistance worker should therefore not only acquire skill in understanding the needs of the individual children in the families he is serving, but should also have knowledge of both public and private agencies in the community that may supplement his services through accurate diagnosis of the child's need, suggestions for his treatment, or actual assumption of responsibility for his care.

AID TO DEPENDENT CHILDREN

The provision of aid to dependent children in their own homes, established a generation ago as "mothers' aid," has been extended under the social security program. In its interpretation of this program the Social Security Board makes the following statement: "According to the best estimates available, there are more than a million dependent children in this country. In caring for them in their own homes the Government is making a wise investment in its future citizens. The importance of normal home life in childhood cannot be overemphasized. It is the best guarantee not only of the child's present but also of his future. If these million dependent children are to grow up in their own homes, assistance must be provided so that these families will not be broken up by poverty. The occasional unreliable relative who seeks assistance not for the child's sake but for his own must always be reckoned

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with, and every effort must be made to safeguard children from home conditions which are unfavorable to wholesome development.”¹

The returns on the “wise investment” intended by the program depend, then, not only on the adequacy of the relief income but on the ability of the responsible adult and the family as a whole to provide those influences that make for wholesome development.

The child receiving assistance under the aid to dependent children provision may have needs arising from his peculiar situation in addition to those common to all children. The dependent child finds himself in a family that has suffered some dislocation in its normal relationships as well as in its economic life. Different children in the same family react differently to this disruption and the responsible adults will, from family to family, vary tremendously in their feeling of loss and disturbance. If the father is no longer in the home, for whatever reason, or is incapacitated through physical or mental illness the worker should recognize that this type of dislocation may have serious emotional as well as economic implications for the mother and the children. Where the father is still at home but unable to earn, there may be equally serious implications for him. The worker needs to make every effort to understand the special emotional patterns that have existed in the past between the parents, and between the parents and the child. A knowledge of their previous

¹ Social Security Board, *Aid to Dependent Children under the Social Security Act*. Informational Service Circular No. 6. 15 pp. November, 1936.

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standards of living and of their social contacts and relationships outside the home contributes additional insight into the varying needs of the present situation.

Assistance to dependent children presents some special problems because it usually continues for a long period of time. The adult responsible for the care of the child may need help in making satisfying contacts outside the home. She—or he—may need help in understanding the child's behavior, his resistance to discipline, or his school problems. Frequently the worker may be able to help in making the home a more constructive influence in the child's life. But with this group particularly the worker should be on his guard against assuming responsibility that should be carried by the family, both for the sake of the child and for that of the parent or relative. Since the worker is the apparent source of the family's income the child may be confused as to the person to whom he is responsible for his actions, with resultant confusion as to his relationship with parent or guardian. The older child may, of course, feel deep resentment that the family must seek outside help, however "respectable." He looks upon the worker's visits as another indication of the depths to which he feels the family has sunk. "Without special handling this attitude, once it has arisen, may develop rather seriously into a more diffuse disappointment and chip-on-the-shoulder state, or into a fatalistic acceptance of an attitude of dependency with a minimization of individual effort."¹

¹ Greenacre, Phyllis, "Consideration of the Role of the Father in Treatment of a Mothers' Aid Situation," in *The Family*, January, 1933, p. 293.

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It may help such a child if the worker can give him, through the parent, an interpretation of the reason the government has made provisions for assistance. It is sometimes useful to draw an analogy between the aid to dependent children provisions and the public school movement, indicating that the former is an extension of education to include home as well as schoolroom training.

AID TO THE BLIND

The common and inaccurate use of the phrase "blind pension" suggests that most people regard assistance to the blind not as relief but as compensation for blindness. There can be, of course, no question that sightless individuals need special consideration. They may need help in adjusting to their handicap for, contrary to general opinion, not all are happy and cheerful in their blindness. They frequently need special health care, not only for the condition of their eyes but because of ailments that may or may not be connected with their sight. "The general health of the larger number of the blind may be said to be little different from that of sighted persons. In some, however, there is lowered physical stamina resulting from the inactive life led or from the presence of other physical infirmities. Many of the blind are in need of recreation and fuller outdoor life."¹

It has long been recognized that the blind may need

¹ Best, Harry, "The Blind," in *Social Work Year Book*, 1937, p. 41.

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some special training to enable them to feel themselves to be a part of the community as well as for the sake of a possible, even though slight, addition to their income. As Helen Keller has said, "Idleness is worse than blindness." In most communities there are both state and private agencies that offer vocational training opportunities to sightless children and adults. But "The blind have much to bear besides their economic handicap. Dependence upon others in various circumstances of life, unremitting strains upon vitality, frequent status in the community as being little more than 'objects of charity,' and gaps of one kind and another between them and their sighted fellows—all serve to intensify their unhappy lot. They are forced to suffer unnecessarily from popular misconceptions regarding them, based largely upon lack of understanding of the part which the sense of sight plays in the ordering of one's life, upon failure to realize the place of the remaining senses and mental faculties when sight is gone, and upon other similar considerations."¹

What, then, are the special knowledge and skills that the relief worker needs if he is to give assistance in such a way as to enable the blind to "live lives as nearly normal as possible"? Basic to such help is the concept we have so often repeated in this discussion—it is essential to understand the person as well as his illness. The meeting of health needs and the training for activity that will bring satisfaction if not complete independence are determined by the special needs and capacities of the individual. The

¹ *Ibid.*

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person who has lost his sight has, we must remember, a past as well as a present. What did he do before he became blind? Which of his former aptitudes can he still use? A blind banker who nearly lost his mind trying to learn how to cane chairs was able, with intelligent help, to become an expert credit manager. How do those with whom he lives treat him? Are they overprotective, hindering him in his every effort to do things for himself, or do they resent the burden that his care puts upon them? There will be special problems, varying from individual to individual, of getting the blind person to doctor or clinic, of making sure that he has facilities for carrying out suggested treatment, of helping him get to and from vocational class or shop. Assistance to the blind is a long-time service, as the cause of dependency and the principal factor of eligibility are not likely to change. This unchangeability may infect the worker as well as the blind person with a feeling that since nothing can be done about the blindness there is no use in trying to do anything. In such instances, the idea of special consideration implicit in assistance to the blind is likely to be lost sight of.

In addition to utilizing available skills in individualization, the worker with the blind will need to inform himself of the various causes of blindness. He should be sufficiently familiar with public and private agencies working with the blind to be able to mobilize needed resources for the individual receiving relief. Biographies of blind persons, such as the *Story of My Life* by Helen Keller, or

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even novels about the blind, may increase the worker's imagination and ingenuity in helping recipients of blind aid to lead satisfying and productive lives.

MARGARET E. RICH

IV

PROBLEMS OF HEALTH AND MEDICAL CARE

AN ESSENTIAL aspect of all public assistance programs is provision for health, since the individual's fullest capacity for self-maintenance can be developed only if he is physically and mentally sound. An Arabian poet once wrote: "He who has health has hope, and he who has hope has everything." One may question the idealism of this statement, knowing that many factors in our social order limit man's striving for a satisfying life, but no one will question that health influences significantly the welfare of every individual.

Sociologists and economists as well as physicians have long recognized the relation between poverty and disease. Such careful thinkers as Beatrice and Sidney Webb have pointed out that "In all countries and at all ages it is sickness to which the greatest bulk of destitution is immediately due." The costliness of disease to the individual and to the community has been demonstrated in numerous studies by medical authorities and health groups.

The public assistance worker will frequently be called upon to aid individuals whose need has been precipi-

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tated by illness. For example, a family may turn to a social agency for help because the father—its only wage-earner—has become ill with pulmonary tuberculosis and needs a prolonged period of sanatorium care. Pending his gradual resumption of full activity the family is deprived for a year or longer of its only source of income. Another family may seek aid because the mother, ill for several months with heart disease, is unable to continue with the care of her children and household. In the effort to manage as long as possible without aid, savings may have been exhausted in meeting doctors' bills and hospital fees, and sacrifices made which may have been detrimental to the health of the entire family. In such a situation the chronic invalidism of the mother may prove to be a perpetual drain on the resources of the family, keeping it at a low standard of living and necessitating partial assistance from the community.

BASIC HEALTH FACTORS

Just as illness may lead to dependency, so conditions of poverty may give rise to illness. Tuberculosis is caused by infection by a germ—the tubercle bacillus—which most frequently enters the body through the respiratory tract; but the individual's resistance to infection by such a germ may depend to a large extent on the way in which he is or has been living. How adequately he is nourished; the amount of sleep, exercise, and recreation he gets; whether his home is clean, properly heated, and not overcrowded;

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whether at work he is exposed to dust, fumes, or the expectoration of an infected person—all these are factors in every-day living which have a direct bearing on his susceptibility to infection. Again, while physicians do not know the specific cause of rheumatic fever, with its frequent aftermath of heart disease, chorea, or crippling arthritis, they have seen case after case which was preceded by seemingly minor “colds” and sore throats. Children and adults living in damp, poorly heated rooms, sleeping three and four in a bed, deprived of the foods that build up the body and give it energy, cut off from sunshine and fresh air, are likely to have one minor illness after another which lowers their resistance and paves the way for serious disease.

It is because the growth and development of the body and its resistance to disease are so vitally affected by these fundamental elements of food, shelter, and hygiene that in every situation the public assistance worker finds himself concerned with factors directly related to health. A knowledge of what constitutes adequate nutrition, suitable housing, and correct hygiene is basic, therefore, to any plan for meeting human needs effectively.

Nutrition

The selection and preparation of food is one of those aspects of daily living—like the concept of health itself—which people tend more or less to take for granted. Actually, few persons know how to select foods which provide

the elements essential for the growth and nutrition of the body. One's choice may be determined by racial customs, types of food available in a given locality, personal preferences, the appeal of advertising, or—more important than any of these—by one's income. In any effort to make adequate dietary provision for a given individual or family, the significance of these factors must be fully understood.

The public assistance worker can plan budgets that allow for the right kinds and amounts of food and can help families to utilize their food allowances to the best advantage. Such planning requires an understanding of what food elements are essential to nutrition and of what foods furnish these elements, although the specialized knowledge of the dietitian is not required of the assistance worker. A body of scientific information regarding nutrition is readily available. Manuals on dietetics prepared for lay persons, material on low-cost diets issued by governmental agencies, and the health and food columns of daily newspapers and magazines will be useful guides. Should a nutritionist be employed on the agency's staff, her expert aid may be utilized not only in sound budget planning but in advising families how to spend their incomes effectively. Home visits and group discussions by the nutritionist will provide a direct and helpful means for giving such instruction.

Of all the different requirements for satisfying and healthful living, food is probably the most important since the growth of the body itself—the bones, tissues, and

blood—and its normal functioning depend almost entirely on the type of nourishment available. We do, indeed, eat to live, and deprivation of essential foodstuffs is sooner or later apparent in faulty bodily development or in the malfunction of some vital organ. The child deprived in infancy of foods containing vitamins C and D, for example—elements essential to growth which are furnished through certain fruits and vegetables, milk, fish oils, and sunlight—will usually develop rickets because the bones are improperly nourished. The development of the teeth likewise may be impaired and, if their care is subsequently neglected because adequate dental attention cannot be secured, they may become a source of serious infection. Other deficiency diseases, such as scurvy and some forms of blindness, are caused by an inadequate or improperly balanced diet.

Similarly, one notes an association between a lack of nourishing food and lowered resistance which may lead to other serious diseases; for example, bronchitis, pneumonia, osteomyelitis, or rheumatic fever. The improperly nourished person lacks vitality and his general efficiency is lowered. He may become an easy prey to infections which the body is able to overcome only with its full fighting force, or his outlook on life and his adjustment to its demands may be profoundly disturbed by the irritability, nervous tension, and lack of stamina which result when bodily energy is below par. Food in adequate quantities and with a proper balance of the essential ele-

ments is, therefore, a first requisite to the preservation of health and the prevention of disease.

Housing

Another essential for healthful living is decent housing. This is a broad term covering many factors ranging from the sanitary condition of a building to the size and number of its rooms. Housing experts have determined the amount of space necessary to provide each person with adequate air and light; contractors know how to build sound, fireproof structures; sanitarians are equipped to deal with problems of drainage, garbage disposal, vermin, and noxious fumes and gases in order to keep the environment and dwelling place clean and safe: it remains for economists and statesmen to plan in such a way that healthful, low-cost housing may be provided on a large scale for the masses of the people.

A healthful house will not only be adequate in respect to space, ventilation, and safety; it will also be properly heated and insulated against drafts and cold air. An adult may keep warm in a drafty, underheated room through those mechanisms of the body which adapt themselves to changes in temperature, but the organism of the infant or young child cannot make this adaptation and unless adequate warmth is insured by suitable heating and clothing, his temperature fluctuates. Small children playing on the floors of drafty, chilly rooms, without sufficient clothing to protect them, are likely to succumb to the coughs and

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"colds" which so frequently are forerunners of more serious infection.

Clothing

Clothing, in addition to being needed for warmth and protection, has importance for mental and emotional well-being. To the young adult especially, it can be a source of deep satisfaction or serious discontent. If one accepts the assumption that mental equilibrium is as important to health as the absence of physical disease, the need for clothing that is satisfying to the individual will be recognized. Too frequently the public assistance worker, concerned with meeting the minimum clothing needs of a family on a subsistence budget, forgets the importance of dress as a means of self-expression. Clothing allowances permitting simple concessions to individual taste, which amount to little more than the cost of drab, "practical" garments, may afford satisfactions out of all proportion to the slight difference in expenditure.

Hygienic Living

While food, shelter, and clothing are basic subsistence needs essential to the well-being of every person, much of their value will depend on the way in which they are used—that is, on the individual's recognition of the importance of hygienic living. The public assistance worker cannot take for granted that all persons understand the manner in which the body functions and the ways in which it should be cared for. Despite the courses in

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physiology and hygiene given in some of the public schools and the mass of health propaganda in circulation today, many persons have little understanding of how to use their bodies to the best advantage. The fact that the human body is a machine and, like any other mechanism, needs regular periods of activity and of rest, sufficient fuel to supply energy, and adequate elimination of wastes, is too little appreciated. To persons living on a marginal income, observance of the principles of good hygiene is especially important in order that they may get the most out of the resources they have. The assistance worker, in attempting to supply the necessities for maintaining health, has an obligation to evaluate the way in which these resources are used and, through interpretation and instruction, to assist the recipients in deriving the greatest benefit from them.

RECOGNIZING SIGNS OF ILL HEALTH

Because sickness and economic need are so closely associated the public assistance worker, even while he attempts to build for health, will find himself confronted with many problems arising from illness. A variety of needs will be presented calling for ability to recognize the signs of ill health, to secure adequate medical care, and to facilitate adjustments in individual and family life necessitated by illness. An understanding of how the body functions normally will help the worker to recognize the signs of ill health, not in order to diagnose disease but to secure medical attention. Likewise, an understanding of

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accepted methods of diagnosis and treatment will enable him to use medical facilities effectively.

The assistance worker will need to acquire information about the more common diseases and build up a background of medical knowledge through reading and attendance at lectures. In addition, his actual experience with sickness will demonstrate the problems it presents, graphically and forcefully. The association between "colds," coughs, and sore throats and damp, drafty dwellings will become apparent as he notes the greater demand for doctors and medicines in the winter and early spring months among families who have requested little medical service in the summer. The child with a "running ear," who is found to have a permanent impairment of his hearing because of neglected chronic inflammation of the middle passages, will remain in his memory and make him less indifferent to the next mother who remarks that "Johnny has had a running ear all winter but it isn't causing any trouble." Discovery that the child who complains of excessive thirst and frequent urination has diabetes will give sudden significance to these seemingly unimportant symptoms. The attack of so-called rheumatism, crippling a wage-earner for months, which may have resulted from a long-neglected infected tooth, is a tragic and costly reminder of the need for continuous dental supervision from early childhood on. Experience, however, is a slow teacher, and to be intelligently informed regarding medical problems it is important to make use of standard references on health and disease.

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The assistance worker's knowledge of disease and its symptoms will help him to perceive the significance of nature's warning signals and to do something about them through helping the relief beneficiary to secure expert advice. In no sense, however, will such knowledge qualify him as a diagnostician. A lump in the breast of a middle-aged woman may be either cancer or a simple tumor, but only a physician can decide, and the best service one can render is to suggest an examination without voicing one's own unqualified suspicions. The complaint of night sweats, a loose cough, and fever in the afternoon suggests the possibility of tuberculosis, but the diagnosis can be established with certainty only by the physician with the aid of X-ray examinations and sputum tests. The child who is said by his mother to be troubled with "growing pains" is perhaps a healthy youngster "growing too fast," as his aunt or grandmother suggests, but a wise precaution is a physical examination to make certain that his joint pains are not due to rheumatic fever or, if they are, to take steps to prevent possible damage to the heart from successive flare-ups of rheumatic infection.

The public assistance worker will also be able to learn, through reading, what diagnostic and treatment procedures are customarily employed and considered adequate. For example, specialists in diseases of the chest are not satisfied simply to put a patient with pulmonary tuberculosis to bed for an indefinite period, but will ascertain by further careful study of his case whether he is likely to benefit from the modern therapy of collapsing the dis-

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eased lung by surgical or mechanical procedures in order that it may thus be rested and healed. Likewise, the physician who is familiar with the character of tumor growths will not be satisfied that a lump on the surface of the body is not cancer until he has taken a biopsy—that is, removed a piece of tissue from the growth and studied it under the microscope. Although the assistance worker cannot presume to dictate to the physician his method of diagnosis or of treatment, he should have sufficient understanding of generally accepted methods of medical practice to discuss intelligently with the physician the latter's findings and recommendations regarding the patient.

MEDICAL RESOURCES AVAILABLE

Having recognized possible illness, the assistance worker will be concerned with securing the best quality of medical service obtainable. Adequacy of medical care rests primarily on the competence of the individual physician which, in turn, depends on the quality of his training, his personal qualifications of intelligence and skill, and his professional standards. To a limited degree the qualifications of a given physician are indicated by his membership in such professional groups as the American Medical Association and the American College of Surgeons, which is evidence that his training and staff affiliations conform to the standards set by these groups and that he has not been guilty of unethical conduct. Within these rather general limits, however, one finds a wide variation of practice.

An essential adjunct to the physician, and often an in-

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dispensable service, is skilled nursing, which is rendered in medical institutions or may be available for home care. Often a sick person can be adequately cared for in his own home, with a visiting nurse to supervise the family in carrying out the physician's instructions and to teach the details of bed care. In some instances an untrained, so-called "practical" nurse has sufficient skill to give the necessary care under the direction of the doctor, with an occasional visit from a graduate nurse. Practically every community has its "born" nurse whose services, under proper direction, can be utilized to supplement or to take the place of more specialized resources which the community may lack.

In order to diagnose and treat disease the physician must have the supplementary assistance of many closely allied groups. Scientific discoveries have led to the development of a variety of tests which make it increasingly possible to gain an understanding of the body and its functions, and of techniques to control or treat disease. With each new discovery the practice of medicine becomes more complex and less susceptible of being carried out by one individual in his office or at the bedside. The physician can utilize the special services and complex equipment most easily and least expensively in an institution where laboratory technicians, X-ray specialists, physiotherapists, dietitians, and other expert assistance is available. Thus hospitals and clinics have developed where the physician has access to many special services contributing to the diagnosis and treatment of each patient. By

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and large, it is generally accepted today that the very sick person is best cared for in a hospital.

There are two types of hospitals for the care of the sick—the public tax-supported institution and the so-called voluntary or private hospital. The public hospitals for the most part are organized to care for acutely ill persons who need hospitalization but are unable to pay for it. Some of these have outpatient departments—clinics or dispensaries—for service to ambulatory patients with varying degrees of limitation, whose treatment does not require bed care. Supplementary to the public hospital or clinic, or in some instances as the only resource available, there may be a county or city doctor service wherein one or more physicians are paid from tax funds to give home care to sick persons. Often one may call the county or city doctor in emergency situations or when a sick person needs medical attention but is not sufficiently ill to be sent to a hospital. When this service is used the visiting nurse also may be called on to assist in home care.

In communities which do not maintain public hospitals one is usually able to arrange for service in private hospitals. The quality of care given in either private or public institutions may vary greatly, and can be evaluated by its conformity to certain standards set up by professional organizations such as the American College of Surgeons and the American Medical Association. Through these groups or from the American Hospital Association one may ascertain the rating of a given hospital or clinic. Acceptable standards imply efficiency of administration, ade-

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quacy of equipment, and a high quality of service in the care of sick persons. Responsibility for securing good medical care carries with it an obligation to ascertain the status of the institution selected.

The physician, the nurse, and the medical institution are fundamental to the care of the sick person, but there may in addition be a need for other services to facilitate recovery or to provide care during a long period of disability. An increasing number of hospitals are establishing social service departments to assist in giving such services to patients. The primary functions of the social worker in the hospital are: gaining an understanding of the attitudes and circumstances of the patient whose medical problem has given rise to needs for which he is unable to plan without assistance; interpreting to the physician such factors in the social situation as may affect the patient's adjustment to his illness; and helping the patient to make the modifications in his daily life necessitated by the treatment plan and by his disability. Such service involves working closely with responsible persons in the family and in the social agencies to which the patient may be known, in order to utilize all available resources constructively. The medical social worker's duties may vary in different hospitals, including not only these individualized services but also such administrative functions as the admission and discharge of patients and the management of clinics. It is always possible for her, however, because of her position in the hospital and her understanding of medical social problems, to consult with physician and pa-

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tient in order to assist the agency in arranging for after-care. The public assistance worker will find such case conferences helpful to effective planning for the sick person and for clarifying the part each agency is to take in giving service to him.

The carrying out of plans for post-hospital care, whether by the medical social worker or the public assistance worker, requires a variety of resources to supplement those of the clinic and hospital. Following an acute illness or major operation the body needs time to build up strength and allow healing to take place. During this convalescent period the patient neither requires hospital care nor profits by remaining among persons who are acutely ill. His home, however, may lack the special resources needed for his care. Nourishment may not be suitable or may be provided at the expense of his family's standard of living. The patient may tend to be over-active in his anxiety to get back to work or become depressed by drab, cheerless surroundings and the concern of his relatives. It frequently is helpful to bridge the patient's transition from the carefully controlled environment of the hospital to the stresses and strains of his own home by arranging for a short period of convalescence elsewhere. Few communities have specially equipped convalescent institutions, but often the home of a relative or friend will prove suitable for a few weeks' stay until the patient has fully recovered. It is possible also—when the patient's primary requirements are for restful surroundings, palatable and nourishing food, and a comfortable bed—to develop re-

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sources for convalescent care in one's community through the use of private homes in which one or more patients at a time can be cared for by a competent person, not necessarily a graduate nurse. When convalescent resources are available, more rapid progress toward recovery is likely if patients can be given two or three weeks of such care before going home.

For the patient with a chronic illness—such as heart disease, arthritis, or a stomach ulcer—who may require rest in bed for a long period or a special routine of diet and medication but who in time is expected to regain some degree of activity, the resources available in his own home may not appear adequate for various reasons. Sometimes he needs care that is complex or too time-consuming or he may require some special treatment for a limited period which can be better managed elsewhere. For the patient with a chronic, hopeless disease the strain of nursing may prove too great a burden in the last stages of his illness, and care outside the home may seem advisable in order to provide him with greater comfort and to relieve his family of the physical hardship and emotional distress involved.

For patients with these types of prolonged, disabling illnesses, often the only adequate resource for care would be an institution for chronic diseases. Since few such facilities exist,¹ one must turn to other resources, which in some instances may be just as satisfactory. As in the case

¹ The customary governmental provision for the care of chronically ill persons of all ages is in county infirmaries or poorhouses.

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of the convalescent patient, the home of a relative or friend may be utilized if the care needed is fairly simple. Usually, however, some skilled service is required. In many communities it will be found possible to develop a so-called nursing home, usually with a graduate nurse in charge and practical nurses giving the required attention, both working under the direction of the physician responsible for the particular patient. The nursing home need not be an elaborate institution if it meets minimum standards of cleanliness, has adequate equipment for bed care, and employs nurses, whether trained or untrained, of sufficient skill to give the necessary service. Although many excellent nursing homes are operated throughout the country, it must be admitted that poor facilities of this sort exist as well. There is great need for licensing and the enforcement of standards in nursing homes, and the assistance worker who makes use of them will do well to ascertain their status from the local welfare council, if such a body exists, or from the county medical society or local health officer.

SELECTION AND USE OF RESOURCES

There are, then, a variety of medical and health services available in most communities. How is the public assistance worker to select the best resources and to utilize them so as to gain the maximum values for his client, the patient? Even when adequate facilities exist, many questions arise as one attempts to secure care and to utilize it effectively. Should a sick person be referred to a clinic or

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to a private physician in a community where both are available? When the diagnosis has been made should the patient be sent to a hospital, a sanatorium, or a nursing home? How long will the provision of a special diet or costly medicines be necessary? When only a limited fund is available to the agency for confinement care in hospitals, how does one decide which mothers can safely be confined at home? Should a patient or his family be told his diagnosis, or the possibly hopeless outcome of his disease? If he is dissatisfied with the medical care he is receiving, should the patient be permitted to go to another doctor or clinic when the agency is paying the fees?

In order to answer these and many equally perplexing questions that arise when the public assistance worker has the responsibility for securing and directing the use of medical services, one needs first to have a clear understanding of the relationship between the physician and patient, and between physician, patient, and assistance worker.

Relationships of Patient, Doctor, and Worker

The physician's training and experience give him authority in the diagnosis and treatment of disease. In recognition of this fact, the state in which he practices imposes on him full responsibility for the care of the sick person who has come to him for treatment. The sharing of this responsibility with the nurse and other specially equipped persons has been a comparatively recent development, and the physician is expected to direct the use of

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such services. Because of this long tradition of personal responsibility, many physicians are distrustful of the participation of non-medical persons, whose right to learn the diagnosis and to assist in the treatment plan may not be clearly understood.

The primary concern of the physician is service to the patient and the safeguarding of his interests. Much of the success of treatment depends on one's confidence in the physician's ability to diagnose the illness, his skill in treating it, and his trustworthiness in regarding as confidential those personal matters which should be revealed to no one else. The physician at his discretion may tell a patient the diagnosis or withhold it, taking into consideration the patient's probable reaction and his real need to know; or he may instead consider it necessary to tell some member of the family. Many sick persons have no desire to know the name of their disease; they are content to leave the responsibility for treatment to the physician and will cooperate fully with little or no knowledge of the reasons for the medical recommendations. Others, especially when a disease is far advanced or likely to end fatally, do not need to know the full facts. Responsible members of the family should be told what they may expect in order to plan and act wisely, but the patient himself usually will respond better and will remain happier if he is not informed. In the rare instances when it is important for the patient to know the details of his condition and its expected outcome, not only is it the physician's responsibility to discuss these matters with him but the patient

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wants such interpretation from him rather than from anyone else. It is essential always that a sick person be told enough about his condition and the reasons for the medical recommendations to insure his intelligent cooperation in the treatment plan, but such explanation is best left to the physician.

The assistance worker, in order to work effectively with the physician and to make available to the patient the services essential for his care, must fully appreciate and accept the nature of this relationship between the doctor and his patient. On the worker's understanding and tact depends much of the success of the treatment plan for a client. The objectives of the physician and the assistance worker are alike—service to the patient. If the physician understands the part the assistance worker plays in a given case he will interpret to him as much of the medical plan as is essential in making adequate provision for the patient's care and for his family. Requests for "diagnosis, prognosis, and treatment recommendations" are less likely to bring helpful information from the physician or medical institution than a clear statement of why the assistance worker has an interest in the case, a description of the factors in the living conditions, employment, or attitude of the patient which may have bearing on the medical plan, and an indication of the degree of responsibility the agency will be able to assume in making continued provision for treatment and after-care. The assistance worker is not primarily concerned with the actual diagnosis but with the disability it causes, and his interest in specific

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recommendations for treatment is in terms of the modifications required in the patient's home conditions or in his usual activities. Likewise, he is concerned in knowing the prognosis in terms of how the outcome of the illness will affect the agency's responsibility for providing care or for maintaining the sick person and his dependents.

In accepting the authority of the physician for making the diagnosis and directing the treatment plan, the assistance worker clarifies for himself many of the questions raised earlier regarding the selection of medical care. So far as choosing between physicians is concerned, the basic principle governing any acceptable plan for medical service is that the patient shall not be precluded from having the doctor he wishes or be forced to take someone chosen for him by the agency. Wherever the agency's plan of payment for medical service makes it possible the patient should be sent to his own physician, if he has one, or to the physician he selects in the community. If he expresses no choice the physician next in order on a rotating panel should be called. Whether the patient should be referred to a doctor or a clinic will depend on the plan for medical care in a given community. If, as is usually the case, the ambulatory patient is provided for only through clinic service, both he and the physician who may have been caring for him should be informed of the resources available. Occasionally a physician prefers to give free care and retain the patient; if he does not, the patient should understand the reasons for referral to the clinic and, when practicable, be allowed to choose where he shall go.

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Once the patient is under medical supervision the choice of further care will depend on the nature of his illness, the physician's recommendations for care, and the facilities available. Obviously, the question of whether a patient with cancer should be hospitalized or sent to a nursing home will depend primarily on whether he needs the special services of the hospital. However, whether a patient with tuberculosis goes to a sanatorium or remains at home will depend not only on the stage of the disease, its infectiousness, and the treatment needed—all factors to be determined by the physician—but also on the assistance worker's evaluation of the adequacy of the home, the intelligence of the family, and the agency's ability to provide the necessities for care, and on the physician's judgment of the feasibility of adapting the resources of the home to the requirements of the patient. Similarly, whether an expectant mother is to be confined in a hospital or at home will depend first on the physician's decision regarding her need for hospital care, and secondly on the suitability of the home for confinement. Decisions as to the treatment needed rest with the physician, but the adaptation of existing resources to the securing of treatment and after-care will depend on a consideration of social factors as well. The worker will be guided by the medical plan in appraising resources and, in turn, will bring to the attention of the physician factors which have importance in regard to the patient's adjustment. Such joint evaluation and planning are essential to the giving of well-rounded medical and social services.

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Methods of Financing Medical Care

A further highly important consideration influencing the choice of medical care is the method by which such service is financed. In communities which do not provide free medical care through the use of county or city doctors and public hospitals and clinics, there may be other provisions. The extension of medical services to clients of relief agencies under the Federal Emergency Relief Administration during 1933-1935 led to the setting up of a variety of plans, in most of which private physicians and institutions were authorized to give medical service and were paid on a per visit or per capita basis. This method of purchasing private services through the use of public funds is frequently the most expedient way of making medical services available but it has dangers which must be recognized by the worker using it. Unless there is adequate supervision to insure the maintenance of high standards and the elimination of political control such subsidized service may tend to become of poor quality or may be used for private profit.

Many other suggestions have been made in recent years for providing medical care to dependent groups and to persons whose income is sufficient to meet ordinary expenditures but not adequate to cover sickness costs. A discussion of these suggestions is not within the scope of this volume, but brief mention may be made of three ways in which this problem is being approached. One advocated by many economists is the setting up of a compulsory health insurance system for all persons below a cer-

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tain income level. Many objections have been made to this proposal, chiefly by the medical profession, who oppose it because "its mass therapy, its regimentation both of doctors on the panel and of patients (in spite of devices to save the principle of the personal relation)—subtly and continuously lowers the quality of medical care, the quality of the medical man, the quality of the patient's conception of health."¹ To the assistance worker an especially significant objection is that no compulsory insurance scheme would provide medical care to all persons who need services at low cost, as many self-employed or irregularly employed individuals would be unable to contribute to it. Also of significance is the criticism that insurance merely distributes the disadvantages of illness and focuses attention on accommodations for illness rather than on preventive efforts. Despite these objections, however, there is a strong case to be made for health insurance on a broad national base and sentiment for adding it to the provisions of the Social Security Act is strong in many circles.

A second line of approach suggests the extension of public health services, tax support for diagnostic laboratories and for hospitals, federal grants-in-aid to states on the basis of need, and the setting up of a federal coordinating authority or national ministry of health. Such an extension of services, in which the emphasis is on prevention, would not preclude the private practice of medicine

¹ Lape, Esther Everett, "The Health of the Nation," in *Atlantic Monthly*, April, 1937, p. 470.

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for those able to pay for service and is thus favored by many physicians.

A third method by which this problem has been attacked is through legislation empowering state departments of public welfare to provide medical services. New York State, for example, has a statute enabling the public welfare department to provide "necessary medical care for all persons under its care, and for such persons otherwise able to maintain themselves who are unable to secure necessary medical care, except in so far as in cases of communicable disease that duty may be imposed upon the health officer by law, or the state sanitary code. Such care may be given in dispensaries, hospitals, the person's home or other suitable places." Such legislation is a frank recognition of the fact that large numbers of persons who are able to support themselves as long as they are well are unable to meet the costs of illness.

Whatever plans may be evolved for meeting the highly complex and difficult problem of providing medical and health services to persons unable—wholly or in part—to pay for them, the assistance worker will be confronted with the task of making the best use of the resources available. Much can be done by a thoughtful consideration of the needs of each patient to adapt existing facilities so that maximum benefits will be obtained. The inadequacy of resources and the limitations of agency policy are frequently neither as great nor as inflexible as they seem, and if basic requirements of good medical care can be met helpful assistance can be given the patient.

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PUBLIC HEALTH AGENCIES

The types of provision for medical care so far described have been those required for the care of acute or chronic non-communicable illnesses. Another provision made by the community is for the control of communicable disease through public health measures. The contagious diseases—such as smallpox, diphtheria, scarlet fever, and measles—and the infectious conditions spread by contact with germs—such as typhoid fever, tuberculosis, syphilis, and gonorrhea—are the responsibility of public health departments. Their efforts are directed toward preventing the spread of these diseases by such protective measures as quarantine and by eliminating sources of infection in the environment through supervision of garbage disposal and sewage and purification of water and milk supplies. They are further concerned with tracing carriers of disease and with examination of persons who have been in contact with diseased individuals in order to check transmission of infection and to secure proper treatment when it is found. As methods have been developed for the immunization of well persons against certain of these communicable diseases, the health departments in some communities have enlarged their activities to provide this service as another measure toward prevention.

The long duration of tuberculosis and syphilis and the complex and expensive treatment required have made it necessary to enlarge or to create diagnostic and treatment facilities at public expense in order to provide the care

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needed. Whereas in the past the individual was free to seek care privately or to neglect his condition, modern communities have learned the value of providing such treatment, under compulsion where necessary, to protect well citizens and to give the individual an opportunity to secure adequate care. The menace of a disease and its ultimate cost to the community in medical service and the support of the sick person and his dependents have been found to be less, in the long run, when adequate public health services are available than when the burden is placed on the individual. In consequence, clinics for the diagnosis of tuberculosis and for follow-up supervision of the arrested case and sanatoria for treatment during the active and infectious stages are being made increasingly available, as well as clinics for the diagnosis and treatment of syphilis and facilities for the isolation of patients in the communicable stages of the disease.

In addition to the traditional responsibility of public health departments for the control of communicable disease, obligation has recently been assumed for other diseases, not communicable, which are too heavy a burden to be borne individually. The most notable of these is cancer, which because of its disabling effects and high mortality, as well as the costliness of the treatment required, constitutes a heavy economic drain which can be met only by the concerted efforts of public and private health authorities. The Massachusetts legislature was the first to recognize the need for assumption of responsibility by the state department of health, and in 1928 created a special

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division to establish and supervise facilities throughout the state for the diagnosis, treatment, and control of cancer. As communities become aware of the costs of such diseases not only to the individual but to society, adequate provision for their care and prevention will increasingly become the responsibility of public health authorities.

The work of public health departments is carried on by specially trained health officers and public health nurses. A large share of the field work is done by the nurse whose activities are chiefly educational, although she may be required to give nursing care in some instances. The public health nurse is the advance guard of the army against disease. Through various community projects, such as illustrated lectures, classes for parents, and individual home instruction, she emphasizes the values of health and gives concrete practical help in maintaining it. The assistance worker will touch the activities of the public health nurse at many points and will find that her help can frequently be utilized in educational and preventive efforts, as well as in suggesting resources and giving assistance in the care of the sick client.

Thus public health agencies are assuming ever-increasing importance in community efforts to preserve health and mitigate disease. On a broad front and from many different approaches public health programs are concerned with searching for and attacking the causes of disease, seeking to eliminate sources of breakdowns in health or to minimize their effects. As one becomes aware of the scope of these efforts, their close relationship to many as-

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pects of public welfare programs becomes apparent. The public assistance worker will be concerned as frequently with prevention of disease as with its treatment, and at many points his objectives and those of the health worker will be so similar as to be attainable through a close integration of efforts.

PROGRAMS FOR THE HANDICAPPED

While the efforts of public health departments have been largely concerned with the control and treatment of diseases which endanger the common health, governmental agencies have directed attention to other conditions, either because they take a heavy toll of human life or are so disabling as to lessen or destroy the individual's capacity for self-maintenance. National attention was first centered on these problems during the World War when draft examinations revealed an appalling number of physical defects and handicaps, many of them preventable or easily curable had proper care been available in infancy and childhood. This realization, supported by studies made by the United States Children's Bureau on a variety of problems related to child health and welfare, led in 1921 to the first action ever taken by the federal government to provide health services to a special group of its citizens, through grants-in-aid to states. The Maternity and Infancy Act of that year provided federal assistance to those states desirous of participating in programs for maternal and infant health. All but three of the states took

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advantage of the Act and, until its expiration in 1929, medical and social services on a wide scale were made available through local units. Although this program lapsed during the years 1929-1935, it has been revived and extended through the passage of the Social Security Act, in which provision has again been made for federal aid to states in the promotion of maternal and child health.

In addition, programs for certain classes of the handicapped have been developed by the states. A variety of services for the blind, the hard of hearing and deaf, the crippled, the cardiac, and so forth, have been offered under differing forms of organization and with wide variations in kind and amount. They range from provision for medical care, special education, vocational training, and placement, to grants for research into the causes of the disabling condition and its treatment. The emphases of these programs differ greatly, some states being primarily concerned with medical care and others directing attention chiefly to education. The Social Security Act has strengthened these programs, particularly those relating to crippled children and the blind.

Two main types of organization have been developed in state programs for the handicapped, particularly crippled children—the so-called centralized and decentralized plans of care. Under the former, treatment is carried out in hospitals usually affiliated with a state university. Through county courts children are committed to the care of the state for the period of medical treatment and, oc-

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casionally, until their education has been completed. Following hospitalization they are either returned to their own homes for convalescence under the supervision of a local physician and county nurse, or they are placed in boarding homes near the hospital so that treatment may be continued in the outpatient department or resumed in the hospital after an interval for rest and recuperation. Such boarding homes are frequently used also when a child is too handicapped to attend a regular school and needs special educational facilities which may be available only at a distance from his home. Under the decentralized plan care is given in the child's own community or nearby. When adequate medical and educational resources are available the latter plan has the decided advantages of maintaining family ties and giving the child a minimum of institutional care. With the passage of the Social Security Act great impetus has been given to the development of adequate state and local programs of service to crippled children.

In the provision of care for the blind and visually defective, the approach has been different from that for other classes of the handicapped. The economic incapacity of the blind, coupled with the hopeless nature of many of the conditions causing the handicap, has led to the giving of pensions, so that in most states relief needs rather than medical and educational requirements have been met. Actually the blind and visually defective, as much as any other group of the handicapped, are in need of medical service—to restore vision where possible or to

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conserve what remains—and of education and vocational rehabilitation. Many authorities in this field agree that pensions alone, without individualized service, have been detrimental in destroying or lessening the client's desire for rehabilitation. They have partially met a need instead of dealing with the whole problem. Since the passage of the Social Security Act, with its provisions for federal aid to state programs in behalf of the blind, these considerations have come to assume greater significance.

One of the most important principles governing federal aid to state health programs is that the local community must be interested and ready to take the initiative in setting up services. The state is responsible for the maintenance of standards and for efficient administration, but unless the local unit wants the service and the various groups in the community are ready to work together in providing it a truly effective program cannot be developed. Another principle is that federal, state, and local funds must be pooled and distributed in accordance with need, so that the poorer communities can have as adequate service as those with greater resources. This is especially important in rural areas where facilities may be meager and funds too limited to provide additional services. Equalization of funds is essential to providing a uniform and adequate quality of service. Centralization of expensive resources and equipment likewise have been found to be essential in programs for care to large groups of persons. Two counties may share a hospital; traveling clinics may cover several adjoining communities; the town

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most centrally located may be the headquarters of the nursing service; and so forth. The common objective of many of the services of the public assistance and health programs makes the sharing of resources logical and economical.

Under the federal Social Security Act and subsequent state welfare legislation these various efforts by public and private groups to meet the health needs of the handicapped and dependent are receiving new impetus and are being integrated into programs for public assistance on a broad scale. It is in these areas that one sees a recognition of the close association between dependency and disease, and the possibilities through assistance of directly or indirectly promoting the health of the individual. Assistance services to mothers and children, to dependent families and individuals, to the crippled and the blind, are closely interwoven with considerations for health. Adequate prenatal and confinement care, health supervision of the infant and child, and the correction of defects are measures designed to bring about well-rounded physical and mental development. These services, supplemented by adequate public health efforts, should do much to prevent disease and to minimize the disabilities resulting from it. Integrated with public assistance, such provisions for health should contribute to individual well-being on a scale hitherto unknown in this country.

DORA GOLDSTINE

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TYING IN WITH THE COMMUNITY

IT IS important that the public assistance worker should have in mind a clear picture of the total welfare services available to meet the needs of any particular person who comes to him for aid. While these services may vary in extent and quality from community to community, they follow a fairly general pattern and embrace a wide variety of provisions as discussed in previous chapters.

There is no type of need that is not likely to raise its head somewhere among the families and individuals with whom the public assistance worker deals. Standing face to face with people in trouble, the worker holds a key position, especially in the smaller communities, in making the whole welfare program function effectively.

PUBLIC WELFARE ORGANIZATION

The development of public assistance, child welfare services, and other governmental provisions in the past few years has brought radical changes in the traditional relations of the various levels of government, in so far as public welfare is concerned. After several hundred years of

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local responsibility for relief services to persons in their own homes, the federal government has stepped in and promoted a great cooperative undertaking in which federal, state, and local governments share this responsibility. This has resulted in a process of reorganization and administrative adjustment which is still far from complete and differs considerably in the several states.

In this new partnership it is the state that holds the central position. The federal government offers opportunities and financial inducement which the state may accept or reject at will. The state, on the other hand, may delegate to its subdivisions through constitutional or other provisions such measure of responsibility as it sees fit. Different states have worked out the relation between the state and local subdivisions in different ways. A number have assumed direct responsibility for the administration of the various forms of public assistance in the local communities, sometimes appointing local workers and a local advisory committee without administrative authority. Others have placed major responsibility upon the local government but have required that the work be done according to standards set by the state. In either type of relationship, the state administration will have close relations with the local community and will need to take local conditions and attitudes heavily into account.

Every community is as unique and individual as every family. Each has its own history, traditions, and racial backgrounds, its own ordinances and officials, its own institutions and leadership, its own hopes and ambitions

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and achievements. A New England village is not like a western mining town; and even within the same state the same policies cannot be applied unvaryingly to worked-out, bankrupt regions and to rich, developing regions. Policies made at a distance may indeed fit some communities as curiously as that order which came out during the government cattle-buying program during the drought, which required that all cattle sold to the government must have a metal tag placed in their ears. It is said that when that order reached the office of a certain cattle county in one of the mountain states the whole office staff burst into one spontaneous shout. They all knew that in handling those wild range cattle it would take three top cowboys to tag one cow, and there were not enough cowboys in the entire state to tag the cattle going from that single county. The best they could do was to have cowboys sit on the fence and daub the cows with green paint as they passed through the gate.

During a temporary emergency, as in war, flood, or unemployment disaster, a local community may gladly accept authority and management from outside. But when the emergency is over it is very likely that the local community will again wish to manage the affairs that concern its own people and will resent outside authority. If a state attempts to settle every detail of public assistance administration and imposes its decisions on a local community, there may be outward acceptance of the situation—in order to take financial advantage of state or federal funds—but the local community may refuse to accept any

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further responsibility for the program or its consequences. In one way or another an uncooperative community, resentful of domination, can retaliate with terrible sabotage through a public attitude that makes real success and constructive work impossible, and imposes grief and pain upon the workers who must administer the policy and the recipients who are supposed to benefit by it.

But the local community needs the active concern and direction of the state. Where that is lacking the local community all too frequently construes the job narrowly and does it poorly. State and local cooperation seems to be the only answer. And fortunately this can be attained no matter what the legal framework may be.

Whether the state holds full administrative power or an advisory relation to the local units, the attitude of the state field representative is of major importance. The wise field worker will use the method which Alexander Johnson set forth so well in his engaging account of his "adventures" in state supervision, an account well worth reading by present-day field workers. His method was the method of "inwardness." He writes, "I believed that a reform brought about in that way from within was a real one, while a new procedure forced on an official by pressure from without and not really appreciated by those who must practice it might have worse results than the method it had supplanted."¹

The state field worker has the opportunity of interpret-

¹ Johnson, Alexander, *Adventures in Social Welfare*. 455 pp. 1923. Page 89.

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ing to local people the policies laid down by the state and of taking back to the state office some understanding from the local community as to how general policies are working out in practice. He brings to the people of one community the experiences of another to their mutual benefit. If coercion and formalism can kill the soul of a public assistance program, the winning of creative participation can enlarge the spirit and give new vision. Unfortunately some state field workers are so driven by administrative duties and barren checking of procedures that they have no time left in which to consider with the local people the best development of the work. This is a great loss, for the final success of the public welfare program will depend very largely upon the state field personnel, their vision and social work skill, and their ability to interpret the possibilities of the program and to educate and stimulate the local workers, board members, and the public to critical, enthusiastic participation in carrying out the program.

USE OF COMMUNITY RESOURCES

If public assistance were a form of social insurance, the relation of the worker to the local community might make little difference; grants would be determined on an automatic basis and that would end the matter. But it is not a form of insurance. Public assistance is based on need, and need is always individual, varying with different persons and changing with the same person. These variations call for more assistance or less assistance. Always the assistance worker has to consider not one but three

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problems of meeting the need: eligibility to assistance, adequacy of assistance, and discontinuance of assistance. Failure to take measures that may be effective in helping the person to "get off relief" is not only poor social work but poor public policy as well. As the more easily employable persons get back into industry or are assigned to work of some sort, those who remain on the rolls are increasingly persons who desire and need some special help either personally or in opportunities. Since what is possible and what is impossible to the independence and personal adjustment of the individual depends in large measure upon the opportunities that exist for him, cooperation with the various forces in the community is essential.

Of all desirable forms of cooperation probably the most important is that between the various branches of the public assistance administration itself in those places where different groups of recipients are dealt with by different offices. Relief by special "categories" has advantages and disadvantages, as outlined in earlier chapters. Many of the disadvantages arise from the fact that special assistance is designed from the point of view of the *individual* and not of the *family*. Even "aid to dependent children" is concerned only with children under a given age, not with older children or other relatives who may be present in the family. But most people live, and for happiness should live, in families.

Not infrequently, when one form of assistance is given in a home, there is a tendency on the part of the public authorities to ignore the rest of the family and assume

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that they can get along somehow. An old age allowance may be carefully figured on the basis of the grandfather's share of the estimated family budget—much less than if he were living alone—while actually the whole family may be largely living on his share. It may thus come about that, for lack of attention to the other members of the family, the effectiveness of the old age assistance or other special form of aid is diminished or destroyed. It is important, therefore, that other needs in the household should be noted and arrangements made for meeting them in order that a consistent, unified plan for the family group may result.

This need for cooperation between the various public welfare divisions is particularly illustrated in the case of the blind. As previously pointed out, public assistance is not insurance; grants are not made to all blind persons, but only to those who are in need of them. The need, not the blindness, determines the grant. But the need of a blind person is largely determined by the extent to which the handicap has been surmounted. Through the years the states have set up elaborate programs designed to help the blind to become independent and live lives as nearly normal as possible. But if the administration of blind assistance tempts the applicant to keep his earnings under \$300 a year (or whatever amount is named in the law) in order to receive the security allowance, the other programs may be defeated and the applicant may sacrifice his ambition and settle down to security at a minimum level instead of trying for a larger life. To the public

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assistance worker the question is always, for the blind or any other recipient, "What are the resources available to this person, within the limits of his potentialities?" Only by finding an answer to this question can discontinuance of assistance through discontinuance of need be achieved.

In addition to the services set up by government, every community affords other resources of a private or voluntary nature. Agencies have been provided through the vision and generosity of public-spirited citizens, for coping with some of the needs which government is not yet prepared to meet. Among these are the need for consultative services for families, special services for the care and guidance of children, home nursing, legal aid, wholesome fun for boys and girls, special opportunities for handicapped people, homes for old people of racial or religious congeniality, and friendly help to foreign born people not yet accustomed to our ways. Wherever socially minded people see an unmet need and get together to do something about it, there the community life grows richer and kinder and opportunity widens for more of the people.

Much has been written and said about the relations between public and private social agencies, but it all boils down to this: the main job of the private agency is ever to meet otherwise unmet needs. Government cannot meet a need until it is widely recognized and acknowledged. It must be recognized first by private citizens of vision and be made clear by them to the wider public. The relation at any time between public and private agencies should depend upon the state of the law, the state of available

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funds, the state of public opinion, and the practical facts of personnel.

As public authority has taken over more and more of the responsibility for support of persons in financial need, private agencies have directed their programs less to support and more to such personal service as the governmental agencies are not yet prepared to render. On this basis there is increasing experimentation in cooperative efforts between public and private agencies, the public assistance agencies providing support for a family while private agencies render services directed toward personal adjustment, domestic relations, home management problems, and the opening up of special individual opportunities.

In order that available services may be effectively coordinated for the benefit of the persons for whom they are designed, most cities and many smaller communities have established "social service indexes" or "confidential exchanges" through which an agency may learn if other agencies are interested in the same family. The list of agencies using the confidential exchange is eloquent of the variety and extensiveness of services available in any community. In a city of 300,000 population, 151 agencies—public and private, including state agencies—cleared through the confidential exchange last year the names of families or individuals with whom they were dealing. With such an array of resources in the community program, it is important that public assistance workers should not try to deal with personal and family

problems which some other organization is better equipped to handle, but should rather refer them to the proper agencies.

One community resource that may not always be welcome to the public assistance office is the organized groups of recipients and their friends—the so-called “pressure groups.” A very useful recent article in *Social Work Technique* discusses the protest group as a tool in case treatment.¹ As the article points out, “The problems of dealing with unemployed groups are of two kinds, those specific complaints made by the committee, and those general problems inherent in the relations between the agency and the group.” The pressure group is, in a way, an expression of the appeals principle which is stressed in the social security legislation. If, however, there is much use of group pressure methods as a means of appeal on behalf of individuals, it is usually a sign that something is wrong with the spirit of the office or its forms of procedure.

Where the recipient of assistance knows that a fair and considerate hearing is always quickly available with a probability of appropriate action, and where the avenues of appeal to the supervisor or executive are readily open to him if he is not satisfied, there is little need to turn to committees of his own group for action. If, also, when the group delegation appears at the office it finds ready access and a fair hearing, it can move out of the realm of

¹ Eastman, Dora K., “The Protest Group as a Social Resource in Case Work,” in *Social Work Technique*, September–October, 1937.

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personal complaints and be genuinely helpful in working out better policies and practices and better mutual understanding and cooperation between the office and the clients.

PUBLIC ASSISTANCE IN RURAL COMMUNITIES

In the small community it is even more important than in the city for the public assistance worker to work very closely with other forces. The differences between the conditions of urban and rural public welfare administration may perhaps be summed up as follows: the organization of social life in the rural community is different from that in the city in some important ways; the organized and specialized resources for public welfare work are more meager in the rural community and are in some ways different; the personal resources are richer but also have more possibilities of being harmful under certain conditions.

A rural county is not for most purposes one community, but is made up of a large number of very different kinds of communities. In a city, while there may be great divergence among different neighborhoods, there is yet a certain framework of organized life that underlies it all. There is one city government, with all that that implies. A rural county may include a dozen incorporated towns and villages, each with its own government and school system, its public utility problems, its social and business rivalries, and its cliques and leadership. In addition to the towns and villages there is the open country, very different yet in its life and government. The people of the county

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live in close-knit little communities or open country spaces, and their lives are largely molded by the differing conditions immediately around them. But the whole county with all its various and rival interests must be welded into a unified county welfare organization if public assistance is to be well administered.

A large proportion of the assistance recipients will be living in the towns and villages. All small towns have certain characteristics in common, chief among them being that oft-cited personal closeness to neighbors which grows out of the fact that the small town dweller sees his neighbor not merely in one little segment of his existence, as so commonly happens in the city, but in the full round of daily life—at work, at play, at church, in his garden, at his shopping, in all kinds of weather and personal vicissitudes. For better or for worse, the neighbors are ever present, with much effect upon personal and community relationships. But small towns have also differences so great that they seem almost in different worlds, even though they are situated in the same county. Some towns think in city terms, look to the city for their interests and ideals, and have very little concern for their rural hinterland. Others are closely related to the farmers round about; the creamery, the consolidated school, the grain elevator are there and the town exists in truth as a farmer's service center. Country towns rise and wane in population with drastic effects upon the life within. One little town continues steadily on with a fine, vigorous community life. Another, a few miles away, loses ground and

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has almost no one left in it except a resentful, discouraged little group of people who cannot get away and who lay all their troubles on the state highway commissioner because the new road passes through a rival town instead of theirs. Or perhaps the town is rent by factions, with local politics and business all tangled up with leaders' personalities, making it impossible for them to do things together. These conditions all make a vast difference in what a public assistance worker can or cannot do in any given community.

As to the open country, the urban bred worker must never forget that all life there is organized around a single "industry" and that industry one which has often been termed not only a business but a "way of life." Farming is the only respectable industry of modern times that is organized on a family basis. The home and the business are one unit in which young and old participate, a unit independent unto itself, often out of sight and sound of neighbors. And all the neighbors are also farmers. Under these conditions patterns of thought and social life inevitably develop which the assistance worker needs to understand. At its best, life on the farm can be the finest possible; but, if not at a high level and if the family lacks modern means of transportation and communication, it can be peculiarly narrow and frustrating with very little chance for escape to other associations.

At its worst, isolation of the most devastating sort is found and is a problem unique to rural public welfare. Personal isolation may, of course, be found in communi-

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ties of any size and always presents serious case work problems to the social worker. But the combination of mental and physical isolation in the country is something different. It can mean terribly neglected suffering and baseness of life and a stultification of the minds of little children that would not be possible in a city. The public assistance worker concerned with services to children or proper care of aged or other handicapped persons will have a difficult and challenging task to develop social contacts for families so situated.

Rural Social Institutions

Probably the most important resources for the assistance worker, especially in rural communities, are those basic institutions and activities that the community creates for the general well-being of its people. Dr. Cabot once pointed out that in social work as in medicine, instead of depending on expert diagnosis and special treatment, it is often best to see if the healing power of nature will not pull the person out of his trouble. The healing power of nature for social ills lies in sound social relationships—good everyday association with people and participation in the ordinary social institutions of the community.

The range and quality of the social institutions of town and country need to be known to the public assistance worker. As already noted, they differ enormously from community to community. If there is a good consolidated school, it is very likely to be the major social center, not only for the children but also for the adults. In it may

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be developed dramatics, a choral club, a band, clubs for domestic arts, or an evening civic forum. Indeed, whether large or small, the school may be the center not only of formal education but of recreation and general cultural life of the community. The quality of the teaching staff and the nature of the school program should be known by the public assistance worker and this knowledge should be used according to its value. And here be it noted that the relationship between the assistance worker and the school should be reciprocal. The worker may seek, on behalf of the persons in whom he is interested, the enriching opportunities that center in the school. At the same time the school needs the services of the worker. There may be children who are an anxiety to the teacher and a disruption to the work of the school just because they lack those things or services which the assistance worker could provide. But often the teacher does not know the worker nor understand his agency's program. A mutual interpretation and exchange of services is needed.

So also with the church. Even more than the school, the rural church is exceedingly variable. It may have only an occasional, non-resident pastor, be socially ineffectual, poorly led, and may be an actual dividing force in the community. Or it may be a powerful influence toward a better community life and a real help in personal troubles. The church cannot be used automatically by the assistance worker as a social resource but, according to the interest and spirit of the minister and the life of the

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church itself, it may be extremely helpful. Any church will be a more valuable resource as the minister understands the public welfare program and can intelligently turn to it for the benefit of his people and truly interpret it to them and others.

In many small towns and country districts recreation programs have been developed through the constructive expenditure of work relief funds. Athletic fields and field houses have been established and local interest has been stimulated in all sorts of recreational activities. These may be immensely helpful to the public assistance recipient. The farm bureau, grange, and other farmers' organizations have wide-flung programs of recreational, educational, and vocational activities for men, women, boys, and girls.

The urban worker may indeed be astonished by the breadth and richness of the educational, recreational, economic, and cultural organizations in a good, live, rural county. To help clients to participate more largely in such opportunities is the finest form of social treatment and may be the most effective method of finally removing the need for aid. On the other hand, there are socially starved rural communities where the worker will have to consider carefully the possibilities for a reasonably satisfying life. The possibilities may not exist there—as in some cut-over and drought areas—and the problem of creating or enriching social institutions or of helping people to move away will be insistent. These are problems for the board and committees rather than for the

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worker himself, but he, by reason of his intimate knowledge of persons and their handicaps, may be in a key position in the consideration of plans and in carrying them out.

Specialized Services

Organized agencies for social work and specialists upon whose help the public assistance worker can call are few in the rural community. The county welfare office itself will probably do the work which would be divided among half a dozen specialized agencies in the city. Child welfare work, placement of children in foster homes, juvenile court work, aid to dependent children, assistance to the aged, assistance to the needy unemployed, personal services to disorganized families, admissions to the county institutions and hospitals—in fact all of the services for which there is a public responsibility, may be combined in the single staff of the county welfare unit. Usually this proves to be desirable, for the volume of any one kind of need is not large enough to justify a special organization for each, in view of the heavy cost in time and money involved in making home visits over a large geographical area. For the same reasons there may be no private agency that deals on a community-wide basis with the needs of individuals. Any considerable amount of specialization in social service in a small community is rarely possible and when attempted it is usually at the cost of basic general services. Ideally, the rural worker needs to be more broadly trained than the city worker.

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He must work well in every kind of specialization, since there is probably no other agency to which he can refer the case for social treatment.

Usually, however, there are specialized services in two related fields: public health nursing, as represented by the county nurse; and farm development, in the person of either a skilled agricultural agent or a home demonstration agent or both. The public welfare service, the public health service, and the agricultural extension service, where all exist, form a triple partnership for the social welfare of the county. No member of that partnership can be missing or fail to work well with the others without vital loss to the total program.

The provision of specialized services by the state to supplement those found in the local community is one of the most interesting aspects of rural social work. It involves the cooperation of various state departments, the public assistance worker, the county nurse—if there is one—and local committees. The state may be found to be sending out to the counties special consultants and traveling staffs and clinics, some regularly, some on request. These come not only from the state department of welfare but also from the department of health, the state university, the agricultural college, the department of labor or industry, and other state departments or institutions.

The assistance worker needs to exercise his imagination to find out what the state offers and how to use it. If there are a number of persons of suspected mental de-

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ficiency in his community, probably a state psychologist can be secured from the department of welfare or the department of education to make examinations. For psychiatric problems and difficult questions of child guidance, the worker may arrange for a clinic of psychiatrists and advisers on parent-child relations to come from the state psychiatric hospital or the child study department at the state university. This may necessitate an organized request in which the women's clubs, agricultural organizations, the county school superintendent, and others will join. If such a clinic is brought into the county, it will come with a broad educational approach to the problems concerned. The local assistance worker will make arrangements in advance to get special examinations and advice for those persons who need it most. Traveling health clinics—tuberculosis clinics, baby welfare clinics, venereal disease clinics, and others—can be secured from time to time by arrangement either with official state departments or voluntary state agencies.

The state college of agriculture offers a large extension service, both through representatives going into the counties and by correspondence and publications. The county agricultural organization is closely tied in with the state college and may itself be a definite part of the state agricultural extension service. If the recipient of public assistance is having difficulty with his garden or his rabbits or his chickens and there is no county agricultural agent whom he may consult, the help can probably be secured directly from the agricultural college. The state indus-

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trial department may offer not only creative help in the development of work opportunities, but also needed aid in the control of agricultural child labor and other working conditions.

If it is not possible for the state services to come to the locality nor to meet the need by correspondence, the individual can perhaps be sent to the place where the services are located—to the state general hospital, psychiatric hospital, or other institution or agency. When that is done, carefully written social case histories should be sent on in advance. When the person returns to the local community the worker must be prepared to render follow-up service under advice of the state agency.

All of these services from the state take the place, for the rural community, of the specialized agencies found in the city. It is true that more time and planning is required to use them well than to use local agencies ready at hand. The assistance worker will need to develop skill in long range cooperation with the state agencies and in organization of community forces in order to secure and use what is needed. Perhaps in the end there may be gaps in what he is able to do but that is likely to be true anywhere. At any rate, the worker would do well not to sit down and bemoan the lack of specialized resources but to look searchingly around. He may find what is needed.

Personal Relationships

In the small community organized and official relation-

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ships merge into personal relationships in ways important for the assistance worker to recognize. This is especially the case in respect to the local public officials. They are closer to the people in small than in large communities, and their election is not largely on the basis of political party but may be curiously without regard to social and economic status if the individual is respected as a person. The assistance worker is himself a public official and if he is wise and cooperative he will find himself in a kind of fraternity of officials that is full of mutual helpfulness. The county sheriff may be, in fact, a very effective probation officer with a wide knowledge of the young folks of the county and a constant watchfulness that does much to keep them going straight. The county commissioners, although they may be hard-headed business men and farmers, are likely to have the interests of the county and its people very much at heart and to be personally helpful in endless ways. If they have a greater sense of financial than of social responsibility, the more reason for the assistance worker to keep in close contact with them in order to interpret social needs. The county auditor, the county recorder, and the small town mayor or other village officials may be endlessly helpful. The village mayor, especially, may have not only administrative but also police duties and feel a peculiar responsibility for the well-being of every member of the village. He may be watchful of the children, concerned about the sick, a disciplinary authority for the errant and neglectful.

Personal neighborly resources in the small community

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may be even more important than the organized social forces. Neighbors are ever present with their kindness and their criticism, their backing and their prejudices. They are likely to know a great deal about each other's affairs and sometimes they think they know a great deal more than they do. The wise public assistance worker will drop a vast amount of information into the background of his mind and think no more of it unless further light reveals it as significant. Apparent or partially established facts about a person may be seriously distorted with great damage to his reputation. This is particularly likely to be true in cases of mental or physical disability where all the facts are not obvious to the casual observer. A certain man who had lived on a small farm for several years was regarded by neighboring farmers as a lazy person who would not work when he could. Twice he failed to appear for assignments to relief work and the neighbors' judgments seemed abundantly confirmed. But the fact that he had gone out to that little farm in an effort to recover from tuberculosis and could not, without injury, have taken the work to which he was assigned was not generally known.

Social workers were warned long ago to avoid dealing with neighbors because of their misinformation and prejudice. But in small communities practically everyone—the doctor, the lawyer, the school teacher, the employer—is a neighbor. These persons may be prejudiced or they may be peculiarly understanding and influential, but it is

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impossible to avoid dealing with them. The problem is to learn to evaluate and work with them well.

The dweller in the small community may find neighborly kindness and approval a strengthening and stabilizing power that can help him to surmount almost unthinkable difficulties. But lack of sympathy and approval may be a hardening, inhibiting, and generally destructive force, for the person cannot, as in the city, escape from the influence of neighbors. Even if the attitudes of people around him are only negative—if he is simply ignored—he knows that he is in fact rejected. Such a rejection may close ordinary opportunities for self-support and self-reliance. When a request comes into the public assistance office for a woman to do a day's work and the worker happily suggests someone who should be able to do it well and who needs it desperately, it is disconcerting to hear a silence at the other end of the line and then a cold voice asking, "Isn't she a sister of Mrs. X? I don't believe I want any of that family."

The best case work may well be not with the family itself but with members of the community, to change their attitudes toward the family and to open opportunities for them. In the case of the tubercular man before mentioned, the assistance worker not only secured medical aid and had the work relief assignment readjusted, as approved by the doctor, but also took pains to interest the county agricultural agent in the man's farming problems and especially to interest certain farm bureau leaders to bring members of the family into appropriate rural clubs.

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The way was opened for a totally different understanding on the part of the neighbors and for community participation on the part of the family. Certainly this was a case involving not merely eligibility but a proper adjustment of assistance and treatment looking toward its discontinuance.

Volunteers

Interesting questions arise as to committee work and the services of individual volunteers in a small community. When boards or committees consider the needs of individuals—which they are likely to do in rural areas—the possibilities of gossip are present and may disturb the urban bred worker. He will find that the difference in social organization between the large and small community calls for a different approach and procedure than that in use in the city where anonymity is characteristic and the worker is able to protect the dignity of the family by avoiding personal mention of them. In the small community intimacy—or fear of intimacy—is characteristic. It may be impossible to avoid gossip. The important thing, then, is not to try to prevent it, but to contribute the best interpretations, so that when anything is said about a person it will be true and helpful.

Individual volunteers who try to assist families in a small community are likely to be in a position very different from that governing volunteer work in larger centers. In the city volunteers usually are carefully selected and introduced into the situation for some particular service.

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In the rural community they were probably concerned with the problem before the public assistance worker was. The assistance worker's role may be to cooperate with them in their efforts, making useful suggestions where possible. Their kindness may express a true sense of mutual neighborly responsibility and may offer genuinely fine service, but it also has dangers and needs careful and discriminating guidance. This is not a case of telling people what to do and what not to do. It is a more subtle and at the same time more realistic matter than that. The test of volunteer service should be: What does it mean to the person to whom it is rendered? Is it really welcome and helpful or is it meddlesome and disliked? Is it stimulating, or does the well-meant kindness "turn sour" by increasing the person's dependency or aggravating the griefs and strains with which it sympathizes? To develop and cooperate with neighborly kindness and also to find means of diverting it are both aspects of the skilful use of personal resources in the small community. Unless the public assistance worker knows the people of the county and shares in their thinking and planning, he will be unable to secure these results.

INTERPRETATION AND COMMUNITY BACKING

The public assistance worker has a critical task ahead of him in the next few years. The whole program can become as hard and barren as the English Poor Law of the seventeenth century, or it can be a vital and saving power

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for hosts of men, women, and children. In these unsettled times much remains to be done to make social security what it should be. The end result will depend very largely upon the understanding and backing of the community, and this in turn will depend largely upon the interpretation given by those who see the facts most closely—that is, the public assistance workers. The interpretation of public assistance is probably the very hardest knot in the whole field of social work interpretation, not because the need itself is hard to portray (it is in some ways one of the easiest) but because public assistance lies at the very center of conflicting interests in society.

The worker and his board will have to meet criticism on every side, from “reactionaries” on the right and “radicals” on the left, clients in front and taxpayers behind. Some officials in high position are now suggesting that old age assistance recipients should be disfranchised; some newspapers are reiterating that “relief has become a racket”; the spook of job refusals continues to haunt us; applicants who always earned an independent living before the depression now “prefer to stay on relief,” so we are told.

The ancient and discredited idea of keeping down the numbers of those seeking assistance by making relief as hard as possible to get is coming back into vogue, with an astonishing disregard for what is possible and what is impossible to the recipient. The advocates of such a policy seem to overlook the fact that while the spur of necessity is stimulating in the midst of opportunity it is paralyzing

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when no opportunity is present. Where there is no elasticity, pressure can bring no rebound.

Any true interpretation of the assistance program and the needs it is designed to meet can come only through the well-coordinated efforts of the whole group of persons concerned in its administration, from the worker who tramps the streets and visits the homes to the executive officer and the board. Board members are in a peculiarly advantageous position to interpret to the community the facts brought to them by the staff and to bring back to the staff all sorts of points of view from the community. In a small agency, the worker may deal directly with the board, and be able to interpret the needs and the work fairly easily to its members. In the larger communities the executive must gather and relate materials to be presented. He must draw together the experiences of the visitors and his own contacts with recipients and the representatives of different interests in the community, and integrate them with the mass of impersonal facts gathered by the office statisticians. Happy is the staff where all the members can work together to weld the part which each plays into a consistent whole for the service of the recipients and the community. Interpretation within the staff itself is a first essential. It requires a free flow of thought and experience up and down through the organization ranks, and back and forth among the members. Lacking full integration of thought and purpose within the organization, it is hard to give a convincing account to the public.

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Interpretation to the public comes first and most constantly through informal person-to-person contacts. Public assistance workers on every administrative level are constantly interpreting the program wherever they go, as they talk with the recipients, employers, interested persons, representatives of other agencies, or the general public. If the worker is approved, approval of the program is already half won; at least a favorable hearing is won. If the worker himself is not approved, it is practically impossible to win cordial backing for the program. Little things that seem unimportant, such as dress and manners on the part of the worker, if they reveal a lack of sensitiveness to the customs and ideals of the people among whom he is working, can be fatal to good community backing.

An important expression of appreciation of other people is good listening. This brings both a favorable hearing and also the discovery of what information and suggestions may be interesting and convincing to the other person.

If the worker is to have a clear understanding and philosophy about public assistance that is worth passing on, it will require continuous open-minded study and thought on his part. He must be constantly well informed on current facts that bear upon the problems in hand. The critical citizen who thinks that people on relief are not trying to find work may be impressed by the number of applicants for jobs listed in the live file of the state employment office at the end of last week. (Strange how

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often the number of placements is quoted, but the number of persons who could not be placed is left unreported!) The assistance worker needs ever to be alert to what the public is asking or misconstruing and should have up-to-date facts, both in regard to the public assistance program itself and the community conditions that affect it.

Most assistance workers are struggling, not always patiently, with endless reports. These may, indeed, be too burdensome in proportion to other duties. But if the worker can develop a consuming interest in the findings of these reports it may lighten his load. The public wants facts—facts on the volume, on the cost, on ages, on occupations and number of dependents of the persons who are receiving assistance, on what their difficulties are, on how effective the assistance really is and how long it has been continued, and on a multitude of other matters. The worker needs to have both a sympathetic appreciation of the troubles of John Jones, whom he knows and whose difficulties he can vividly portray, and also of the mass of facts of which John Jones is an illustration. There is probably no problem of interpretation that is more crucial than the careful gathering and analysis of facts as a basis of interpretation. The worker needs to do his part, whatever that may be, in securing those facts, understanding them, and making skilful use of them. Published reports, attractively presented, can win wide attention and are invaluable in giving authoritative facts that can be used effectively with many different kinds of groups.

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In planned publicity perhaps the first consideration may be that of the audience it is desired to reach, then what the message should be, and finally what medium will best reach that audience. It is worth while to give careful thought to reaching individuals or small groups who, when they understand the subject, can interpret it in their own way to larger groups. Ministers, educators, newspaper people, labor leaders are very important in this connection because they have large constituencies to whom they speak, and their interpretation may be very helpful or very misleading. If legislators can be assisted to become well informed between legislative sessions when no particular controversial issue is involved, their understanding may save the day at a critical moment later. A convinced group of persons who will back the work and whose personal influence reaches larger numbers is essential to the development and stability of public assistance administration.

The person-to-person method of interpretation may well be supplemented by committee discussions and talks before groups of various sizes. Speeches to audiences of naturally associated persons—church groups, labor groups, women's clubs, civic clubs, and the like—offer particularly good opportunities for clear, well-rounded presentation of the issues. There should be a chance for questions from the audience and for some discussion. Interpretation of this sort profits by the convincing force of the worker's own experience and personality.

The newspapers and the radio are the major avenues of

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interpretation to the general public. Most social workers have a natural timidity in respect to newspapers. They are deeply conscious of the impropriety and cruelty of making public the personal affairs of unfortunate persons and do not quite know what else to give the newspapers. Meanwhile, the papers are probably the chief influence in setting the public attitudes and may set them most unfortunately. There are two answers to the problem. The assistance worker should learn how to prepare acceptable material for the papers and should get acquainted with the newspaper people so that they may get from him a background of understanding that will enable them to give helpful interpretations.

In the last analysis it is the people of the community who determine what the public welfare program shall be. Laws and policies are only the framework. True public welfare in all its aspects is a living and growing function of government which can only develop in a favorable atmosphere. To create that atmosphere is a fundamental responsibility of all who are concerned with the administration of public assistance.

GERTRUDE VAILE

VI

PUBLIC ASSISTANCE AND SOCIAL WORK

THE preceding chapters have shown that the public assistance job, if it is to be well done, will require a large measure of skill, resourcefulness, and understanding on the part of the workers engaging in it. A merely mechanical determination of eligibility and routine issuance of grants will, it is seen, yield results which will be unsatisfactory at a number of points to both the recipients of aid and the public that pays the bill. It is obvious that a larger opportunity for service presents itself, if the public assistance worker will but seize it. This opportunity has already been discussed in terms of advancement of health, promotion of the welfare of children, conservation of family and individual morale, stimulation of self-sufficiency, and the release of constructive forces in the lives of recipients through granting them some measure of personal as well as material security.

In keying his job to these broader purposes the worker will find himself aligned with what may be called the social work movement. This movement, as Linton Swift has pointed out in a recent paper, "includes a tremendous variety of activities, such as the various fields of social case work, of social group work, recreation, public health,

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community social planning, legislation, and social reform. . . . One might say that the personnel of the social work movement as a whole includes not only social work professional staffs, but also non-professional staff, laymen who participate in board and other activities, and even many who give active moral as well as financial support to social work objectives.”¹ The public assistance program is, of course, a tremendously important part of this movement and the workers engaged in it are a large segment of the total personnel referred to.

During the past half-century there has been rapid development of a profession—the profession of social work—within this larger movement. This development has been an inevitable one. Methods of giving assistance which may have been appropriate to the agricultural society of seventy-five or a hundred years ago became obsolete and ineffective with the spread of industrialism, the growth of cities, and the development of the extremely complicated conditions under which life came to be lived as the country “grew up.” In the early days volunteer efforts were relied upon almost exclusively, and kindness and good intentions were thought to be adequate equipment for anyone undertaking to render aid to others. The more intelligent of the early volunteers soon recognized, however, that if they were to help rather than harm people they needed to know a great deal more than they had time to learn, and so came to realize the necessity of employing

¹ Swift, Linton B., *Social Work: Movement and Profession*. Unpublished.

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persons for the task. The early "charity organization societies" of the 1870's and 1880's, for example, soon found their program of volunteer "friendly visiting" to be only a prelude to a later development of full-time service by an employed staff of persons devoting their whole lives and talents to social work.

As the staff workers of those early agencies came to sense the magnitude of the responsibilities which rested upon them, they began gradually to think in professional terms. They saw that social work, to be effective, must be disciplined by careful appraisal of method, measurement of results, use and exchange of established knowledge, training of new workers, supervision of less skilled persons by those of larger experience, and so forth. With these developments the profession of social work began to emerge.

Walter West has commented on this birth of professional social work as follows: "I do not know just when professionalization of social work set in, but according to my understanding it occurred when the trials and errors of early activities disclosed facts and hypotheses about the work which was being done which could be set down to be learned and taught, and when it was seen that social work required a broad working hypothesis, and was something beyond a craft-like series of steps to be taken."¹ This process of correlating facts and hypotheses into a body of knowledge which can be transmitted to new prac-

¹ West, Walter, "Purpose and Value of Standards in Social Work," in *The Compass*, December, 1936, p. 2.

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titioners is, of course, still going on, as is a similar integration in the older professions. But enough progress has been made to justify social work's claim that it is, as Mr. West contends, something far more than "a craft-like series of steps" to be followed out routinely in given situations.

The public assistance worker who takes his specialized job seriously will see it pointed in this professional direction and will refuse to regard it as a purely vocational opportunity. If he is desirous of rendering the best possible service to the persons looking to him for aid he will accept the fact that growth in the knowledge and skills of social work is essential. He will recognize that without such growth his competence, at best, will be only that of a routine worker and his ability to help others greatly restricted. Whether growth can proceed in any given case to a point where professional competence may be established and recognized, depends upon individual circumstances. Some workers will be able to speed up the process by acquiring a professional education through attendance at a school of social work; others, unable to make this investment of time and money, will have to be satisfied with such training as they can get through other channels. No worker is so situated that he cannot make some growth in his job, for there are avenues of reading, conference, study, and counsel available to all.¹

¹ For a fuller discussion of the professional development of social work and its present status see Brown, Esther Lucile, *Social Work as a Profession*. Rev. ed. 118 pp. 1938.

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SCHOOLS OF SOCIAL WORK

The need for "a broad, basic educational program which will ensure that all future social workers will possess a common body of knowledge, no matter what may be their field of special interest"¹ has led to the development of schools of social work in many sections of the country. In 1937 there were 32 schools whose standards were such that they qualified for membership in the American Association of Schools of Social Work. In addition there were a number of non-Association schools with varying programs of training. The Association schools reported 10,138 students registered for some work in 1936-1937. On November 1, 1937, there were 2,562 full-time and 2,472 part-time students, or a total of 5,034, majoring in social work.

The leading schools conduct the largest part of their work on the graduate level; that is, students to be admitted must first have secured a bachelor's degree from a recognized college or university. In 1936, 73 per cent of the full-time and 88 per cent of the part-time students in Association schools were of graduate status. "As in other educational fields, social work education has achieved certain minimum standards. These standards presuppose that this education should be offered at the graduate level and that the first year should offer a basic preparation regardless of what position a student later hopes or expects

¹ Wisner, Elizabeth, "Education for Social Work," in *Social Work Year Book*, 1937, p. 126.

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to secure. The American Association of Schools of Social Work has imposed additional requirements which include a two-year curriculum separately organized within the educational institution with instructors and field work supervision which is professional in character.”¹

The public assistance worker who holds a B.A. or equivalent degree and contemplates the possibility of attending a graduate school of social work may be interested in knowing what courses of study he will be expected to pursue there. It is assumed that his undergraduate preparation will have included some groundwork in the social sciences—economics, government, history, sociology, and the like—and an introduction to biology, psychology, and similar studies bearing on the nature and behavior of man. The graduate school will be found ready to build upon this general preparation by offering during the first year instruction in a suitable group of subjects selected from the following list: social case work; social group work; social welfare planning, or community organization; medical information; psychiatric information; the field of social work; public welfare administration; child welfare; problems of labor and industry; social research; social statistics; social legislation; and legal aspects of social work or social aspects of the law. To students able to devote a second year to professional training more advanced work will be available, such subjects as the following being found in the curricula of a group of the leading schools: personality

¹ Wisner, Elizabeth, "Training for Public Welfare in *Public Welfare News*, November, 1937, p. 3.

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problems; psychiatric social work; medical social work; foster care of children; juvenile court organization; probation; the family and the state; administration of social agencies; problems of unemployment; immigration; social insurance; housing; standards of living; nutrition; rural social work; social work and the schools, the courts, and other institutions of society; and similar specialized courses.

The individual student's choice of subjects would depend, of course, upon a number of factors which cannot be discussed here. It is sufficient for our purposes merely to have called attention to the wide range of topics which the profession deems important in the preparation of its future members. It is obvious that a worker who has added to his equipment the knowledge gained from a group of these or similar graduate studies will be much better able to cope with problems arising in the practice of his profession than one who is not so prepared.

A fundamental part of the curriculum in all schools is the supervised field work required of students. This work is usually done in the social agencies of the district in which the school is situated, under the supervision either of the agency itself or of assigned representatives of the school.

For the year 1937-1938 a number of fellowships and scholarships were available to students in 36 schools—including both Association and non-Association schools—as reported in the January, 1937, issue of *The Compass*. Financial assistance is also offered by some schools in the form of free tuition, small loans, and part-pay student assignments. A few states offer grants covering main-

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tenance and tuition for a year in a school of social work to a limited number of workers on local staffs. It is also possible for a student to spread his training over several years. No one, therefore, who is qualified for admission to a school but unable to finance more than one quarter or semester need feel that because he cannot take the complete course consecutively he is necessarily prohibited from entering a school of social work.

The reader may inquire what recognition in professional circles will be accorded to the student who completes one or more years of study and field work in a recognized school. In this connection the membership requirements of the American Association of Social Workers will be of interest:

Applicants for membership are now required to have a minimum of two years of college credits, plus two years of accredited experience, plus three years of additional preparation, making a total of seven years. Within the three years of professional preparation, part of which the applicant may have spent as a practicing social worker, he must acquire credits for about a year's work in a school of social work, and for approximately a college major in social and biological science. The purpose of this arrangement is to require, in addition to the professional training, nearly all of a full college course without stipulating graduation. As a preferred method, a six-year preparation is allowed to those who graduate from an approved university and then complete a two-year graduate course in a school of social work. A temporary junior membership is open to those who have completed junior college work and who have less experience, less social science, and

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fewer professional school credits than are required for full membership. Junior members have a temporary status but within five years must acquire the additional qualifications for full membership.¹

The Association's membership, it should be said in passing, is "individual, voluntary, and subject only to such regulation, standards, and disciplines as it imposes on itself in pursuit of professional purposes."²

OTHER TRAINING METHODS

Desirable as is a formal schooling in the background and processes of social work, not all of those engaging in the public assistance program will be able to secure it. Indeed the number of new recruits during the past few years has been so large that the schools would find themselves taxed beyond their capacity were any large proportion of this group to seek immediate admission. Many workers will, of course, be unprepared to finance two years or even one of full-time graduate work—even with the help of scholarships—and others who might be able to make these necessary arrangements would be debarred because of lack of a degree from an undergraduate school. For these workers, whose numbers run into the thousands, state assistance authorities are developing "in-service" training programs of various types.

The purpose of most in-service training is to acquaint

¹ Marcus, Grace F., "Social Work as a Profession," in *Social Work Year Book*, 1937, pp. 489-490.

² *Ibid.*, p. 490.

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the worker with the scope of his responsibility and the restrictions placed upon it, as set forth in the statutes and regulations under which he works; to teach approved methods and techniques; and to suggest avenues of exploration and growth. Classroom methods may be used, after being adapted to the limitations of the environment in which training-on-the-job must be carried on; institutes or staff meetings may be arranged; or reliance may be placed chiefly upon training through planned supervision. The latter seems to be the preferred procedure in some agencies today. Emphasis is properly placed on improving the worker's competence for the particular job he has been engaged to do rather than on giving him a substitute for the basic education of the type provided by the schools. Frequently all staff members, professional as well as untrained, are required to participate, the new workers being somewhat protected from overloads while learning on the job. The success of in-service training depends equally upon the potentialities of the staff for growth and on the competence of the supervisors and instructors assigned to it.

While this kind of instruction has the virtue of necessity in the present situation, it should be recognized for what it is—education which is functional or vocational rather than professional. In the early days of all the established professions, before professional development had proceeded to a point where graduate schooling was required, in-service training had to be relied upon to prepare new workers for their tasks. Law went through this

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stage: young men used to "read law" in the offices of their seniors as preparation for certification and practice. Today the great majority of them get their training in law schools. Medicine has gone through a similar development. Social work was beginning to emerge from this stage when the demands of the unemployment relief and security programs made necessary a partial return to it.

Whether or not a worker is able to attend a school of social work or to participate in an in-service training program, he will find other though lesser opportunities at hand for growth in his job. These are the traditional methods of self-education available to those who must fashion their own tools in whatever enterprise they may be engaged. Among them are: reading and home study; attendance at educational institutes, lectures, or conferences; visits to other agencies for exchange of information; and consultation with field representatives or others who may be available for that purpose. Occasionally a worker may be able to secure a short leave of absence for study or may enroll for evening or other extension courses in an accredited university or school of social work.

Whatever other things he may do, the assistance worker will undoubtedly wish to pursue with some diligence a self-imposed course of reading in the literature of his job. He will find a wealth of printed material, both in books and periodicals, that will be of great value to him. The bibliography appended to this volume will suggest the content and scope of such material, and a selection from the items there listed will make an excellent starting point

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for one wishing to acquire further knowledge about the broad subjects so briefly treated in the text of the chapters themselves. In the larger centers the public libraries will probably afford reference works and periodicals containing much of value, and in rural sections the state library extension service will make similar facilities available.

Attendance at institutes, conferences, and so forth, will afford opportunities to broaden one's horizon in ways not open to the person who confines his self-education to home study and reading. The same can be said for personal contacts made through visits to other agencies or through consultation with supervisory personnel coming into the community from state or federal agencies concerned with public assistance. Often a personal contact so established will lead to later educational opportunities of a broader nature than one is able to visualize at the time.

The methods to be followed in achieving steady growth on the job will thus be found to be numerous if the worker has a real desire for greater competence and a determination to develop it at all costs. As has been repeatedly said in this volume, the needs of the persons receiving care provide ample incentive for making this effort.

STATUS AND SECURITY

Our previous discussion has been largely directed to ways in which the worker can acquire knowledge and skills needed in his direct service to the recipients of aid. There is another aspect to this question, however, which

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deserves consideration—namely, the need which the worker himself has for security against community indifference to his proper status as a skilled, or potentially skilled, public servant. Unless his work is recognized as important and worthy of the respect given to professional service in other fields, he will be exposed to political or other hazards that will greatly affect his usefulness.

The answer, of course, lies in giving public assistance workers the protection of a soundly administered civil service merit system. Such a system has been defined as "a set of procedures for selecting and retaining employes in the government services on the basis of qualifications and fitness for the work to be done,"¹ such qualifications being determined by objective tests. Where its antithesis, the spoils system, prevails, "government employes are selected and promoted because of their political faith or because of 'pull,' very often without reference to their ability."² This is not to say that incompetent employes are never found under a merit system or vice versa, but the probabilities that a capable service will be developed without some merit protection are remote. It is too easy to "turn the rascals out" and put in friends of the ascendant political party. Furthermore, the worker under such a system lacks incentive to perfect himself in the techniques of his job, for he has little assurance as to permanency of tenure.

¹ McMillen, Wayne, "Civil Service Merit System," in *Social Work Year Book*, 1937, p. 79.

² *Ibid.*, p. 80.

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There are a number of steps in the operation of a good merit system. First, the positions to which the system is to be applied must be analyzed, classified, and described in detail. Next, the qualifications required of applicants for these positions must be established. Then, examinations and tests must be devised for determining which of the eligible applicants are best qualified for the various positions. Fourth, the applicants are given these tests and rated accordingly. Fifth, probationary or temporary appointments may be made to correct such errors in selection as occur despite the qualifying tests. Sixth, provisions are necessary for frequent re-evaluation and for transfer or promotion from one level of the service to another. Seventh, security of tenure against unfair demotion or dismissal must be provided without making it impossible to remove a genuinely incompetent employee. And finally, a retirement plan must be instituted for those who have reached an advanced age in the public service.

In only a few of the states have comprehensive merit systems been established although the need for them, under present conditions of expanded governmental services, is acute. The public has accepted the merit concept, however, and may be expected increasingly to give its support to efforts to install the system as a protection against the spoils evil. Considerable progress has been made in this direction since the passage of the Social Security Act.

The assistance worker will see in the classification procedure described above a protection against unfair appraisal of his worth by uninformed critics. If he has

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qualified for a certain classified position through successfully meeting tests prescribed by an impartial authority, he will be better able to defend his status than if he were appointed or advanced to it by a friendly superior without benefit of such objective measurements of his ability. He will see, too, that still better positions will be open to him when he has qualified for them, and will thus have a continuous incentive for professional growth.

Some public assistance administrations, unwilling to sit by idly awaiting the establishment by statute of a comprehensive civil service merit system, have developed informal substitute plans through administrative regulations wherein the same principles are applied in greater or less degree. These are working out successfully in a number of communities.

There are other ways in which the assistance worker may be able to add to his security and status. Affiliation with the trade union movement is advocated by a large bloc of younger workers as a necessary step in the direction of better and more secure working conditions and as a "tangible symbol of that identification with organized labor which is the key principle in the philosophy developed by the rank and file movement."¹ To others, however, who regard such affiliation as in conflict with a professional approach to social service, this step has not proven acceptable. One social work educator has declared: "I would certainly agree that better working conditions

¹ Fisher, Jacob, "Trade Unionism in Social Work," in *Social Work Year Book*, 1937, p. 502.

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and more adequate salary scales should be important concerns of staff organizations. But I would add a factor of far greater importance—concern for the standards and the rewards of work in terms of human and professional interest.”¹ Whether the individual worker will see in trade unionism a desirable or undesirable development, in terms of his own security and satisfactions, will depend largely on his social and economic philosophy, his concept of his job, and his appraisal of the community and group reactions that may result from affiliation or non-affiliation with it.

Another way in which the worker may achieve status for himself and his program is through participation in community enterprises which need his support. Especially valuable will be professional association with other social service workers in the clubs, councils, or other organizations which they may have established for discussion or program-making purposes.

CONCLUSION

The public assistance worker who sees his task as more than a routine job and who wishes to make the most of it will find, then, ample opportunity for growth. As he considers the needs of the people he serves and their right to his understanding and intelligent helpfulness, he will be dissatisfied with anything less than a full development of

¹ Robinson, Virginia P., “Is Unionization Compatible with Social Work,” in *The Compass*, May, 1937, p. 9.

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his talents and skills in their behalf. And by working toward such a goal he will find widening horizons and a growing satisfaction in his job.

RUSSELL H. KURTZ

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