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measure of optimism and hope in the efficacy of ourselves as individuals and our community instruments. We do have the general ideals, the intelligence, the experience, the enterprise, the means. We can approximate effective organization to attain our objectives. We can, if we set our sights high enough, if we take the necessary steps, with high conviction, with clear-mindedness, self-discipline and tolerance for differences; if we strive for our community welfare in realistic association with our neighbors and in recognition of the impossibility of a complete reconciliation of divergent philosophies.

LONG RANGE CASE WORK PROGRAMS*

by Morris Zelditch

Council of Jewish Federations and Welfare Funds, New York, N. Y.

THE PLACE OF CASE WORK AGENCIES in serving the population of their communities has undergone considerable change since ten years ago, especially during the war. Because of this, Federations and Community Chests now find themselves faced with a question: How should agencies and Federations plan their future programs? This paper will be devoted to a consideration of this question and, it is hoped, may help to develop constructive thinking to provide an answer for the question.

A most significant change in the work of urban case work agencies is the marked reduction in the number of relief cases they handle. One way to trace this is through a study of the operational statistics of 60 selected family agencies, of which ten are Jewish, on which reports are available annually from the Russell Sage Foundation. These figures show that the 60 selected agencies had an average monthly case load of 218,413 per month in 1932 (June figures), of which 182,456 were relief cases, and 35,957 service only. In 1936, they carried 40,416 per month, of which 19,400 were relief cases and 21,016 service only. In 1940, their case load averaged 42,690 per month, of which 16,874 were relief and 25,816 service only. In 1944, the same agencies had 33,940 cases per month and by now the drop in relief cases brought it to 8,775, while the service only cases were 25,165. The percentage of relief cases had dropped from 83.5 in 1932 to 25.8 in 1944 and the percentage of cases receiving service only had changed from 16.5 in 1932 to 74.2 in 1944. The drop in the number of relief cases carried, and the enormous drop in total number of cases carried after 1932, is obviously related to the assumption of responsibility for relief by the Government. Also, after an increase in total cases carried from 1936 to 1940, there was a drop, practically all of it relief cases, by 1944.

Two further factors bear upon this also. The income of the American family has substantially increased during the war so that the average weekly pay for a factory worker in 1939 was \$23.86 while in March 1945, it was \$47.51 less taxes. It should also be borne in mind that the continuing spread of the social insurances results in a constantly increasing number of beneficiaries with increasing benefit. This is constantly reducing the potential number of clients for any kind of relief, public or private, and will do so increasingly.

A New Trend in Case Work

It is well, I think, to glance at one other trend in community use of case work.

^{*} Presented to the Conference on Planning Community Programs, Baltimore, Maryland, September 27-28, 1945.

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In recent years case work agencies, especially family agencies, have progressed in their ability to help people with personal or social maladjustments. This ability has reached such a point that many case workers are spreading their wings and beginning to serve the general public, not merely the indigent alone. The figures I have given indicate the trend in that direction, although I have no exact breakdown of the type of problems handled nor the economic level of the groups served in the service only cases reported. However, it is sufficiently well established that we may accept a good part of the claim that scientifically trained, well-organized case work agencies are in fact equipped, especially in larger communities where there are other resources, to assist a substantially wider segment of the community with personal or social maladjustments beyond their own control.

I think we may also accept as a fact the claim that there are many persons at all economic levels in the community who are in need of skilled social service for their own difficulties. If this last point needs substantiation it is well illustrated in a recent book entitled, "Where Do People Take Their Troubles?" In this, the author exposes the unscientific, unethical commercial practitioners of personal counseling to people in trouble. The impression one gets is clearly that there are a great many such people and they do need personal assistance. A major problem for Federations and for case work agencies is that there seems to considerable difficulty in getting the people who need such services to come to social agencies for help.

During the war the urban community has rapidly developed a constantly expanding use of the social case work method. Thus we see the growth of counseling with or without social workers as a regular community function. Industrial counseling, vocational counseling, school, marriage and other types of counseling have progressed enormously in public favor.

Industrial Counseling

One of the major trends for social work during the war has been expansion of industrial counseling. This is a war baby of large size. Previous to 1942 instances where industries undertook personal counseling on any scale were relatively few. Efforts to reduce war absenteeism and turnover in war production plants and in Government agencies resulted in the establishment, usually under management auspices, of extensive systems known as industrial counseling, personal counseling or some related name. Several union groups, notably the United Automobile Workers in Detroit, and the National Maritime Union of New York, have established counseling services under Union management. Industrial counseling under management auspices has not been highly successful and it threatens to become a war casualty. The principal cause is that the personnel used for this counseling was usually incompetent to properly perform the function; also under management auspices such counseling tended to be directed for management needs rather

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than for the direct benefit of the person served. Under Union auspices the program is still in its infancy and beginning to grow. One reason for this lies in the fact that Unions use their counselors not as social workers but as information specialists who are trained to refer cases of personal difficulty or social maladjustment to social agencies in their community.

Counseling with veterans is another area in which social agencies feel that they have a competence and responsibility. Quite a point was made of the large number of discharged veterans diagnosed as psychoneurotic and of the numerous personal and social problems which were bound to occur when demobilization began. While undoubtedly there are these personal difficulties, the assumption that veterans would flock to the doors of the agencies of the community for help has not been borne out up to this point by the facts of the case. Case work agencies, it was thought would certainly receive a substantial number of referrals from Veterans' Centers and other sources for case work assistance. That may develop later on but, to date, the number of veterans coming to case work agencies for help is relatively small. The Family Welfare Association of America looked into this question and found that for May, 1945, the number of active cases carried was as follows:

	Total Active	Number of
	Cases—May, 1945	Veterans Served
Los Angeles, FWA	410	51
Bridgeport, FS	154	7
New Orleans, FSS	283	23
Baltimore, FW & HWCAS	531	6
Baltimore, JF & CB	66	3
Boston, FS	1,281	56
Boston, JFWA		. 8
Worcester, FSO	166	6
Minneapolis, FWA	431	58
Rochester, FS	236	18
		
Total	4,076	236

Here we see that of a total of 4,076, there were 236 veterans' cases or 5.8 percent. This might not be looked upon as bad, but an impression persists in case work agencies that many of the cases coming to them comprise families who have been accustomed to coming to social agencies with their difficulties in the past. While there are some new cases, there certainly is no rush. Some case work leaders are convinced that the veterans' problems have been exaggerated.

Adapting to the New Trend

Federation and case work agency executives now must consider this situation:
(1) Many people in the community need assistance with social and personal prob-

lems; (2) social case work agencies are increasingly able to assist many such persons with their problems irrespective of their economic status; (3) while some of these people apparently do come to case work agencies with their troubles, a principal barrier in the way of many others is the stigma which attaches to so doing by reason of the charity connotation inherent in the traditions of social work; (4) one problem now faced in both planning and budgeting for case work agencies is how to overcome this barrier.

It is recognized that some of the relief function must and should continue to remain in the case work agency. In some communities it often is still the only function of the small agency. Nevertheless the day is passed when the private case work agency should be continued as primarily a relief agency or even primarily an agency to serve only the poor or the marginal income group. One indirect reason for the case work agency's inability to serve the public better during the war lay in shortage of scientifically trained personnel to do the job. This will pass and while there will not be enough trained personnel to serve everybody in the community who needs case work assistance, some ability to expand the service will undoubtedly occur.

So we return to the original question of how to plan case work services. This should be considered from the point of view of the agency and from the point of view of the Federation. The agency has a number of difficulties to overcome. It will have to be able to demonstrate far more realistically than now that the service it renders is effective beyond furnishing relief. This requires not merely interpretation but scientific demonstration and the knowledge by the community of practical results visible to the layman's eye. It will also need to be flexible in considering some of those practices which the public does not readily accept. One of these is the continued use of the Social Service Exchange for registering and clearing of cases. Economically independent people, and veterans in particular, do not relish being registered in such a manner and some agencies are, in fact questioning the practice. Too often, also, social agencies are housed in shabby quarters in the poor districts of town. To serve the general community it will be necessary to provide service in business-like, respectable, comfortable quarters. Often, also, the very name of an agency connotes philanthropy and acts as a barrier to people coming for service. Case work agencies will have to consider also the possibilities of advertising themselves commercially if they are to bring their claims of ability before the public. This undoubtedly has dangers and should be considered carefully but should not be thrown out forthwith.

The Responsibility of Federations

For the Federation a number of responsibilities are real as well. Some Federation leaders are still quite sceptical of the claims for case work. If this is true of the Federation, it is hardly to be expected that the public will accept the service.

There has been a fair demonstration in some places that within definite limitations case work services are effective for other than financial problems. If planning for case work agencies in cities is to be realistic, we must proceed from that point; else we might just as well continue in campaigns to paint case work agencies as relief agencies and thereby continue to hold back the progress of both the agency and the community for better social service. Campaigns and intepretative literature should be based upon the fact that a social case work agency is not merely a relief agency to help where the Government or others fail, but provides personal service by skilled professional people for the whole community regardless of income. Unless the case work agency is to be relegated back to relief-giving alone, the Federation must take a leading part in making it clear to the public just what the agency is and does. Federations also will find increasingly that budgeting for family agencies must include higher pay for the technicians. The Government, through the Veterans Administration, has now established \$2,600 per year as the base pay for beginning social workers dealing with veterans and this is rapidly becoming the minimum standard. To compete for competent professional workers, funds for adequate pay scales will need to be provided. Granted that in any event the work of case work agencies is quite selective, it is perhaps possible for Federations to raise the community sights and their own with regard to the utilization of case work agencies.

Up to this point we have been considering personal counseling as the focus around which the planning of case work programs should revolve. An equally important part of the work of case work agencies lies in their relationship to other functional services within the Federation as well as to non-sectarian agencies which are not within the Federation but within the general community of which it is a part.

Interrelationships Among Case Work Agencies

First is the question of interrelationships among case work agencies themselves. We have been including in the framework of case work agencies those which handle family problems, children's placement, adoption or case work needs, services to adolescents and other special case work organizations. Relations between these are not usually considered major problems. Yet in some ways it is necessary to go further than we have today. One of these ways is exemplified in the relation between the existing family agency of the community and the medical social service which is set up to serve a hospital and clinics within the Jewish Federation, or, for that matter, within the total community. At this time it is necessary for the Social Service Department of the hospital to terminate its responsibility for a family immediately after discharge of the patient from the hospital or from the care of the clinic. If recommendations made in some of the recent medical surveys are carried out, it might necessitate extension of the hospital's case work service to continuous maintenance of contact with the family at home long after

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discharge. The question of whether the existing family agency can extend its service to absorb this function depends much on its own and the hospital's practice. I think that here Federation leaders must carefully consider with the administrators of their case work agencies how these potentially overlapping services can be best co-ordinated so as to best serve the interests of the community.

A similar problem arises when we consider the care of the aged and of the chronically ill. Are the problems in these areas medical, social or a combination of both? As far as the use of case work is concerned, case work agencies, medical agencies and the Federation have a real problem here. It is simple enough to plan a program whereby Intake for an institution for the aged is lodged in a case work agency. But many administrators consider the separation of its Intake decisions from its own administrative auspices as a questionable practice. At the same time, the best work in caring for the aged is not done merely with the isolated aged person within the institution. Usually complications with relatives and with problems only indirectly related to the inmate of the institution must be faced. Federation leaders have here an example of the basic problem: admitting the need for case work within a program of care for the aged, within what framework in the Federation should such service be centered?

The Relationship of Case Work and Group Work

Another area in which planning for case work programs is not very clear is in the relationship of case work agencies to group work agencies. Settlement houses have long contended that they are neighborhood centers to which the residents of their neighborhood tend to bring their personal difficulties. It might be equally argued that "Y"s, and Community Centers, although they serve a broader geographical area, are in fact centers to which the residents of the community bring not only their wish for recreational and cultural pursuits but, if encouraged, their personal problems as well. There are already isolated instances in which case work agencies established outposts in Community Centers, especially now that service to veterans is prominent. Here again there is an effort to combine the provision of a case work skill at that point in the community where the problem is visible. Can case workers best serve in such capacities under the administration of the Center, or should the outpost remain as a branch of the central case work agency? More important, should Federations urge the extension of case work service as an integral part of their other functional services, health, care of the aged, group work, occupational adjustment, etc.?

Jewish and Non-Sectarian Services

Finally, we must give thought to the relationship of the Jewish case work agencies to the non-sectarian services in their community. This is not a severe problem where the Jewish community is very large and able to provide for the

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special services it wants. But in the small and intermediate sized Jewish communities, I do not believe we have properly faced the question: at which point is it desirable to set up Jewish case work services as against the utilization of non-sectarian services by the Jews? In a community of 1,000 Jewish residents, it hardly makes sense for a Jewish Federation to consider the establishment of a special child placing agency because a few members of the Jewish community prefer that Jewish children be handled only by a Jewish agency. But at what point is the establishment of a special Jewish agency or department within another agency justified? We have not worked very much on these questions and I submit them as basic problems to be faced in the planning of long range case work programs.

This paper has probably raised as many questions as it has attempted to answer. Long range planning by Federations for their case work services must be realistic and helpful and go beyond the thesis that continuation of case work means continuation of Federations in the relief business through these agencies. They have a broader service which can be utilized and which, once accepted and demonstrated, will inevitably improve the quality of social services available in the community. There is public benefit in this goal which not only case work agencies but fund raising agencies may render.