

The Effectiveness of Family Case Work
by
Wilfrid Michael Calnan

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THE EFFECTIVENESS OF FAMILY CASE WORK

An Evaluation of the Case Work Treatment of Family Relationships
Problems by The Family Welfare Bureau of Greater Vancouver, B.C.

by

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THE EFFECTIVENESS OF FAMILY CASE WORK

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THE S I S A B S T R A C T

THE EFFECTIVENESS OF FAMILY CASE WORK

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The purpose of this thesis is to evaluate family case work particularly as seen in the work performance of the Family Welfare Bureau of Greater Vancouver, British Columbia. The research sample comprises fifty-eight cases featured by problems in the areas of marital relationships and parent-child relationships, known to the agency during the five-year period ending April 1, 1948. Selection is exclusive of extreme examples and includes only "whole" families, that is, units in which both parents were living, although not necessarily together. Childless marriages are considered only when there are no contra-indications to fecundity. Age is a further delimiting factor in selection of these cases. The maximum ages for men being forty years, for women thirty-five years.

The total research load is subdivided into five groups, basis of grouping being the particular problem most troubling the family. Groupings are: Early Years of Marriage (Ten cases), Advanced Marital Conflict (Thirteen cases), Dissolution of Marriage (Eleven cases), Reconciliation (Ten cases), and Child Development and Parent-Child Relationships Problems (Fourteen cases).

None of the several evaluation methods examined proved suitable for the cases in this study. The criteria and method of evaluation used in the project are derived from basic case work principles and the concept of social case work as a dynamic process. For want of a better descriptive term the instrument devised is variously called the case-o-graph, case-gram and case-chart. It is a dissecting facility intended to show the dynamics of the case work process as they operate in a given situation. The activity of client, worker, agency and community are proportionately shown in this case-chart which illustrates what takes place in case work as seen in the case record. Results of case work are subjectively graded.

The case work services of the Family Welfare Bureau are assessed as generally effective. Visiting homemaker service is particularly of good quality. Difficulty in helping people with serious personality conflicts and advanced marital problems underlines the necessity for improvement of case work personnel, increased psychiatric orientation of staff, and revision of community psychiatric services. The role of the family agency in promoting family life education and in supporting all efforts for further family life in the community is emphasized by findings of the project which indicate the general need of people for better preparation for life.

CHAPTER I

SOCIAL CASE WORK AND THE FAMILY

While the strain of living during the last twenty years or so has multiplied immeasurably the incidence of personal maladjustment, it has also led to new interest in the study of human behaviour. The economist, the sociologist, the physician, the psychiatrist, the psychologist, and the social worker have all contributed to increased understanding of the growth processes of the individual.

The importance of the family in the development of the individual has been increasingly recognized. Before the advent of the "modern era" the family had a manifold function including the bestowal of status on its members, religious training, education, economic security and affection. To a great extent it has been stripped of its multiple function. Affection-giving alone has increased in importance. On the successful discharge of this role largely depends the individual's ability to face the problems of life and to associate harmoniously with his fellows.

Belief in the importance of the family is the meeting-point between the sociologist and the psychiatrist. The discoveries about human behaviour which have been advanced in the last generation, particularly by Freud, Rank, Adler, Jung and others, have

emphasized the vital role played by the family in human personal and social development. As described by the psychoanalysts, the human personality is a complex living organism that from birth to interment is influenced by, and influences, his environment including his family and those persons with whom he comes in contact during his lifetime. The body, the mind, and the emotions are seen as elements in the human organism, interacting and co-ordinating, one with another, each growing toward an accepted norm of maturity. The individual is expected to grow until he is capable of discharging the physical demands made on the adult, whether in work or play. Mental requisites parallel the physical. The psychologist has developed facilities for the measurement of intelligence which, although limited in positive usability, at least can be helpful in judging the intellectual capacity of the individual. Emotional maturity connotes the ability to accept the normal obligations of adulthood and to carry out the duties of the spouse, the parent and the citizen. It embraces the ability to accept life with its joys and its sorrows, to make decisions and to act on them, and to live in peaceful association with one's neighbors.

With the important differences for the two sexes, but profoundly for both boys and girls, the quality of the relationship with each of the parents, and the degree of acceptance and affection that the child receives from its parents, influences all later development. The successive age periods of the individual in growth from infancy to adulthood all make their contribution to the satisfactory development of the biological and other drives; in general, the attainment of the capacity to face life, to enjoy

it, and to associate freely with others.

Not only the observable factors in development are important; the subtle and hidden influences are of paramount interest. A person may never be fully aware of some of the factors affecting his conduct. Within the individual operate three forces for which must be achieved a happy equilibrium. In Freudian terminology, the id represents the natural appetites. The ego connotes the inner personal strengths that will determine the ability to control these various impulses. The super-ego is the individual's standard of behaviour, usually strongly affected by the moral code indigenous to his native culture, and serves to guide him in the control of the id by the ego. These components of the emotional element in the personality are aided or impeded in striving for a healthy balance through the influences of relationship between the child and others in his environment, especially his parents, and upon his experiences in living. Thus, failure of his parents to fulfil their roles, disturbance of the family environment by clashes between parents and other members, illness, injury, pain, poverty or ^{over}indulgence may adversely affect the growth of the individual. The natural endowments of each human being that determine the nature of his response to life situations, the particular character of the relationships in his family, and early development differentiate him from all other beings.

Psychiatry has devised methods of diagnosing the emotional ills of disturbed people and has developed treatment methods featured by the interview in which the conflicts deeply entrenched in the unconscious are brought to the surface where the patient can view them in their true perspective and be helped to undergo a re-

education of his emotions. In recent years this applied science has given increasing attention to the possibility of constructive and preventive work with the more "normal" people by boosting their strong points in order to help them become complete and contented persons.

The Social Work Profession

Social work strives to utilize the findings of these sciences by incorporating this knowledge into a set of disciplines that have for their object the furthering of the individual betterment and the promotion of sound society.

Gordon Hamilton has stated very simply the broad interests of social work: ¹

"Reduced to a simple statement this enormous area can be compassed within two major fields and two major objectives of social work, namely, economic well-being or a health and decency standard of living, and satisfying social relationships. Probably all professions would state an interest in these objectives, but there is little doubt that social work occupies a particularly inclusive position in regard to both. For the social worker the problems involved in economic well-being and social behaviour are usually interwoven. It is this essentially dualistic relationship which consistently has shaped social work and given it its distinguishable if not yet wholly distinctive pattern."

Social work has maintained "this essentially dualistic relationship" in the development of these separate but interdependent processes. Best known of these is social case work. The second development, social group work, has evolved since

1. Gordon Hamilton, Theory and Practice of Social Case Work, New York, N. Y. P. 4, 1947.

the mid-thirties. It recognizes the importance to man of his collective associations, and is directed toward the helping him to use his leisure-time advantageously in joint activity with others, so that he can accommodate himself better to the group life that is the hall-mark of modern society.

The realization that the success of these processes was limited by the restrictions of environment and the presence of major social needs led to the evolution of a third process, the aim of which is to secure modification of environmental restrictions and meeting of social needs. This is community organization which is concerned with the use of social resources, including leadership, to meet common human needs. It recognizes the importance of the inter-relationships between the various groups within a community and uses these inter-relationships to secure unified action within a community for the meeting of social needs. For example, in a community lacking proper recreation facilities a number of groups might combine for action to obtain one of school buildings for this purpose. It would be expected that recreation agencies, family and children's agencies, council of social agencies, service clubs, parent teachers associations, and other interested groups might combine their efforts in a campaign to induce the educational authorities to permit use of the school for recreational purposes.

The vehicle of community organization may be the council of social agencies, professional associations, social work conferences, indeed, any social welfare organization that can consciously act for the meeting of welfare needs. Thus, the social agency with a primary social case work or social group

work purpose, may also participate in social action to meet needs in its own particular field of interest.

"Community" is a term variously used in social work with many different meanings; a geographical area, members of a religious denomination or political party, or, simply a group of persons having a common interest.

Social Case Work.

Mary Richmond in Social Diagnosis enumerated the basic principles of social case work as follows:

1. The importance of individual differences in people;
2. The concept of case work as a democratic process, recognizing the individual rights of the client to participation and self-determination;
3. The interdependence of individuals;
4. The specific nature of the "relationship" between worker and client.

These tenets have proved of vital concern, not only in the definition of "social diagnosis" but later in the articulation of treatment. The understanding which psychiatry threw on the case work relationship was of particular moment in the development of treatment methods. All these considerations were related to the objectives of social case work, as later stated by Miss Richmond in a definition that has won unchallenged acceptance by practitioners since her time.

"Social case work consists of those processes which develop personality through adjustments consciously effected--between men and their social environment." 1

1. Mary Richmond, What Is Social Case Work. Russell Sage Foundation, New York 1922, P. 98.

The articulation of the treatment methods directed to the achievement of this goal resulted from two important events, both occurring within the last twenty years. The first was the launching of public assistance programmes in the 1930's; the second a new relationship between social case work and psychiatry in the same period.¹ The adoption of public assistance measures was related to the early concept of social case work as "social therapy".² This method was used "in situations where causation lies in the external environment"³ as for instance, loss of income through illness or unemployment. The transfer of this function to public auspices left to the voluntary agencies the opportunity to employ the second method, "psychotherapy", which "is designed to bring about some modification of behaviour and attitudes and rests on a diagnosis of the relationship between two people--the therapist, and the client who wants to be helped."⁴

This method employs the knowledge of human behaviour acquired through the discoveries of psychiatry.

"The techniques involve the development and use of the worker-client relationship, the use of ego strengths, understanding and use in appropriate ways of the unconscious motivations manifested

1. Lucille M. Austin, "Trends In Differential Treatment In Social Case Work." Journal of Social Case Work, Vol. XXIX No. 6 June 1948, P. 203.
2. Ibid P. 205
3. Idem
4. Idem

in the ego, the modification of destructive defenses and the use of environment."¹ Recently three classes of psychotherapy have been described. "Supportive" therapy² is a method of treating situations in which the ego strengths are not sufficiently strong to permit more than verbalization of emotion. The sympathetic non-judgemental attitude of the worker enables the client to express his feelings. Work to bring about environmental changes and social service may be used. The mechanism of transference in which the client acts towards the worker as to a parent or a person in authority is also used. "Intermediary" or "experiential" therapy³ is the second method, the worker consciously using the client's acceptance of him as an authority to help the client modify his attitude towards authority and thus to reconstitute his whole sense of values and his place in the social milieu. The third method "Insight Therapy"⁴ is directed to the help of the relatively strong person and is most nearly akin to psychiatry, being differentiated from it by the fact that it treats disturbances comparatively close to the consciousness that can be easily brought to the surface.

A second school of thought on the nature of social case work finds expression in the "functional approach". Its adherents,

1. Austin Op cit P. 205

2. Ibid P. 206

3. Ibid P. 207

4. Ibid P. 210

although they rely on the psychiatric base, hold that the first type, or generic case work, impinges on psychiatric practice and moves away from the social work field proper. They find that in diagnosing the whole personality, generic case workers deny the client the right of self-determination. Instead, they believe, the family case worker should accept the client as he comes to the agency and help him deal with his problems through the mobilization of his own internal strengths.

Divergent as are these two views, of recent date there have been noticeable efforts to reconcile them.¹ Despite the vast differences between the two approaches, there are wide areas of agreement and today there are signs of a professional resolution of this conflict that will in time result in new strength and sureness, making for increasingly effective use of the social case work process.

Fee Services

The influence of psychiatry in both approaches to social case work has contributed to a broadening of the clientele. As modern social case work can help those who have needs, physical, economic, or emotional, it concerns the whole community. The enlarging of the area of competence has made it possible for

1. The "functional approach" has been discussed in such articles as:

Kenneth L. M. Pray, "A Restatement of the Generic Principles of Social Case Work Practice", Journal of Social Case Work Vol. XXVIII, No.8, Oct. 1947, P.283-90;
Florence Sytz, "The Development of Methods In Social Case Work" Journal of Social Case Work Vol. XXIX, No.3, P.83-88;
Grace F. Marcus, "Family Case Work In 1948" Journal of Social Case Work Vol. XXIX No. 7, P. 261-79.

many agencies to charge fees for their services to those able to pay, thus removing the traditional stigma associated with seeking and accepting help from social workers.

Social Case Recording.

As the present study is largely based on the reading of case records some comment on the technique of social case recording is pertinent. Social case recording in the beginning was largely a tabulation of vital statistics and factual information and observation about the client's and families concerned. Generally speaking, the recording of identifying data, commonly termed "face sheet information"¹ is still important. Yet relationships have become so vital to social diagnosis and social treatment that recording of the communications between client and worker may take precedence over the tabulation of the more quantitative data, sometimes even to the exclusion of certain factual material. There may be variance between the recording criteria for social research and the recording of the social case work process. This discrepancy has made for certain difficulties in the present study.

Family Case Work.

It was natural that the family agency, established for the promotion of success for functioning of the family, should be in the fore-front of the advancement of social case work methods. Successor to the "charity organization society", it has been intimately associated with the history of efforts to improve

1. See sample face sheets used by a family agency in Appendix A.

family life, both by individual treatment and by fostering community action for the welfare of the family. Today across this continent some 200 family agencies having membership in the Family Service Association of America share the results of their efforts in developing treatment, and co-operation in the promotion of improved family living.

THE FAMILY WELFARE BUREAU
OF GREATER VANCOUVER, B.C.

Setting.

In Vancouver, B. C., a family agency has been providing case work services since February 20, 1928. It serves a community that has grown from a small city of 120,000 population in 1928 to the third largest city in the Dominion of Canada, with a population approximating 400,000; a thriving seaport, industrial and business metropolis. The Bureau serves in addition to Vancouver, three large suburban communities, with district offices in each.

Family Welfare In Canada 1928.

At the time this agency was established as the Central Welfare Bureau in 1928, the family welfare movement in Canada was represented by ten agencies, the oldest of which had been in existence since the turn of the century.¹ These agencies generally were preoccupied with the meeting of economic need. This was particularly true in Montreal and Toronto, the two largest cities in Canada.

1. G. B. Clarke, "Twenty Eighth Annual Report," Family Welfare Association of Montreal, Welfare Work in Montreal in 1928. Montreal PP. 112-118.

The statement of the object of the Family Welfare Association of Montreal reflected this primary concern:

"To relieve poverty among Protestants by securing adequate assistance; to attempt to ease it by sympathetic, trained, intelligent service and to prevent it by active, constructive work."¹

One agency in a smaller city, Hamilton, Ont., came closest to rejecting the relief giving role. Included in the statement of its purpose was stipulated.

"The non-granting of relief even of a temporary nature from subscribed funds"²

Establishing Of The Vancouver Family Agency.

Conditions in Vancouver in 1926 were particularly favourable for the inauguration of a voluntary family welfare programme. Unlike the first two cities of Canada, Vancouver had already established a relief department and did not expect its family agency to be a dispenser of financial aid. On the contrary, the events that inspired the formation of the agency concerned the immaterial needs of the community. In 1927 service clubs and public-spirited citizens saw the need for an assessment of the child welfare services in the community. The result was the financing of the British Columbia Child Welfare Survey, conducted by social work leaders from other parts of Canada. The survey revealed that child-caring workers were being hampered in the execution of their work by the fact that there was little or no effort being made to help the families of the children they were serving. The Survey stated this need thus:

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1. Clarke, Op. Cit., p. 112.
 2. "A Twentieth Milestone", Canadian Welfare Vol. XIX No. 2, p. 24 June 1943

"While the Survey has been primarily concerned with care and protection of children and hence especially with organizations formed to carry out this purpose, there is a service which is so fundamental to the carrying on of any social work with specialized groups, that some attention must be given to the facilities that exist for rendering this service. We have reference to family welfare work, family case work to use a technical term."¹

This intimate connection of family work with child welfare continued through the establishment of the Central Welfare Bureau and has remained a primary concern of the agency.

The maintenance of this relationship and the concern with children's problems has been but one side of a broad interest in treatment of problems other than financial. Evidence of this interest has been the consistent reliance on the resources of the Family Service Association of America, which it joined in the inaugural year, and certain other events in agency history such as adopting the present definitive title, Family Welfare Bureau in 1931.² Adherence to this purpose is seen in the work of the Bureau in "normal" times as well as the periods of major catastrophe.

During the depression years as governments assumed responsibility for relief, the Bureau like many other private family agencies, became free to deal with emotional and personal needs of individuals and families. The Director's annual report for 1933 described this trend as seen in those cases requiring intensive service. After pointing out that the number of personality and

1. Report, British Columbia Child Welfare Survey Committee, Vancouver, B. C. 1927, p. 41.
2. G. F. Strong, M. D. Early History of the Family Welfare Bureau. Read at the annual meeting of the Family Welfare Bureau of Greater Vancouver, April 26, 1938. 10.

behaviour problems treated in the preceding year had outnumbered the unemployment difficulties, the report explained this distribution:

"It is natural that the personality and behaviour difficulties would be most frequent in a private family agency whose purpose is to care for those families where problems other than lack of means of subsistence seem uppermost."¹

This focus of agency purpose and activity continued through the worst years of the depression. The Director's Report for 1936 defines the agency's position even more clearly than that of 1933;

"In freeing from a crushing burden of relief, this has allowed agencies under private auspices....to direct their efforts to a more comprehensive approach to family problems...Now rather than trying to develop our skill in clever questioning, we will try to see the deep emotional significance of what they tell us."²

During the Second World War this same emphasis was preserved in the agency function. The Director in giving an account of her stewardship in 1943 stated:

"We must maintain our perspective in considering the importance of the individual in the changing social scene. The war is threatening the destruction of groups and, consequently, we tend to lose ourselves as individuals in a group effort to protect what is threatened. We have tried to remember, in spite of the demands of war time conditions, that a family agency gives special attention to the preservation of those strengths and values in family life which have the greater significance for family unity and for individual growth."³

Problems of Clients

From the information available on the reasons people have

1. Family Welfare Bureau, Director's Report, Vancouver, B.C. April 27, 1933 pp. 9-10.
2. Family Welfare Bureau of Greater Vancouver, Director's Report, April 29, 1936. Vancouver, B. C. 10.
3. Family Welfare Bureau of Greater Vancouver, Director's Report, Vancouver, B. C. April 29, 1943. 7

come to the agency, it is apparent that this gospel of service in the area of personal difficulties has been lived as well as preached. As early as 1933 the greatest number of intensive service cases were characterized by problems of a personal or relationship nature,¹ such as behaviour difficulties of children, marital conflict and parent-child difficulties. The incidence of economic problems dropped from approximately 25% in 1933, to 27% in 1936, to 6% in 1948.² An upsurge in problems of this order during the War years was abnormal, attributable to the rendering of help, by agreement and contract with the Federal Government, to dependents of servicemen, requiring dependents and contingent aid. It is interesting to note that the agency was frequently able to offer help in areas additional to the specific request.

Besides service in economic and personal problems the Bureau has throughout its existence offered help in problems associated with health, both physical and mental, and with social conditions such as housing.

The Clients

The number of people bringing their difficulties to the family agency has generally increased, with some variations because of the extra work during the war years. In the first year of operation 135 families were helped, in the tenth year 1899 and in 1947-48 the first post-war year, 1935.

1. Family Welfare Bureau, Director's Report, 1933. 9-10.
2. Family Welfare Bureau of Greater Vancouver, Annual Reports 1933, 1936, 1948.

Inasmuch as the Family Welfare Bureau was established to fill such a deeply felt need in the area, and, since the philosophy that has governed it has been based on the concept of the vital role of a family agency in the life of the community, it would be interesting to know the range of people served. Unfortunately there are no statistics available to show the coverage. This can only be judged, admittedly without great accuracy, from certain facts and observations.

CHART I

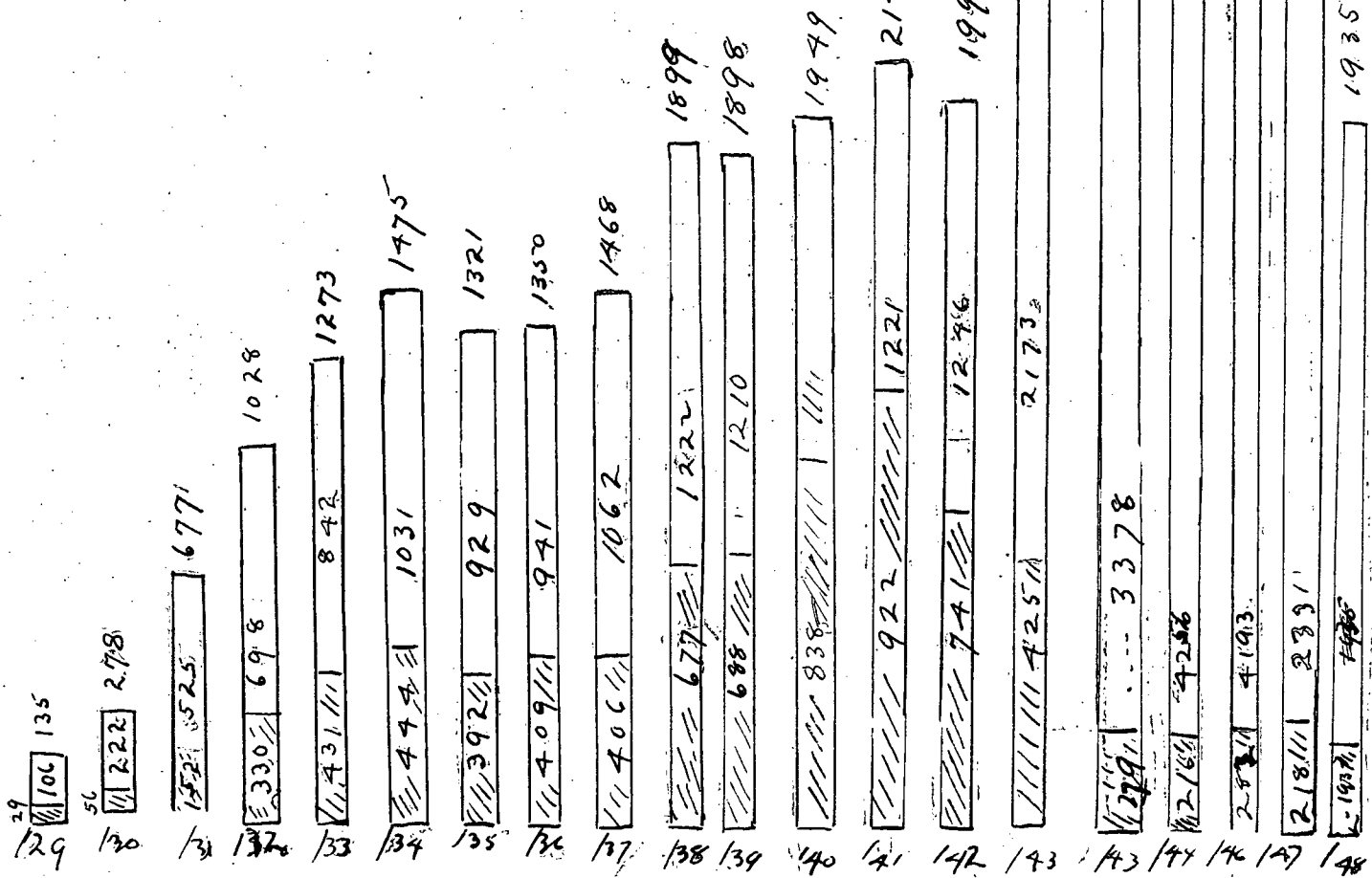
PERSONAL SERVICE AND RELIEF

1929-48 (Inclusive)

FAMILY WELFARE BUREAU OF
GREATER VANCOUVER, B. C.

Personal Service. ☐

Relief. ☒



It is significant, for instance, that throughout the years the number of relief cases has been much fewer than of the non-relief cases. (Chart I) That is not to say, however, that those who have not required financial assistance have been people whose incomes have ranged from small to large. The evidence of environmental problems would indicate that the clientele represents mostly those families in the lower-income bracket. Certainly the cases examined in the present study, which are fairly representative of the clientele, tend to support this contention. It has been observed that recently, especially since the War, people from the more privileged groups, are beginning to use the services of the agency, whereas a very few years ago they would not have considered so doing. In this connection, the increasing number of people wishing to pay for service is significant. Yet it should not be assumed that the expression of this desire is altogether the result of increased knowledge of mental hygiene and counselling services. Rather it must be borne in mind that greater employment and larger incomes make it possible for more people to consider paying for service.

Case Work Services

From the very beginning the Family Welfare Bureau of Greater Vancouver has maintained a keen interest in the advancement of social case work. Consistently the agency has tried to incorporate the best techniques of practice into its social case work services. There has been a growing awareness of the presence of the emotional problems of life and an attempt to use this new knowledge for the benefit of its clients. Treatment might be described as being at the half-way mark between environmental

methods and psychotherapy. The keen awareness of the place of the family agency in the community backed by a profound philosophy of purpose has at times given the work of the Bureau certain aspects identified with the "functional approach". Yet, primarily, the agency has based its work on the principles enunciated by the proponents of "generic case work".

To strengthen case work services the agency has developed certain specific resources. Among these is included "legal aid", that is, the securing of free legal help in appropriate cases, the counsel always being related to the principles of social case work as they are applied in such situations. A second agency facility is the supervised home maker service. This service provides substitute mothers, usually when the natural mother is away from her family because of illness; it has also been used for more constructive purposes, such as, helping a mother to learn household duties and thus relieve stress which her seeming inability in this sphere may have created. The most recently added service is the psychiatric consultation which consists of periodic review of difficult cases with psychiatrists from the provincial government services.

The case work staff has always been selected with due regard to educational qualifications and experience. The Board of Directors of the Central Welfare Bureau insisted that the director whom they would appoint must be trained, with experience. They also stipulated that all later appointees to the case work staff would have to be graduates of a school of social work.

In May 1931 the first social service diploma graduates from the University of British Columbia new social work course were

engaged. Since that time about forty diploma graduates have been on the regular staff.

The war forced a departure from the ruling that no untrained workers should be employed. In 1942 when the agency undertook special investigations for the Federal Government, "case work aides" were engaged. These and those employed in 1943, 1944 and 1945 all received some "in-service training". Currently only one worker has not a diploma and no new workers will be employed unless they have at least one year at a school of social work. As yet few graduates of two year courses have been engaged.

Since 1940, there has been always, at least one staff member with specific psychiatric training and experience.

The agency itself has been assiduous in promoting the professional development of staff. Participation in educational "institutes" and special courses has always been encouraged. Supervisors have been required to attend certain of these institutes.

The high rate of staff "turnover" which has been common to nearly all fields of social work, especially within recent years, has affected this agency as much as most others. The Bureau has been fortunate, however, in retaining a few key staff members over a fairly long period of years. This core of relatively permanent staff members has lent stability to the agency. The total number of case workers today varies from fifteen to nineteen.

Community Resources.

In addition to the Bureau, there are in Vancouver a Jewish and a Catholic family agency. Unfortunately neither has adequate staff.

Children's services include a non-sectarian and a Catholic

agency, both doing preventive work with families as well as child placement.

Group work agencies include Young Men's Christian Association, Young Women's Christian Association, several community centres, and boys' clubs.

Private health agencies include the Victorian Order of Nurses, a visiting nurses organization which provides both bedside nursing and public health nursing.

The activities of the voluntary agencies, since 1930, have been co-ordinated through a council of social agencies, and jointly financed through a community fund. Failure of Community Chest to reach its objectives in financial campaigns, especially in recent years, has resulted in limiting the work of private agencies.

There is a beginning of representation of public agencies, city and provincial, on the council. This should contribute to improved social planning.

Among the public health and welfare agencies, the city relief department of 1928 has become a public assistance department rendering categorical assistance to the needy residents exclusive of unemployed employables.

Although the Dominion Government has acknowledged responsibility for the transient and the unemployed no provision for direct relief to these groups has been made. Unemployment insurance with a limited but growing coverage, and an employment service to which is attached special training facilities for workers, are both directed toward the prevention of financial need among employable workers.

The Federal government has taken considerable responsibility

for ex-servicemen. The Social Service Section of the Department of Veterans Affairs includes three divisions. There is a referral service which directs veterans who have social and personal problems to the appropriate established social agencies. Secondly, there is a division for investigation in the matters of veteran's applications to the Government for disability compensation and various allowances. Thirdly, there is a medical and psychiatric social work division. Closely allied to these Federal services for the veteran has been the work of a private citizen's committee for veterans which until recently took the responsibility of providing emergency shelter for ex-servicemen and their families.

Community health and medical facilities include: provincial psychiatric service, tuberculosis, and venereal disease control division. These, and the general hospital have social service departments. Additional health and mental hygiene services are supplied through the city schools.

The relationship between the work of these agencies and the Family Welfare Bureau can be clearly seen in the present study.

THE OBJECTS OF THE PRESENT STUDY

The effectiveness of case work performance by the Family Welfare Bureau is the subject for enquiry in the present study. From every standpoint it is important to evaluate the results of family case work of the agency. The high purpose of the family agency will permit of nothing but the best in work performance. It is of critical importance to ascertain the capacity of the agency for promotion of successful family living, and to discover wherein it fails or may not completely succeed. Only when this

information is available can action be taken to secure a maximum of efficiency in serving the families of the community.

As the agency depends on public support it must demonstrate to the community that it merits that support. Accomplishment is the best proof of the real value of agency services.

Another major reason for evaluation of agency services and capacity is the pertinent question of the place of the agency in a community marriage and family counselling and education programme. This is a question of moment in Vancouver especially, as the auspices of such a programme has been the subject of considerable debate in this community.

The attempt to measure the effectiveness of family case work services of the Family Welfare Bureau and the capacity of the agency to provide to the community service for the advancement of family life is based on a study of fifty-eight family cases treated during the five year period ending April 30, 1948.

Chapter II deals with the review of various methods of assessing case work results which were considered in trying to find a suitable measure for examination of the cases used in this study. Chapter III presents the device of measurement actually used. Chapters IV to VIII inclusive, describe the social case work principles as applied in each of five groups into which the total number of cases was divided. Chapter IX discusses the value of the measure of effectiveness used in the study, and summarizes the effectiveness of family case work as seen in the fifty-eight cases. The capacity of the agency for both case work services to individuals and families and for community services for the general improvement of

family life is discussed. Deficiencies in the agency and in the other social agencies in the community that militate against successful family case work are also noted and recommendations for improvement of the agency and community programmes are made.

The challenge of living in the Twentieth Century has become the fascinating study of the social scientists including: the economists, the sociologists, and psychiatrists. Although the social scientists weight differently the influences of environment and psychological factors on human social development, all agree on the importance of the family life in the growth of the individual. Most of the traditional functions of the family have been reduced during the "modern era". The affection-giving role, however, has been re-emphasized and re-stated, especially by the psychiatrists under the leadership of Freud, Jung and others. The psycho-analysts have presented the new concept of the human being as a complex dynamic organism, that is affected by, and affects his environment, including particularly his family and those with whom he associates. The differences in the two sexes, especially in the successive periods of growth during childhood are seen as of vital importance in the maturation of the human being so that he can take the full measure of his responsibility as an adult with duties of citizen and parent.

Social work has striven to incorporate these discoveries into a professional practice with two major objectives, "economic well-being and satisfying social relationships". Three distinct but related processes make up the practice of social work. Social group work is directed towards the helping of the individual to

participate in the group life that characterizes modern society. Community organization concerns itself with the use of social resources including community leadership to meet common social needs.

The oldest of these three disciplines, social case work first articulated by Mary Richmond in 1917, "consists of those processes which develop personality through adjustments consciously effected between men and their environment". The four basic principles of social case work may be summarized as: individualization of human beings, the right of the individual to participate in planning for his own existence, the inter-dependence of individuals and the specific nature of the "relationship" between worker and client.

As governments have assumed increasingly responsibility for dealing with major social problems and as psychiatry has advanced its discoveries about human behaviour, social case work has moved from "social therapy" to psychotherapy. The family agency has been of prime importance in this development.

The Family Welfare Bureau of Greater Vancouver, from the beginning, has tried to keep pace with developments in social case work practice by the employment of qualified personnel available.

The purpose of the present study is to estimate the success that has attended the efforts of the agency to advance individual and family social living, to suggest improvements in agency practice and community social work facilities and to gauge the capacity of the family living in the community of which it is a part.

CHAPTER II

ATTEMPTS TO MEASURE THE EFFECTIVENESS OF FAMILY CASE WORK

The Importance Of Developing Criteria For Measurement

Determining the soundness of practice is vital to the continued improvement of family case work methods. Establishing reliable criteria for measuring the effectiveness of practice, therefore, is of critical importance. This is true now as it always has been in the history of family case work in its development from its rudimentary beginnings to its present advanced stage.

The complex problems of individual and family living in the present day and persistent demands and financial limitations in social welfare, require that all skills be employed selectively and with the greatest possible efficiency. Yet the quest for adequate means to evaluate results, far from being new, is one of the oldest concerns of family case work and has encompassed a continuous effort to adapt the scientific regimen to examination of the soundness of the process.

The difficulties involved in applying the principles of science to testing the treatment of human behaviour and social ills are obvious. The combinations and permutations of human traits make it hard to find anything resembling controlled situations. Yet, however various these compositions, there can be found certain elements common to all human beings. The accepted concepts of family life in our society, of social adjustment, and the median rates of physical growth, mental development and emotional maturation of the individual all furnish standards of a kind for the measurement of efforts dealing with human factors.

Moreover, it cannot be assumed that all subjective observation is prejudiced, particularly if that judgment is based on knowledge acquired through careful study and varied experience.

Various Methods Of Examining Performance

The professional conscience of the family case worker has frequently provoked the question, "What good has my work done?" It has been customary to seek the answer in examination of performance through such devices as "supervision," subjective observation of changed individual and family attitudes of clients, rereading of recording and estimates of success at time of terminating cases. Sometimes the worker has known the opportunity to revise this evaluation when the client or another member of his family has returned to the family agency after a period to seek new services.

Statistical Methods of Evaluation

This individual interest in evaluation has fostered and stimulated efforts by the professional body as a whole to develop sound methods of assessing the validity of family case work. The history of this development largely has been a movement from reliance on the empirical method to adoption of scientific principles.

Mary Richmond with her Social Diagnosis provided a starting point for this evaluation. Successful treatment would imply elimination or modification of the problems concerned in diagnosis. It followed that, the effectiveness of treatment would be gauged in terms, then, of the elimination or modification of problems. Two difficulties asserted themselves in the derivation of these evaluation methods. Human nature being so highly variable, modification of problems would not necessarily be permanent, and, the subtle relationships between client, worker and

community, would make it difficult to assess the role of each in meeting problems.

These factors were recognized when, in 1929, the American Association For Organizing Family Social Work, in co-operation with the Russell Sage Foundation, devised individual rating schedules for cases treated by family agencies. These schedules¹ took the form of cards on which were listed on one side, 69 problems ranging from "unemployment" to "non-citizenship," and; on the other side, 85 services which might be rendered in relation to these problems. These cards were used concurrently with the case records, the problems being checked monthly by the active worker. Examination of the problems and the services rendered would, to some degree, reveal the success with which the case had been treated, and purportedly would show the rate of progress through the reduction of problems, month by month.

Periodically, in the light of experience and newly-acquired knowledge of human dynamics this card was revised. In 1938 a new card was introduced.² This card, more systemetized than the first, grouped the problems under various headings: "Economic," "Employment," "Family Relationships," "Health" and "Social and Environmental." Recognition of the participation of the client, the family caseworker and the community was given in the breakdown of the evaluation. The various roles were taken into account in this wise:

1. Problems modified from agency standpoint;

1. Appendix B I
2. Appendix B II

2. Problems modified from client standpoint;
3. Problems unmodified because of limitation of case work resources within the agency;
4. Problems unmodified because of limitations in community resources;
5. Problems unmodified because of limitations of client's capacity.

These charts have not often been used to full advantage. General failure of family case workers to realize the value of such a rating system to them in their daily practice, and lack of leadership giving direction to profitable use of this device, probably account for this neglect. Consequently the busy worker, unless possessed of unusual statistical inclination, has been prone to consider these cards as a hindrance rather than as a help to him--a necessary evil to be dealt with hurriedly at the end of the month. Thus, the family agency would suffer from not being able to secure an adequate picture of its work because of evaluation done in haste.

It was unfortunate that the card did not find greater favour as a means of tabulating results, especially with the keen interest that developed in the techniques of recording which had as one important object the provision of opportunity to examine performance. Experimentation has continued in an effort to secure a quick method of evaluation which the family case worker could use handily.

Recently the Family Service Association of America has introduced a new rating card¹ of very simple form, divided into three parts:

1. Appendix B-III

1. Problems Given Individual Consideration;
2. Specific Lacks or Inadequacies in Community Resources Which Interfered With Service to Family or Individual;
3. Evaluation at closing.

The problems are simply divided and checked but once. Evaluation at closing is checked under one of three heads:

1. Service enabled family or individual to handle situation better;
2. Service did not enable family or individual to handle situation better;
3. Unable to evaluate.

The Evanston Study

Various family agencies have experimented with methods of evaluation, sometimes using the National Association criteria, sometimes devising their own. One early attempt to measure results was the study made in 1939 by the family agency in Evanston, Illinois.¹ Sixty "undercare" cases active for a three month period during the previous year were examined. Realistically considering their limitations, the agency instituted a simple system of assessing results, gauging success on the principle "everything operating to enable the person or family to function more effectively or to enjoy life more fully might be considered improvement".² Carefully scrutinizing each record, they noted the degree of improvement at

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1. Frances Schiffmann and Elma Olsen, A Study In Family Case Work, An Attempt To Evaluate Service. Family Welfare Association, Evanston, Illinois. (unpaged)
 2. Ibid.

closing, quantitatively as "no improvement" or "some improvement."¹ In each of these sixty cases the worker who had been active revisited the families to form a second estimate of improvement for comparison with the first. Even so simple a method of evaluation as this helped the agency to determine strengths and weaknesses of treatment methods and certain social trends that were affecting the work.

"Testing Case Work Results", St. Paul Family Service

The Evanston study bore some resemblance to the more recently publicized experiment begun in 1946 by Family Service of St. Paul, Minnesota under the leadership of its executive secretary, A. A. Heckman.² Whereas the Evanston study had depended on the method of examining case records and following up with interviews, the St. Paul agency began its study by examination of client problems and the elimination or reduction of such through case work treatment. A total of ninety-eight different³ problems (later increased to ninety-nine⁴) have been defined by the staff since 1936, ten years before the first phase of the experiment. Many of these problems resemble those listed on the first statistical card devised by the Family Service Association of America.⁵

Heckman describes these problems as being "within the area of case work treatment." He expands on this,

"A majority of these individual problems thus listed may be said to be symptomatic of social adjustment and behaviour difficulties. Some

1. Schiffmann. Op. cit.

2. A. A. Heckman and Allan Stone, "Forging New Tools." Survey Monthly, Vol. LXXXIII, No. 10, October 1947, PP. 267-270.

3. Ibid. P. 268

4. A. A. Heckman, "Measurement of the Effectiveness of Family Case Work." Paper presented at National Conference of Social Work, Atlantic City, New Jersey, April 1948. P. 3

5. Idem

represent a fact, others a situation. None of them represent a diagnosed cause of family disorganization. The phraseology of their definitions comes out of practical, everyday case work experience."¹

The ninety-nine problems are classified into seven major problem groupings:²

1. Economic
2. Employment
3. Family Relationships
4. Physical Health (Social Aspects)
5. Mental Health
6. Social and Environmental
7. Legal Problems

There have been two important observations about the incidence of these problems. It is significant that families generally have been found to be troubled by a multiplicity of problems. It has been noted, also, that of the problem grouping, Family Relationships has the highest incidence.³

In each case, under care the problems are checked at opening and closing and in March and October if it is then open. The first group of cases, totalling 672, was examined in March of 1946. This initial evaluation served as a "pilot study" affording a comparative basis for the study of 1032 cases, all those open in the first ten months of the same year.⁴

In the same way as the Evanston Agency, Heckman used qualitative

1. A. A. Heckman, Measurement of Effectiveness 4-5
2. A. A. Heckman Ibid 3
3. A. A. Heckman and Allan Stone, Case Work Problems and Agency Services, Research Department of Amherst H. Wilder Charity and Family Service. St. Paul, Minnesota, 1947.
4. Idem.

ratings as criteria of success, listing these as:

1. No improvement
2. Partial improvement
3. Definite improvement
4. No treatment attempted¹

This rating is used for the individual problems occurring in the case and for the major problem grouping in which the case falls. Several criteria are used in defining improvement. Heckman states:

"The problem may cease to exist in which case obviously there is improvement. In a majority of instances observation or testimony of the individuals most directly concerned support a judgment of growing capacity in the client to cope with problems...there are evidences of a lessening of the tensions, strains, and stresses for the individual or family."²

"No treatment attempted" refers to a problem appearing in the family among a cluster which prognosis indicates is not treatable.

Making no apology for the use of this type of evaluation, Heckman has affirmed, "We are aware that this is a subjective process. Our staff, however, is made up of professionally trained people. It seems to us reasonable to assume that professional case workers can exercise responsible judgment."³

This assumption was put to the test by a re-assignment of 100 cases to different workers for evaluation. The results were not significantly different from the first.⁴

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1. A. A. Heckman, "Measuring the Effectiveness of Family Case Work". P. 4
 2. Idem. 4
 3. Idem
 4. Idem

The St. Paul experiment as reported to date is scarcely past the initial stage. There are plans to continue the project. Data is being secured on the social and economic aspects of each case and will be related to the problems discerned. It is intended that this analysis will be correlated with case record reading which now has been started in specific groups of cases in which the periodic evaluations have indicated the need for more intensive examination to determine the results of case work treatment.¹

New York Community Service Society Project In Measuring Effects Of Case Work

Almost simultaneously with the St. Paul experiment, the Community Service Society of New York has been concerned with developing an instrument for case work evaluation. Toward the end of 1942, the Committee on the Institute of Welfare Research of Community Service Society commissioned Dr. John Dollard, "to determine and express how case work is carried on, at what cost, and with what success."²

Dr. Dollard considered "success" as the keynote of his assignment. He tried to devise an instrument that would assess the results of case work "in a quantitative score with known reliability and known validity."³

This scientific precision of terms requires some explanation. Dr. J. McVicker Hunt, who has been a central figure in this research

1. Heckman, "Measuring The Effectiveness of Family Care Work". pp. 4-7.
2. J. McV. Hunt, "Toward A Measure of Movement In Case Work", A Progress Report." Paper read at National Conference of Social Work. P. 1.
3. Ibid. P. 2.
4. Ibid.

project, has recently elucidated on these stated aims.¹ Reliability, as he describes it, connotes the approximation of results obtained from use of instruments of measurement in separate instances. If the instrument is a test, the correlation between the results of different applications should be high and ideally would be + 1.00 or perfect. The support which known criteria renders to measures indicates the validity of the instrument used.

"For a scholastic aptitude test, the ultimate criterion is school grades. In case work we might ask to what extent our measures correspond with (1) the values the clients put upon the case work received, (2) the amount of improvement in the client and/or his situation as judged by those other people whose lives are most affected by his, and (3) the degree to which the effects of case work continue to show in the adaptive efficiency of clients after their cases are closed."²

The professional ability to judge results might also be considered as a possible criterion. The Community Service Society began its study by rejecting this assumption in favour of a completely objective measure if such could be devised. Later the research workers returned to professional judgment, moved by the expensiveness of the objective measure and by results of experiment which showed that "reliability of even uncultivated case worker judgments " is high; "this reliability improves with increased professional training and experience"; and the case workers at the New York agency have a core of criteria for improvement in clients on which they all agree.³

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1. J. McV. Hunt, "Toward A Measure of Movement in Case Work" Pp 2-5
 2. Ibid p. 2. sent
 3. Ibid. P. 4.

Measuring Tension In Written Documents.

The objective measure devised by Dollard and his associate, Mowrer, is known as the Distress-Relief Quotient or DRQ.¹ The premise of their experimentation was that social case work is essentially a learning process in which the aspect of "reward" operates as a means to reduce the tension in clients. The success of treatment will be reflected in the easing of stress.² In this method the semantic values in the case record are of prime importance. The emotional colouring of the words used to describe the interaction between the worker and the client in the case work process will give to these words a positive or a negative quality, "relief" from distress, or "distress". Obviously certain words will have a "neutral" character. The total number of distress words in a single page divided by the total number of distress words and relief words would give a quotient that might represent the degree of relief from tension in the client. Division of the case record into tenths and comparison of the successive quotients throughout these units might provide some indication of the success of the case work process. The sentence and the "grammarian's thought unit", the clause, were also tried by the scorers selected to examine 59 cases. The highest inter-correlation between scores .88 occurred in the thought scoring method. The DRQ using thought scoring seemed, therefore, to be a measuring instrument of known reliability.

1. John Dollard and O. Hobert Mowrer, "A Method Of Measuring Tension In Written Documents." The Journal of Abnormal and Social Psychology. Vol. 42, No. 1, January 1947.
2. Ibid. 3

Measuring Movement In Social Case Work

Dr. Munt undertook to compare these results with those of case worker judgment. Using these same cases he sought to measure movement in these cases, that is, "the progressive improvement or deterioration in a case."¹ For each of the cases a summary was made and modified until the worker who had been active in the situation considered the summary as good as the whole record.

The summaries were examined by workers, selected at random, who were asked to rate the amount of movement indicated in them. Each summary was rated on a five step verbal scale, "none, slight, medium, considerable, and great."² For the purpose of correlating scores of different workers these ratings were then given numerical values: -2, -1, 0; +1, +2, +3, and +4.³ The scores of the workers produced a high inter-correlation. When, however, the average ratings were correlated with the DRQ changes in the record, the resulting coefficient was only .2, completely unsatisfactory.⁴

This failure to validate the DRQ led to two questions: "the reliability of case worker judgments, and the validity of the case records on which DRQ differences were based."⁵

The first question was answered through an experiment in which representative groups were formed from district secretaries of the Family Service Department, departmental workers, social

1. J. Mcvicker Munt, "Measuring the Effects of Social Case Work." Transactions. New York Academy of Sciences. Series II, Vol. 9, No. 3, Pages 78-88, January, 1947.
2. Ibid. 83
3. Ibid. 86
4. Ibid. 83
5. Ibid. 86

work students and psychology students. They were asked to estimate movement in the 38 cases. The highest inter-correlation occurred in the departmental secretaries group, the second in the workers. It seemed, therefore, that training and experience are positive factors in improving case work judgment.

There seemed to be a necessity to find more agreement among workers as to standards of judgment. A study group, therefore, reviewed criteria of evidences of movement as proposed by the fifteen case workers who had participated in this experiment. Out of this study came a scale of movement defined as:

"The change which appears in the adaptive efficiency, the disabling habits and conditions and verbalized understanding of an individual client and/or in his environmental situation between opening and closing of his case."¹

The scale was further strengthened by anchoring every other step, that is, attaching a sample case which is representative of the particular grade in the scale. Special training in the use of the scale is also being given.

The scale is being used now in an effort to find the cost of operation and its value in analyzing the effectiveness of the work being carried on by the Family Service Department of the Community Service Society.

With the reliability and validity of the Community Service methods still unproven they could not have been suitably used in this study to measure effectiveness of family case work.

One of the principal impediments to the effective application of this method, is the variation in the reliability of recording.

1. J. McVicker Hunt, "Toward a Measure of Movement In Case Work"
P. 16

Although the principles of recording have consistently received attention from family case workers, there is still no guarantee that the record will accurately portray the emotions of the client and the quality of the feelings in the relationship between worker and client. In agencies such as that engaged in this study, where very highly skilled workers are employed, this method might be reliable, but in less fortunately constituted agencies, this would not be true.

Importance of Criteria of Measurement As Articulated

The instruments for measuring affectiveness of family case work developed in the St. Paul and New York projects were not practicable in this study. The criteria for measurement in both projects, however, were of value in assessing the merits of the performance of the Vancouver Family Agency. There is an area of agreement as to criteria in the St. Paul and New York studies. Both Heckman and Dollard have emphasized the importance of client tension in considering the merit of case work performance. Heckman's definition of "improvement" as the "growing capacity in the client to deal with problems" is but a simplification of the description of movement which serves as a basis of the scale developed by Hunt and his associates.

"The change which appears in the adaptive efficiency, the disabling habits and conditions and verbalized understanding of an individual client and for his environmental situation between opening and closing of cases."

Criteria of Measurement Used By Vancouver Family Agency

Inasmuch as both standards are founded on the goals of social case work there was merit in considering their usability in this

study. The statistical methods of the agency itself were also reviewed as possible sources of criteria.

A curious set of circumstances influenced the Bureau in its development of statistical facilities. The date of founding the agency practically coincided with the development of the first statistical card by the American Association For Organizing Family Social Work. The fact that the director of the new organization was on the committee which devised this card, gave the agency a vital interest in utilizing this form and those that later replaced it.

The relatively unhurried pace of living that preceded World War II made the utilization of the card not too heavy a chore.

The Second World War, however, with its extensive demands on all social work, made it increasingly difficult for the staff member to spare time for proper use of the statistical card. Not until 1947, however, did the agency take the radical step of abandoning the use of the card for the period of the fiscal year 1947-1948.

Agency Attempts To Develop Criteria

The statistical committee of the agency, as an experimental venture during this year, developed a new system of rating problems and services rendered in relation to problems.¹ In this system the problems as discovered at intake were categorized as:

Financial

Marriage

Child-Parent Relationships

Child Care

1. Appendix C.

Illegitimacy

Health

Employment

Environmental

The Aged

Immigration and Citizenship

Legal

These classifications were appropriately subdivided. Then these problems were simply coded by using numerals for the main heads and lower case alphabet for the sub-categories. "Services Rendered" were similarly listed and coded.

The "problem at intake" would be coded at case opening. At closing the problems at intake plus all problems revealed in diagnosis and "services rendered" were tabulated. In theory the effectiveness of the practitioner's skills would be indicated in this code which would reflect the problems of clients and the services rendered in relation thereto. Similarly, a composite record code, with designations listed in all cases terminated during the year of experimentation, should indicate the scope of agency work and the general standard of performance.

This system could be used in the following manner. A situation is presented in which the behaviour of a seven-year-old child is a problem. This deviant conduct might have its origin in a relationship between a man and a woman which has been casual and never solemnized through formal marriage. The partners might each be conflicted about their marital status. One reason for the unlicensed co-habitation might stem from an unhappy home life of one of the partners which caused the emotional growth of the person

to be thwarted.

The behaviour problem would be coded as III (Child-Parent Relationship) (e) (Behaviour), the common law relationship as II (Marriage) (b) (Irregular Marital Status), and the unhappy childhood resulting in arrested emotional growth VI (Health) (d) (Emotional Instability).

Problems at intake would therefore be coded as: II b., III c., VI d.

Treatment would involve services rendered in relation to Child-Parent Relationships, Marriage, and Health. Services rendered might be listed as III (Child-Parent Relationship) (f.) (Direct Treatment of Child) (g.) (Direct Treatment of Parent), II (Marriage) (c.) (Legal Procedures Affecting Family or Personality Conflicts), VI (Health) (f.) (Helping Clients or Others in Family Recognize Need for Treatment).

Services rendered, therefore, would be coded: II c., III (f.) (8), VI (f.).

After closing, summary would appear:

PROBLEMS: II (b.), III (e.), VI (d.)

SERVICES: II (e.), III (f.) (8), VI (f.)

The comparison of problems and services would, purportedly, indicate the degree of adequacy in treatment. The summary in all cases would suggest the over-all achievement of the agency with its primary concern, family case work.

One inherent weakness of this system was that it overlooked the important fact that diagnosis may well reveal that problems presented at referral of a case are not necessarily the real problems and so this system would not unveil the true picture of

agency work. The correct appraisal of problems at closing might redeem this fault in individual case records. Yet, this redemption would be only partial as the date of uncovering the problem and therefore the length of treatment period would not be recorded. Moreover, it was impossible to bring the composite record up to date.

Because the research value was not proven, this system has been discarded and supplanted with the new case statistical card of the Family Service Association of America.

Lack of Evaluation Methods Suitable For This Study

The need for a yardstick with which to measure the effectiveness of family case work is abundantly clear. The factors of public support of family agencies, of professional devotion and the scientific character of family case work all demand that the process be tested so that it can be practiced with utmost efficiency.

This need has been recognized since the beginning days of professional practice of family case work. Early concrete recognition of this need was seen in the device of case statistical cards listing client problems and services related thereto, as developed by the Family Service Association of America. Successive revision of these cards has reflected efforts to refine evaluation techniques.

Unfortunately, in general, interest in applying social statistics and research to family case work has developed more slowly than the techniques of practice. Thus, the statistical and research facilities available to the profession of social case work have infrequently been used to advantage. An exception

has occurred in St. Paul, Minnesota, where Family Service under leadership of A. A. Heckman, over a decade, with the Family Service Association statistical card as a basis, developed 99 classifications of problems troubling families coming to the agency. Improvement of a client or family in ability to meet life, conceived of as the lessening of tension in the client, has been measured by the modification of these problems over a period of treatment. The experiment involving over 1,000 cases is still in the beginning stages. It is intended to continue the study through relating problems to social and economic data on the families and through record reading.

The Vancouver Family Agency, although from the beginning it had a vital interest in Family Association statistical facilities, did not take full advantage of them and for one year abandoned them completely, substituting its own system which did not prove satisfactory. The Bureau therefore, has no means of evaluation such as that of Heckman.

The measurement of client tension in case records is an instrument developed by the Community Service Society of New York. The reliability of the DRQ has been fairly well established but its validity was unproven when a scale of judging in case records based on professional case work experience was developed. This was true even after the soundness of case work judgment had been assured through testing of case worker's responsibility assessing the results of his performance and by defining "movement."

The St. Paul and New York projects are two of the outstanding efforts to measure effectiveness of family case work. The instru-

ments of measurement were unsuitable for use in study of the work performed by the Family Welfare Bureau of Greater Vancouver. The criteria of measurement, however, had some influence in developing criteria for the present study.

CHAPTER III

THE PRESENT STUDY AND THE EVALUATION DEVICE USED

Seeking A Method

Although none of the methods of testing family case work results which have been reviewed appeared suitable for examination of Family Welfare Bureau performance, perusal of these various means were helpful. Studying them served to re-emphasize the vitality of family case work. It was felt that if this dynamic quality could be analyzed in a representative case work record, then some estimate could be formed of the constructive values of family case work described in that record. Generic social case work principles in themselves would provide a standard of measurement. The effective application of these generic principles could be measured in terms more simple than the St. Paul and New York statements of criteria but with a like meaning, by the ability of the client and the family to meet problems and to make some adjustment to life after social case work treatment had been given. The degree of effectiveness could in elementary terms be defined as ineffective, that is, the situation deteriorating during contact; neutral, the status quo at opening being maintained; fair; the client's problems somewhat abating in course of treatment; and good, indicating the obviously superior adjustment.

The question arose as to how the dynamics of the case work could be appropriately illustrated.

An Analogy From Medicine

An analogy from the field of medicine was helpful in devising such a representation. Medicine, like social case work, treats the human being. The physical ailments may be as difficult as the

social to diagnose and, despite the specific organic functions, somatic disorders with which the physician must deal are as many as the social problems that the social case worker encounters. Yet, the physician and surgeon do have methods of checking the effectiveness of their work.

To evaluate the success of treatment the medical doctor utilizes many tools. The significance of symptomology is considered in the exercise of diagnostic skill acquired through education, training, and practice. As in family case work, the practitioner may employ the devices of consultation and conference. In addition, there are the scientific facilities of laboratory and mechanical testing. Such instruments as the spigometer and electrocardiogram may be used in the diagnosis. The final test of the success of individual medical practice is the return of the patient to health, or, at least, the alleviation of his distress. At this supposed stage of recovery or arresting of physical deterioration, practical analysis, laboratory, and mechanical testing may all again be used to verify the success of treatment.

The significance of laboratory testing and of use of such instruments as the electrocardiogram is that they measure the dynamics of organic functions, the very process of living and growing within the individual human body. These instruments can offer an immediate evidence of change.

It would seem that the idea of the cardiogram is one that could be considered by family case work. Social case work needs a device that will measure the very heartbeat of the process.

Using The Dynamic Concepts

Only this expression of the idea is new. Certain family

workers have long interested themselves in the possibility of measuring directly the dynamics of the family case work process. One device along such lines has long been favoured by both family case workers and psychiatrists. This is a simple chart which illustrates the total chronological history of the client in a summary from which is, at once, easy to read and helpful in diagnosis. It showed not only his chronological development but his life in relation to other members in his family and events affecting his family.

On this chart the successive ages of the client are placed on the "Y" axis. On the "X" axis are placed such factors as Health, Parents' Relationships, Childs Attitudes to Parents, to Siblings, Parents Attitude to Child. The virtue of this graph is that, at a glance, the worker can see the various factors operating at any given age, and inter-relationships of these factors; and so obtain some understanding of the "organ-as-a-whole" in the processes of living. Thus the causative factors of problems besetting a person aged twenty years, can be discerned in events that took place at various previous stages of his developments.

Doubtless awareness of this simple medium had some influence upon the present search for criteria. The fact that the writer was one of three social work students who tried to develop this form for use in studying children placed in foster homes had a bearing on the outcome of that seeking.

The Instrument Devised

The seeming unsuitability of other methods of evaluation for this study and the potentiality of the dynamic analysis pointed the way toward the development in family case work of a facility

comparable to the electrocardiogram in medicine. A number of records of clients having problems which might be suitable for study, therefore, were examined. It was reasoned that a family agency would be concerned with any problem affecting the satisfactory functioning of families. Then it was but a short step to analyze the component elements of the family.

The question asked, therefore, was: "What are the dynamic factors in the personalities of the individual members which go into the making of family life?" Following logically was the question: "In what way does the case worker use that knowledge gained from the social diagnosis?"

The case worker knows that to answer these queries, he must also be able to gauge the parts played by the client, and by the community, both intimately related to the worker's role and, in practice, inseparable.

These questions being answered, the next proposition was to develop a form on which to record answers. It would have to be simple to use and easy to read. The device featured on pages 50 and 51, which, for want of a better name, will be variously called case-o-graph, casegram, or case chart, was the result of these deliberations.

This graph is divided into two major parts, each represented on a single page of regular business-size paper. The left side represents the growth of the family and illustrates the inter-relatedness of the processes of development in the different members of the family. The right side denotes the function of the family case work processes in meeting the problems of the client.

Each page is divided into three corresponding parts. Section I

I	M	W	CHILDREN AND FAMILY
A. Family Background	:	:	:
B. Cultural and Social	:	:	:
C. Education	:	:	:
D. Occupation and Employment	:	:	:
E. Mobility	:	:	:
F. Health	:	:	:
G. Living Conditions	:	:	:

II - W

M

III

H. Marriage	:	:	:
I. Compatability	:	:	:
J. Health	:	:	:
K. Economics	:	:	:
L. Social Status	:	:	:
M. Living Conditions	:	:	:
N. Children	:	:	:

SERVICE	CLIENT	COMMUNITY
A:	:	:
B:	:	:
C:	:	:
D:	:	:
E:	:	:
F:	:	:
G:	:	:

W II

M

III

H:	:	:
I:	:	:
J:	:	:
K:	:	:
L:	:	:
M:	:	:
N:	:	:

portrays the individual development of the marital partners. Section II is a summary of the adjustment factors, or "personalities," of each, and is as the meeting point of the two. Section III summarizes the marital history. In Sections I and II, man, wife, children and family are represented in parallel columns.

Some of the terms used require elucidation. Under "Family background" is included any pertinent information such as family cohesiveness, education, personality and character traits, and significant death dates. Under the column "Children and Family" in the space for "Family background" are noted any significant characteristics of either marital partner. Throughout Part One this column can be similarly used.

"Cultural and Social" includes religion, nationality, ethnic factors, economic influences, ages and birthplaces. Mobility can be within the bounds of the city, the province, the country or the world. Health embraces physical, emotional and mental, and might easily be cross-referenced with Part Two. "Living Conditions" signify the type of social area and the kind of housing.

In Section Two, the comparison between personalities of man and wife and the interaction between them can be quite plainly seen. Obviously, this section is a critical one for examination of marital relationships.

Under Section Two, "Marriage" provides for the factual detail of marriage. Previous marriages of the husband or wife can be noted, as can desertions in the present marriage. It is useful under the third column to tabulate the sexes and ages of the children, thus reserving for description, factor "N" at the bottom of the page.

Compatibility, so vital in the marriage, should be linked

with factor "A" and Section Two, in the matter of client ability to form good relationships. "Parent-Child Relationships" can be entered in the third column of the space given to "Compatibility".

Health is that enjoyed by each member since marriage and by the children. Here, pregnancies, as well as injury and illness, can be shown.

Economic data include income and expenses and the class of work performed such as "supervisory", "skilled", or "unskilled". "Social Status" can be used to indicate social feelings and citizen participation.

While the parts of the right side of the case-chart correspond with those on the left, the columns are different. As this side is intended to represent what happens in family case work, it is necessary to provide for observation of the participation of the client, the family case worker, the agency and the community.

Service signifies the activity of the family case worker as the representative of the agency. Community is convenient for observation of availability and usability of social resources outside the agency. Resources are taken to include any facility of the community that can be of effective use, be it the social agency, church, school, service clubs or just plain "neighbourliness."

This three-fold division can show the actual functioning of the family case work process, with the interaction between client, and the social agency in its representative the social case worker, and the community and its resources. The examination of each role performed individually and all carried out together can point up the positive and negative factors in treatment.

Demonstration of the Use of the Case Chart

An illustration of the use of this analytical device in one of the cases studied may prove helpful in understanding it.

Mrs. Atherton went to a children's agency to seek help in coping with the exceedingly difficult behaviour of her three-year old son. Sonny was acting most destructively and, as much of his misconduct was taking place outside of the home, he was causing his parents embarrassment among the neighbours. There was no evident need for physical protection of the child. Mr. and Mrs. Atherton supposedly were happily married. Hence the referral of Mrs. Atherton to the family agency.

As the "intake" worker talked with Mrs. Atherton she learned that Sonny was constantly disobedient and that his behaviour was in sharp contrast with that of his sister, aged six years. Apparently quite intelligent, Mrs. Atherton realized that this constant disturbance was beginning to cause friction between herself and her husband. She did not so readily perceive their part in causing the problem.

Miss West, the district visitor, was able to build, although slowly, a strong case work relationship with the mother and step-by-step, helped her recognize the need for psychiatric examination of Sonny.

Upon examination of Sonny at the children's psychiatric clinic, the psychiatrist found the child so disturbed and uncontrollable, that he recommended placement in a country home. When the worker took this recommendation back to the parents, they were shocked. Both parents had fairly good backgrounds, apparently good intelligence

and a keen social sense and deep pride. Mrs. Atherton had acquired a moderate education and Mr. A., while his formal education had been limited, had improved himself through taking additional technical courses. He had acquired a good supervisory position in labour. With his wife he wished to enjoy the home which they had acquired through hard work. His interest in reading and ability to play the piano-accordion added to the pleasure of this anticipation. Now he learned that a well qualified specialist thought his home unfit for his son.

Patiently, Miss West set about helping Mr. and Mrs. A. make their home a fit one. With measured persistence she helped Mr. and Mrs. Atherton verbalize their feelings about each other and about the children. At the opportune time she interpreted to them the "oedipal complex" making a simple straight-forward explanation. Arranging to see Mr. Atherton alone, she helped him see that his excessive demands for cleanliness often resulted in his wife devoting time to the care of the house at the sacrifice of care to Sonny. He was helped to see that the father's role is more than the passive one of sitting in a chair during the evening and reading an interesting book, or relaxing before the radio. He was helped, too, to see that his wife having been the youngest in a family, with a brother sixteen years her senior, had learned to depend on older people, a lesson which she had carried into her marriage.

When Mr. Atherton began to have more understanding of himself and those close to him, and when his wife gained similar insight, matters began to improve. His wife was able to devote more time to the children and to verbalize her feelings about the little boy.

He became more active at home and more understanding of his wife's dependence on him. As Sonny's behaviour improved neighbourhood attitudes were modified, at least to the extent that one neighbour offered to arrange for Sonny to play with his son within the confines of the enclosed yard surrounding his home. When the agency terminated service at the end of seventeen months Sonny was behaving much as any other child of his age and surroundings.

Use of the Case Chart

Before utilizing the case-o-graph for the analysis of this case the closing summary and the first entry of the case were read in order to get the sense of the story. Then the face sheet¹ was scrutinized to obtain pertinent identifying information to enter on this form. Following this, the record itself was carefully read and details from it entered in the appropriate places on the casegram. The completed form is reproduced on pages 58 and 59. A description of the several parts with the relevant explanations is given below.

Background of the Clients

The man. This is almost so obvious as not to require elucidation. It may be well, however, to point out a few of the most significant data. It is seen that Mr. Atherton came of family which, in common parlance, would be called "good stock", for people of less advantaged circumstances do not study medicine in Germany as had his father. There is a certain degree of instability indicated in this family background. Factors "B" show

1. Appendix A.

that Mr. Atherton belongs to a predominant cultural group. Adherence to an orthodox religion indicates a conservative strain. Factor "E" further suggests this trait. That he is not, however, stuck in "restless stagnation" is deduced from his attempts to improve his education as recorded in "E", and "F" contains explanation enough when it is linked with "J" in section three. "G" is obviously related to "A" and holds, in part, the explanation of Mr. Atherton's love of home as indicated in "M" of section three.

The wife. These factors are even more revealing than those recorded for Mr. Atherton. The early death of the father noted in "A" and the presence of the brother sixteen years her senior, recorded in parallel, are both significant in relation to Mrs. Atherton's personality as described in Section Two and the factors of "I" given in Section Three. Similarity of racial origins of Mr. and Mrs. Atherton, differences between ages, both important factors in parsing the marital relationship, stand out clearly. The relatively high educational attainment noted in "C" provides a clue as to the intelligence of Mrs. Atherton.

Personalities of the Clients

Section Three, in a sense, pulls together the significant factors noted elsewhere and indicates in what respects the two partners can mesh their lives, in what areas they are likely to have conflict, and to what extent conflict may be healthful for them. The description contained in this division will have a strong bearing on factors of "H" and "I" in Section Three.

I	M	W	CHILDREN AND FAMILY
A. Family Background	Father studied music + medicine in Germany. no degree "Black Sheep" Died on relief.	Father died when she was 4 yrs Cohesion in family.	Brother of W. 16 yrs older. Her mother disapproved of (2) (H)
B. Cultural and Social	30 yrs. old. B. Axminster, B.C. English descent - Church of England.	25 yrs. old. B. Interior, B.C. English descent Church of England	
C. Education	Formal. Grade B Night School. refrigeration. Lumber Grading	1/2 Senior matriculation.	
D. Occupation and Employment	Assistant Foreman Construction Company.	Department Store clerk before marriage	
E. Mobility	Life in B.C.	Life in B.C.	
F. Health	Not good.	Good before marriage	
G. Living Conditions	Good	Good.	

W II made good impression. Frank and free in answering questions. Intellectually ready to improve relationship with man for good of child. (2). Sincere in wanting help + insight. Anxious child psychiatric appointment. Envyed tall girls "who made her feel inadequate." Said often felt inferior to people. Rejected child (2) + sometimes repressed death wishes. Enjoyed music and parties. Tried abortion before birth of child (2). Liked other people. Feared displeasing men.

M Tall, dark, slight, courteous, co-operative. Reserved. Lacked insight. Strong opinions. Frankly expressed. Loved children but not demonstrative. Work strain. reflected at home. Played piano. accordion. Read extensively. Habits moderate. Firm with woman. Overclean. Expected too much of woman. Difficultly in articulating.

H. Marriage	1935 small town, Montana	(1) Girl byrs. B. Vic. B.C. (2) Boy 3 yrs
I. Compatibility	seemed to be affectionate.	strain of child (2) on W blamed child (2) for quarrels effect on relationship Did will of man. loved him. but with m. W wanted by his failure to discipline children sterilization. M did not.
J. Health	Pneumonia twice. Pleurs. Subject to colds	1 and 4 pregnancies miscarried. (2) Premature Ill when tried abortion. Fed (2) on own milk using breast pump. Spina bifida. healed
K. Economic	Adequate income	own home. Debts at birth of (2)
L. Social Status	Average	Average. liked to go out. Fit well into neighborhood. Behaviour (2) caused some annoyance in neighborhood.
M. Living Conditions	Liked home life. Difficult standards	Good housekeeper. fastidious.

N. Children Clash between (1) and (2). Girl - pretty, winning manner. Neatly dressed children, well cared for. (2) Bronchial asthma at 8 months. Pneumonia 9 months. difficultly Teething. Measles, 3 yrs, 4 mos. Tonsilectomy + circumcision 3 1/2 yrs. Lively, active, talkative. Asked many questions. Friendly, disobedient, destructive, demanding. At times affectionate, thumb sucking, food fussiness, stammering. Born as a result of failure of birth control methods. No awareness of danger. Average group of intelligence. Need for father's approval.

SERVICE	CLIENT	COMMUNITY
A	Helped W. describe back. ground. Information	W. ability to see effect of family background information.
B	History from this background thus preparing for	in relation to m. and child (2)
C	diagnosis and treatment by helping client to	
D	articulate.	
E		
F		
G		

Intake worker, used telephone skillfully to get confidence of W. Dis. vis obtained social history in many interviews thus giving W. time to think about development of problem and to talk over with m. Visitor's calm acceptance of feelings about (2)

Dis. vis deference to m.
Interviewed m. at agency

H	Vis. discussed with W. her feelings for m. interpret feelings-oedipal complex	
I	Wkr. simple interpretation of family romance (A). Wkr. approved of plan and agreement to see m.	M's ability to understand this: W. ability to initiate plan. for vis to see m. To interpret co-op of m. m's capacity for understanding.
J		Psychiatric services limited. Recommendation of placement for (2), a neighbor agreed to have (2) play with son in his yard.
K		
L		
M		

N Dis. vis quickly secured details of parents' reaction to problem, and their attempt to treat it. Vis queries re affection of child and his feelings. timing of wkr. Firmness in persisting in referral to psychiatric services. Wkr. helped W. to talk over feelings about children. Interpretation of psychiatric services and report to M and W. Use of Toys. sharing responsibility with M and W. in making plans for (2). Interpretation of family romance to M and W.

Marriage and Family

Marriage. Significance of the marriage date is that it reveals that Mrs. Atherton was married very young when scarcely prepared to be a wife and mother.

The "I" factors show the subtle connection between the capacity for forming relationships, as do the "A" factors and personalities of the partners. This is marked in the instance of Mrs. Atherton who knew much love and overprotectiveness in her own family and wanted the same from her husband. The inability of Mr. Atherton to respond in these areas at time of intake can be assessed on examination of his personality as described in section two.

"J" practically tells a story in itself. A man who suffered from indifferent health would be more inclined to stay indoors than one possessed of natural vigour. The medical history of Mrs. Atherton is equally revealing. Difficulty at time of pregnancy would naturally have stimulated fears in her, and that she wished to be sterilized, as noted in compatibility, might be expected. Her attempt to give herself to the child she rejected even though she was not able to breast-feed him could well be associated with guilt feelings over rejection of the little boy. The trauma of birth which Sonny experienced would almost inevitably have been intensified by a defect which many human beings do not survive and this poor start in life could provide one reason for the later behaviour pattern. "H" further adds to possible reasons for these difficulties.

"L" factors are what might be expected from the histories of Mr. and Mrs. Atherton and the unhappy social effects of Sonny's deviant behaviour are obvious.

Family Case Work In This Situation

How effectively the three member-team, consisting of client, family case worker, and community operated, in the interests of this family, can be discerned by examination of the right hand side of the casegram. The skill of the intake worker in telephone conversation was a computable factor in gaining the confidence of Mrs. Atherton and the success of treatment might be traced back to this initial contact. As this contact developed the district worker made rich use of the personality of Mrs. Atherton as it disclosed itself through the diagnostic process. Excellent use was made of the history-taking for the psychiatric clinic, this being considered as a diagnostic tool rather than a routine procedure. Through the carefully-timed history-taking the worker was able to help Mrs. Atherton express her hostility toward Sonny, and this emotion having been verbalized, Mrs. Atherton was helped to enquire into the basis of this feeling to the extent that she could develop insight. Thus, gradually the real causation of Sonny's behaviour was bared to Mrs. Atherton.

Nor was Miss West insensitive to the vital role of Mr. Atherton in the function of the family relationship. Again the worker employed "timing" as an aspect of "differential diagnosis" (Section Two) in arranging to see Mr. Atherton and then granted him the deference which he would consider his due as head of the family.

Although Miss West obtained from Mrs. Atherton quite early the facts previously cited as contributing to Sonny's aberrant conduct in taking the social history, she went no further than to help Mrs. A. to verbalize her feelings about Sonny. She helped

the parents prepare for the actual event of the psychiatric examination of Sonny and saved most of her observations until after she received the recommendations of the psychiatrist as noted in section three.

Community. Despite the comparatively small degree of help she received from this quarter, she was able to turn it to good account, because of her understanding of the personalities of Mr. and Mrs. Atherton as transcribed to Section Two on the left side of the case-o-graph. Knowledge of the backgrounds of the parents, especially as noted in A, D, E, and G, the significance of which has been previously discussed in analysis of the marriage, also helped the worker in carrying out treatment. All these factors were mustered in the stimulation of the Athertons to find some alternative to placement of Sonny. Then Miss West showed her real mettle. She selected the material from the backgrounds, especially the family life of Mrs. Atherton as noted in A in the left side. Through her knowledge of the personalities of the Athertons as recorded in Section Two, and their feelings about each other expressed in "I", she gauged the ability of the principals to accept interpretation. Her explanation of the oedipal complex noted under service A,B,C,D,E,I, and H, "Service" and "Client" is one result. Similarly, she helped Mr. Atherton to understand the basis of his desire for cleanliness and the effect of this trait on his wife. This also, can be discerned in the parts of the operation side of the case chart.

The part which the neighbour played is shown under "Community". The case-o-graph indicates, not only that the treatment was successful, but the measure of contribution from each team member. It has

been seen that the family case workers employed a cluster of finely developed techniques. These included: observation, sensitiveness to client feeling, practiced use of the telephone, use of community resources, and ingenuity in converting the rather negative recommendations of the psychiatric clinic to positive value in her treatment. But that she could apply these skills was, in no small measure, due to the potential for growth in the Athertons. Neighbourliness as a community resource stands out in all its lay brightness as opposed to the relative professional inadequacy of the psychiatric services.

The Merit of This Device

There is no pretence that this analytical device is a revolutionary discovery in the field of case work evaluation. Rather its merit can be proven only by controlled experimental use in many case records and it will be subject to modification in much the same way as are mental tests in the field of psychometrics.

Use of This Device In This Study

The case chart was helpful in analyzing the family case work performed in the cases selected for this study.

In the initial attempt to test effectiveness of family case work with the aid of the case-o-graph, it seemed advisable to select cases that would approximate the "normal" family. Cases were chosen which presented problems of family relationships, the most common assignment of the family agency.

The families were limited by age and in composition. Only families were chosen in which the age of the father did not exceed 40 years, and, of the mother, 35 years. Childless marriages were selected only when there were no contra-indications to fecundity.

Some question might be raised as to why barren marriages could not be considered if there were possibilities that the partners might adopt children. It was felt, however, that the question of adoption is too large to be included, in any of its aspects, in a study such as this.

"Whole" families only were selected, that is, those in which both partners were alive, although some were separated. Situations in which extremes such as "murder" or "suicide" occurred were ruled out in an effort to secure a more normal case load.

Fifty-eight cases were selected for study. These were chosen as most suitable for analysis after reading of over two hundred cases active within the five fiscal years including 1947-1948. They were divided into two groups: "Marital Relationship Problems"; and "Problems of Child Development" and "Parent-Child Relationships", there being forty-four in the first group and fourteen in the second. This proportion, it was thought, would compare favourably with that in the regular case load of a typical family agency.

The larger of the groups fell into a number of sub-classifications. These included: "The Early Years Of Marriage" (ten cases), "Advanced Marital Conflict" (fourteen cases), "Separation" (eleven cases), "Reconciliation" (nine cases). "Early Marriages" include families in which the age of the marriage did not exceed five years. "Advanced Marital Conflict" included marriages generally featuring the rather tempestuous union that persists in spite of, or, perhaps, because of violent conflict. "Separation" designates marriage in which there is separation of any kind from the informal break-up to divorce. For lack of a better descriptive term "Reconciliation" is loosely used. While in this category there were some genuine

cases of reconciliation, in most the feature was a tendency to step out of the marriage and then, for some reason, to return at least to the semblance of marriage.

Mere recital of these classifications might give the impression that marriages in this study were rigidly identified in categories. Such an impression would be false, for there was no wish to flaunt the popular prejudice against grouping of cases, or to disregard the basic principle of the individuality of the human being. The study accepts without question the heterogeneity of any group of families. Actually the groupings are derived from factual occurrences in the marriages. Marriages are not considered in types. But specific problems are common to certain marriages. On this basis some marriages could be discussed under more than one group heading. Thus it will be seen that problems connected with child raising will not be discussed in just the chapter set aside for this consideration but will enter into study of other groupings as for instance, "Advanced Marital Conflict".

The various methods of testing family case work results proving unsuitable for use in the present study, there was no alternative but to develop an instrument that could be used. The need for a facility to analyze the case record and show the actual functioning of family case work was strongly felt. The device variously termed case-o-graph, casegram, and case-chart, was developed in an attempt to answer this need. This tool permitted of a

graphic presentation of the family case work processes as it took place in actual cases, and showed the individual and co-operative efforts of the three-members of the "case work team" including client, worker, and community.

How this case chart might be used has been demonstrated using the Atherton case, one in which a three-year-old boy was displaying aberrant behaviour. The device was employed in the fifty-eight Family Welfare Bureau cases to be considered in this project. These cases presented family relationship problems. They were divided into categories for convenience, not with the thought of rigidly classifying them.

CHAPTER IV

THE EARLY YEARS OF MARRIAGE

The Early Marriage

Fable has it that the beginning years of marriage are "golden", beautiful in the richness of the experience they offer to the "well-matched" couple, and filled with promise for the future. Although the tradition of the "romantic" marriage dies hard, there is a popular feeling that early marriage is a serious affair, stripped of its ideal loveliness by the prospect of meeting the realities of a world which at once offers the benefits of invention and the threat of scientifically-produced devastation. Probably there are elements of truth in both concepts. For life is a mysterious admixture of the good and the bad, of beauty and ugliness, of happiness and tragedy; and life originates in the family.

The questions that come to mind are: How do these forces operate in the family? Can early marriages be strengthened in such a way as to prevent the development of major difficulties later?

And can observation of these forces operating in early marriage contribute anything to understanding the marriages that have entered advanced stages of conflict?

Range of Examples

The ten cases studied in this chapter will suggest answers to these questions. They illustrate what can and does happen to people who bring the problems of early married life to a family agency.

Mr. A. while serving overseas married a young woman whose first marriage had ended in divorce. This marriage bore all the marks of a sound relationship. Mr. A. accepted the son of Mrs. A. by her first marriage. While the As' were still in England, a child was born of the second union. After returning to civilian life in Canada he and his war bride set about building a home. They had been married almost three years when they came to the Family Welfare Bureau. They needed household help while Mrs. A. entered hospital for her third confinement. The marriage was strong enough to bear the strain which financing a home and the birth of another child produced.

At the opposite extreme were the Js'. After discharge from active service, Mr. J. was unable to find suitable housing for his family. Mrs. J. tiring of this handicap, left Mr. J. to take up residence with a man who had good accommodation.

Between these two extremes were marriages of various strengths. Like the As', Mr. and Mrs. B. had a firm marital relationship when Mr. B. suffered post partum difficulties; Mr. B. tenderly affectionate and very protective of her, jeopardized the family economy by absenting himself from his work at the shipyards to look after her and the three small children.

Mr. C. a young army veteran had difficulties in securing housing and employment. His concern over the welfare of Mrs. C. and their infant son aroused strong native feelings of hostility in him. More lethargic was Mr. D who, with sub-normal intelligence, was not able adequately to support his English War Bride and child.

Mrs. E. was baffled by the conduct of her husband, an ex-serviceman who, apparently still stunned by the violence of battle;

was unable to accept responsibility and tended to withdraw from all social contact. The Fs' two young people who had known each other well before Mr. F. went overseas fled in bewilderment from their small interior British Columbia town to the big city, there to hide the disgrace of their forced marriage. They soon found that change of environment could not salve the irritation from their own consciences.

Irresponsible tendencies of Mr. G. seemed to have increased during active service. His reckless spending became an enervating threat to his young wife when she found herself pregnant shortly after marriage.

The Is' finding themselves unequal to the responsibility of caring for two children, one in his second year, the other a few days old, were quarrelling and seeking placement for their children. Mrs. H. was another parent seemingly unable to face the prospect of caring for a second expected child. Her fears intensified by Mr. H's inconsiderate attitude toward her.

Personal Backgrounds Of The Marriage Partners

In appearance these ten couples were like any cross-section of society. They were short, tall, thin, stout, dark, fair, frail, strong, handsome, and plain-looking. Some were neat and well-dressed; others unkempt and poorly attired. Some had brusque manners; others were shy and diffident.

Age

One factor common to these families was the relative youthfulness of the partners. In six out of the seven cases, in which ages were recorded both partners were in their twenties. Mrs. G., the

youngest of the wives, was 21 years; Mrs. A., the oldest thirty-two. Mr. G. the youngest man, was twenty-two; Mr. A., the eldest thirty-nine. Two of the women were older than their husbands but, each of them, by only a year. The seven years difference in the ages of Mr. and Mrs. A. was the greatest for any couple.

In those families whose ages were not recorded other physical factors suggested age range comparable to the recorded cases.

Most of these people fell in the age group, 20 to 30 years. It might be expected that most were sufficiently youthful to be flexible in meeting the problems of life and marriage, to make some personal adjustment in their situations. The relative youth and the closeness in age of partners should have constituted positive elements in these marriages.

Education

The intellectual capacity for meeting problems in the marriage could not be judged from educational achievement. This factor was infrequently recorded. In only one case was the education of both husband and wife ascertained. In two others this was recorded for the men. Mr. F. with senior matriculation standing, had the highest known qualification.

Occupation And Employment

Like education, work has significant meaning in the lives of people. Choice of occupation and vocational achievement are important in the understanding of the individual in his reaction to the problems of existence and suggest his capacity to adjust to life. Currently there is increasing recognition of the vast influences "occupational pressures" exert on the personality. The economic and emotional security represented in employment,

the work history of the individual, the social aspects of labouring with, or, isolated from, others, each have a bearing on the personality of the worker and his ability to function as a responsible member of society. It would be expected, therefore, that in these ten examples there might be occupational and employment difficulties affecting adversely the family relationships, and some positive factors contributing to the happiness of the family.

Examination of the case records of these families reveals a fairly comprehensive range of occupations and a varied assortment of employment factors. Occupation was recorded for all the men and four of the wives. Five of the men claimed "skilled" occupations and one was learning a "skilled" trade. Four were "semi-skilled" and one was an "unskilled labourer". The construction trades were most widely represented. There were, also: clerical workers, a jeweler, and a shipyard worker, and an apprentice.

At least three men had worked in two occupations. Seven men were employed in their stated occupations. Two others were without employment. Both of these and Mr. I., a construction worker employed out of his trade, had economic difficulties, which apparently originated in work problems. Personality difficulties which Mr. I. was exhibiting seemed to have been brought out through his employment problem. Mr. D., assessed as dull normal in respect of general intelligence, was unable to perform any work other than unskilled labour, and the fact that he had tried to operate a businesses of his own led to financial difficulty which added to a marital strain.

The female occupations included hairdresser, furrier's

helper, and box maker. Of the four women for whom an occupation was listed, two after marrying, confined themselves to the duties of housewife, one worked occasionally and one later took steady employment. Significantly, it was Mr. I. who worked occasionally. Mrs. D. took employment when economic and marital strain reached their peaks. Later, when Mrs. D. realized the inadequacy of her husband, she accepted her plight and tried to mitigate it by herself working steadily.

Armed Service Considered As Employment

As the time spent on active service represents a period out of the normal span of work life of the uniformed civilian, it should be considered in relation to employment. Eight of these men were war veterans, six with service overseas or at sea. In addition, one, Mr. I. had served in the merchant marine. One war bride had been in a British women's auxiliary service. At least six of the veterans had problems connected with armed service. For example, it was the habits of drinking and spending freely which Mr. G. had developed while in service, that presented a threat to his marriage and made it difficult for his wife to use advantageously the agency budgeting service. Mr. D. the dull-minded labourer had run into financial difficulty because he had invested "re-establishment credit," his reward for service, in a business venture, which he was mentally incapable of handling. Both unemployed men were veterans having difficulty to adjust to civilian life after discharge from service. One of them Mr. E. was displaying a tendency to withdraw from all social activity. His abnormal reticence made him seem almost "psychotic." Fortunately, the family case worker, by patient attempts to understand him and to help him verbalize, and by getting information about him

from the wife discovered the fallacy of this observation. Disclosures about his service suggested that he probably suffered from the effects of extreme violence in battle. The "battle fatigue" so acquired at least practically accounted for his inertia. So complete was this "withdrawal" that he tended even to retire from the marriage which previously had been happy.

Health

Health factors are as important as the other personal attributes in the individual's adjustment to life. The course of human existence is affected by any deviation from normal health, be it simple fatigue or major illness.

This factor is particularly significant in this range of cases as the incidence of serious health problems seems abnormally high in a group so youthful. In every family there was some physical health need. The fact that in two of these the need was connected with normal pregnancy to a degree relieves the darkness of the picture. In four of the families both husband and wife had a physical health problem. Five husbands had such a concern, eight women.

The ailments of the men included chest condition, anaemia, duodenal ulcer, listlessness apparently associated with battle experience, and a skin condition resulting from a war wound. The anaemia was very serious occurring in Mr. D. who was already handicapped by his mental disability. The necessity of hospitalization on this account further complicated his situation. Even with hospital allowances there was an interruption of income pending remittance of this benefit. Mr. I. suffered from a chest condition which seemed to have an emotional component, that contributed to

the instability of his marriage. Nor did the post-partum difficulties of his wife improve their relationship.

Mr. B. one of the unemployed veterans complained of duodenal ulcers a condition which seemed closely related to emotional difficulties which took the form of acute anxiety about his employment and inadequate housing. His expression of hostility to the intake worker was the most violent ever witnessed at the agency.

On the other hand, Mr. A., the veteran who had developed a severe dermatitis through battle wound, appeared to pay no heed to his condition.

Five of the wives were expectant during the period of agency contact. One of these pregnancies was abnormal. Another wife had suffered a miscarriage previously but was able to carry a second pregnancy to full term and normal delivery. Mrs. A. who might have found pregnancy normal suffered from physical debilitation after a number of years living in England on a war-time diet.

Three of the other women suffered from after-effects of child bearing.

The positive effects of good health showed themselves plainly in the marriage relationships. Mrs. D. enjoyed robust health which may account, in part, for her ability to take hold of her difficult situation.

With the array of health problems occurring in this group it might well be expected that services rendered would be heavily concentrated in this area.

The emotional and mental health problems have been continuously mentioned in discussion of physical health. The relationship between the emotional problems and health is quite plainly to be seen. It

is well to remark, though, that some of the physically well, suffered emotional disturbances which intensified their problem situations. Mrs. D., although strong and capable, found unusual difficulty in adjusting to Canada whence she had come as an English war bride. Indeed, it was because of this difficulty that she first came to know the family agency.

Mobility

Often mobility is spoken of as though it were a primary trait of the individual with a personality problem and it receives conspicuous mention in discussion of marital difficulties. It does not, however, seem to have been a computable factor in the problems presented by the families. Aside from overseas service of the veterans and transport to Canada of the war brides, it scarcely enters the picture. Two couples had originally come from Prairie centres but there seemed to be no major problems consequent on this move. The significance of the removal from interior British Columbia to Vancouver has already been noted. The one other situation in which mobility had been important was that of Mr. B. who left Ontario due to the jealousy of his mother which threatened the happiness of the marriage as she expressed it in active dislike of his wife.

Family Background

A primary consideration in diagnosing an individual problem is the discovery of the significant facts of the family from which the person originates. The family case worker is patently aware of the importance of family background. It should be possible, therefore, in reviewing these ten marriages, to see circumstances in family backgrounds that furnish, at least in part, explanation of the manner in which these marriages functioned. Quite surprising,

then, is the fact that these records contained relatively meagre information of this subject.

For two cases, no family background data was recorded, and in two others nothing was learned about the man's family life. Yet in every case where this information was secured, however incompletely, it was helpful in diagnosis of the situation. Thus, as in the case of the labourer and his English war bride, the worker secured data which would help in treatment, or which would show that the situation would be hardly treatable. The worker who saw Mr. D. the labourer knew of the man's unstable life, that as a child, he had become known to a children's agency because of his need of protection. This information and the knowledge that his parents had lived in common-law relationship, that his mother had an unenviable record as a responsible human being, and that he himself was not blessed with adequate intelligence--all led to one conclusion. He had no super-ego to guide him. Perspicacity of the worker in realizing, on the other hand, that Mrs. D. had been brought up by a mother, who, although widowed, was capable of discharging her maternal duties, gave a clue to the possible strength in this new marriage. It followed logically that the worker, if competent, could be of help to the family by lending support to the wife in the decision to assume major responsibility for family management.

Similarly in the family backgrounds of the Fs' the young couple who left interior British Columbia to come to the coast for birth of their baby, there were unusual strengths, which helped them in the resolution of their problem. Both partners had come of "good stock". Mr. F. originated from a family group that was known for its civic leadership. One of his relatives had been the

principal elected official in his home community. He himself was very conscious of his social status, saying in one interview, "We're nice people". These circumstances, together with the good intelligence of the couple, were utilized by the staff member who worked with them, to help effect a happy conclusion to a very miserable problem.

Mr. B. was almost too well aware of his wife's background. He was excessively protective of Mrs. B., knowing that her mother had died when she was a child. The father had predeceased the mother, leaving the child to none too merciful relatives. When Mr. B's fears regarding the well-being of his wife, ill with post-partum disorders, kept him away from the job, it threatened the economic basis of the family. The district visitor took into account all these factors as she helped relieve the stress by skilful installation of a visiting home maker, thus freeing the husband for return to his work.

In the situation of the Hs' which was featured by marital disharmony that expressed itself in occasional violence, it was possible to trace the conflict to unpleasant circumstances in the family backgrounds of both partners. The mother of Mr. H. had been the dominating figure in his environment. A cold person, possessed of a religious fanaticism, she created a home atmosphere which left her son badly conflicted as to his relationships with the opposite sex and as to his role as a father. Mrs. H. came from an equally bad situation. Her father and mother quarrelled incessantly. Apparently shiftless, her father seldom concerned himself about the necessity of adequately supporting his large family. Yet, despite these unhappy omens, the worker was able to distinguish enough

positive elements in the situation to help these two people effect an adjustment.

Mr. I. and his wife were less fortunate than the Hs'. They seemed never to have overcome the disabilities of their childhoods. When ten years of age, Mr. H. had been committed to care of a children's agency.

Curiously, two of the quite effective uses of case work were with the couples for whom no family background was recorded. Nothing was known of the family history of the Cs', the young people for whom budgetary service was provided. This service did prove valuable in alleviating the immediate problem. The deeper problem of the incipient marital conflict, however, was scarcely touched. Had the worker been able to help Mrs. G. discuss her family background it might have been possible to have used this verbalization in relating it to the more serious problem of easing the marital strain.

The other situation for which no family data was secured was that of the As', two relatively mature people, for whom provision of home maker service in a time of crisis served to strengthen their solid relationship. This being so, for purpose of meeting their need securing this data was not necessary and would have been extraneous to the case work treatment.

Cultural And Social Factors

Cultural heritage has an important influence on the life of the individual. In this group there was a marked homogeneity in respect to nationality and ethnic groups.

With the exception of one Ukrainian man all were of British racial origin. All clients but two English War Brides were

Canadian-born.

These families were predominately urban-bred. Only one couple had grown up in a rural setting. Two men and two women grew up in small communities.

There was insufficient specific information recorded, to determine the economic status of this clientele. Most couples seemed to have originated in the low and middle income groups. The dearth of this type of information is regrettable for, whenever available, it invariably had a bearing on the problems presented by the client. The significance of Mrs. A's deprived childhood has been noted. Mr. I. and his wife both had lacked economic advantages in childhood. Mr. and Mrs. D. had a similar history. They had in common the fact that their parents had raised families with the support of government allowances. Mr. D's mother had received Mother's Allowance; Mrs. D's mother had received a British Navy widow's pension.

No specific, and little general information was secured about the actual living conditions, such as housing, to which these people had been accustomed in childhood. While the case workers competently exercised their skill, sometimes with notable effectiveness in these situations, it might be well questioned if learning more details here as of all background material would not have added to the soundness of the work.

Religion

Usually religion is an important element in the cultural heritage of people. Yet in this group of families it had little place. Few clients adhered to a formal religion. At moderate extremes were the men who admitted being "non-practicing Greek Catholic" and the couple who described themselves as "cynics."

The remainder classified themselves as Protestant. Only one couple specified an affiliation, the Church of England.

Marriage And The Family

The relationship between the factors recorded in Sections One, Two, and Three of the case-chart was brought out in the illustration drawn in Chapter III. Lack of background in some of these ten cases make it more difficult to see plainly the same relationship. Where there is some background, the relationship is usually quite apparent. The family histories are reflected in the marriages of these twenty people in such matters as: preparation for marriage, compatibility, economic, social and living conditions and the rearing of children.

Circumstances of The Marriages

Length of the marriages before clients come to the agency varied from the three months the Gs' had been wed, to the ten years the Bs' had been together.

The marriages have in common that most of them were performed in Canada, there is mention in only two records of the much more important matter of courtship. One of these courtships that of the Ds' who got along so poorly together was of only one week duration. In contrast, is the record of the Fs' whose marriage was forced and who "ran away" to Vancouver. Their long pre-marital acquaintance, it is clear from the record, had nurtured in them a sincere mutual affection which was a strength they could use in overcoming their crisis. While this couple were able to resolve their guilt over their action, the Hs', the other couple who had entered a "forced marriage", experienced more difficulty in adjusting to marriage. Unlike the F family, backgrounds of both the Js'

were known. Thus before failure to ready themselves specifically for marriage, had been failure to prepare generally for life experience.

Compatibility

There were only two marriages in which the relationships definitely were not good. The plight of the Is' has been described. The other situation featured Mr. J. who had become "fed-up", allegedly because of housing conditions, and formed a misalliance, despite the fact that the husband still protested his love for her. That the relationship between the Hs' was tenuous, has already been seen. One couple, the Es', were separated at the time they came to the agency, but this proved to be the result of economic circumstances and a personality difficulty (withdrawal) rather than real incompatibility.

Economic, Social and Living Conditions

Environmental conditions had a noticeable effect on the quality of relationship between man and wife. Economic conditions generally were not very good. Financial set-ups ranged from the two families without income due to unemployment up to Mr. A. who was earning a fair salary, yet because he was purchasing a home, was barely meeting expenses. Mr. H., one man who was earning a good salary, about \$200 a month, made matters difficult for himself and his wife, by doling out money to her very parsimoniously.

The high incidences of health problems did not improve the finances of these families.

Housing conditions generally were poor. Accommodations included suites in tenements and rooming houses, single rooms, hotel rooms, an old store, and the citizens' veteran's hostel. In

at least three instances housing deficiencies added to the gravity of the problems. The young man who was so hostile to the intake worker was housing his family in garret-like rooms. So confining were these that they accentuated his tenseness, and made for difficulties between himself and his wife. The converted store was a constant source of contention between the man and wife who had both known such unhappy childhoods. Similarly in the J family in which the wife went off with another man, both partners blamed the fact that they could find no place to live except the veterans' hostel, though actually both suffered from deepseated personality difficulties.

Children.

Eight of the couples were parents, two expectant. Children's ages ranged from a few days to nine years. The greatest number of children in one family was three. Most of the children seemed happy. That three sets of parents asked for placement might seem to have boded ill for their future. In two of these situations, however, the case worker was able to help the parents through verbalization of their feelings of rejection to modify their attitudes toward their children sufficiently to retain them at home. There was a high incidence of infant sickness, but only one child had suffered serious illness, from which apparently he fully recovered.

Problems And Results Of Treatment.

The scope of the problems encountered in these families has been revealed in the preceding discussion. Problems relating to health occurred most frequently. Economic difficulties ranked high. Clearly, the housing shortage had a visible effect on this

group. Factors of incompatibility disported themselves freely in only three cases although other unfavourable influences almost consistently weakened the relationships.

The multiple character of problems was a prominent feature. At the time of referral the kind or number of problems was not always evident and whereas a family might be referred for help with a specific problem usually there were others to be treated. Indeed, troubles did not come singly in any situation.

To illustrate the multiplicity of problems discovered after referral to the agency the case of Mr. E., the hostile veteran can be cited. He came for help with a financial difficulty. Actually his problems included, personality difficulty, need for recreation for both his wife and himself, housing inadequacy, and unemployment. Mental health needs such as acquaintance with his situation revealed, appear typically to be hidden at time of referral and uncovered only in the course of diagnosis and treatment.

In only one situation, that of the Js¹, was no satisfactory solution reached; at the other extreme case work with the A family seemed almost completely effective. The remainder ranged between these poles though, in general, the case work done with them could be counted as quite effective.

Treatment

The average period the cases were active with the agency was 130 days, or about four and one-third months. Some had more than one contact and one had four separate periods of activity.

The Client

Examination of these cases shows the importance of client-

participation in treatment. In the situation which was not satisfactorily resolved, the wife exhibited absolutely no desire to change her ways. Mrs. J. refused even to discuss the differences with her husband. Her strong negative attitude which she "acted out" in socially unacceptable behaviour would probably have made it impossible for her to enter a case work relationship, even if the staff member had been able to arrange a regular series of interviews.

The worker who tried to help the Ds', put forward strenuous effort. Yet, without the strengths which this worker found in Mr. D. and without the support of those strengths to enable the woman to take action the situation would have worsened. Likewise the Fs' found an extremely happy solution to their problem because of their high capabilities and the willingness of the man's family to accept the results of the mistake which the young people had made.

In every case in which movement took place the clients had the ability to participate in action directed to a solution of their problems.

The Worker

Analysis of these records also shows the importance of the case worker's skills. The understanding of the worker who helped Mr. D. and his wife and the extensive effort she put into helping them attack their problem has already been cited. In nearly every one of these cases the family case worker invested effort equal to this, if not surpassing it. The important feature of the case worker activity in nearly every example was the deftness with which the practitioner exercised his professional techniques. Consistently there was regard for the individual as possessing volition that

would, within limitations help him to choose his own line of action. There was control of the desire to help with careful timing as to steps to be taken in treatment.

Use of the visiting home maker service was particularly skillful. The best example of this was the worker who visited Mrs. A in answer to a request for assistance on the occasion of her third confinement. It might appear simply that housekeeping service was recommended since the family could not afford to hire ordinary help. Careful scrutiny of the record, however, showed how she carried through this piece of work very carefully, step by step and though several visits the service was provided. Mr. A had quite a good job. Yet, as he was burdened with the purchase of his home, it was doubtful that he could afford to hire regular help. In talking with the As' the worker learned of the wife's unhappy marriage. Although little could be learned from Mrs. A about her earlier marriage, it was perceived that eventually it had broken through financial difficulties that touched off the marital conflict.

The worker through several interviews carefully helped the As' to establish eligibility for home maker service. The recurrence of financial difficulty which might have resembled ugly elements of the first marriage as thus avoided.

An unusual display of skill was given by the staff member who was assigned to the Hs'. Mrs. H requested placement of an expected child, her third, as marital relations were so strained between herself and her husband. Yet, she was unwilling that the worker should interview Mr. H. Excepting this limitation, the worker arranged to visit Mrs. H. once a week regularly. Helping Mrs. H. to discuss her life history and her marriage and to express her feelings in these

areas, brought her to the point of accepting Mr. H. with his faults and enabled her better to understand her marital relationship.

Sometimes workers could meet only the immediate needs. Thus it was possible to help the Gs' with their budgetary problems. Assistance with this practical difficulty, doubtless, at least eased the pressure of the incipient marital difficulty.

The Community.

The resources of the community for this set of families proved fairly adequate. Both social agencies and unorganized resources were successfully used. Interesting to note is that in two situations neighbours contributed help to clients to an extent far beyond the concept of friendliness generally associated with urban living.

Failure of community resources, on the other hand was very apparent in one situation. Mr. C., the hostile young man previously described, reached the height of his emotion only late in the afternoon after he had been buffeted about by two social agencies. Both of these agencies failed miserably to give him any assistance or encouragement. Had it not been for them, he might not have advanced to the point where he could give vent to his feelings. On the other hand, an easier routing to the agency might have enabled him to participate a case work relationship in which he would later have been secure enough to express hostility in a therapeutic interview. Obviously sense of guiltiness over his explosive behaviour in the intake interview made it difficult for him to enter a case work relationship. It was fortunate that the intake worker was a skillful as she proved to be. Otherwise the situation might have ended tragically.

One point which becomes very clear on examination of these cases

is that the client, the family case worker and the community nearly always are all involved. The resources of each in fact constitute the "team" and the success of the case work will be only as great as the strength of the weakest member of the team will permit..

Heterogeneous as were the ten cases previewed in this chapter, they had three characteristics common to all . Ages of the marital partners were generally low, falling mostly within the twenty to thirty years age span. Length of marriage was generally short, only one couple having been married more than five years. Racial and ethnic origin were strikingly uniform with all but one person, a husband, being of Anglo-Saxon or Celtic extraction and most being Canadian born.

The group seems representative of the lower and middle income and social classes. The general low education status appears to support this contention; \$200 a month was the exceptionally high income.

Problems of each family were multiple. Nearly all families were encountering financial difficulties. Employment and housing problems placed heavy pressures in these marriages.

The number of health problems seemed to be disproportionately high in a group of such young people. These problems were frequently found in association with poor or arrested emotional development. Thus, these problems brought pressures to the marital relationships of people most of whom were not emotionally mature.

In these marriages, as in those studied in Chapter V, the

advancement of problems affecting the stability of the union seemed to bear little relation to the length of time since the wedding date. With an average period of agency contact of four and a third months, the family case work usually proved effective.

Co-ordination of clients, worker and community resources, as members of the family case work "team", is highly important for the success of the process.

The over-all effectiveness of the family case work, this sample of family relationships cases clearly suggests that these techniques can be advantageously used to help young people in the early years of marriage to remedy faults and to build for the future. The integration of the visiting home maker service of the Family Welfare Bureau with its case work functions has been particularly successful. Generally this service has been rendered with an awareness of the emotional factors involved. This has been true of most problems treated. In this group there was one quite successful case of "psychotherapy" in which the worker dealt only with the feelings of a wife in regard to her marriage and expected child.

CHAPTER V

ADVANCED MARITAL CONFLICT.

The "Punch and Judy" Legend.

A few years ago a screen play took for its theme the story of a man and his wife who were almost constantly at each others throats. Occasionally into their lives came a mutual pleasantness which was almost extreme as were their quarrels violent. Deftly the story showed that their conflict was an integral part of their marriage. Indeed, it almost seemed that it was an integrating element of their wedded life. About this story, and about the many like it that have found their way into the literatures of peoples, there seems to be a poignant sense of reality. The "Punch and Judy" legend portrays the lives of two persons who, although apparently they would be happier living separately, seem forever joined.

The thirteen families chosen for study in this Chapter are of this order. They are examined in an endeavour to show what are the basic properties of marriages featuring advanced marital conflict.

In Chapter IV the early marriages described showed little relationship between the age of a problem and the degree of seriousness. Similarly, the term "advanced" is not used here with the connotation of time. Rather, it suggests the degree or intensity of the marital conflict. Thus, it is conceivable, that within this meaning could fall marriages, that took place several years ago, or recently. The couple with many years of wedded life behind them may have a marital problem that has increased in complexity

and intensity with each year. The couple within the first five years of married life may be faced with a conflict just as serious as that of their seniors.

Marital Conflict

These examples illustrate the fact that people who seek help from a social agency do not always state their real needs at time of application. Only six of these thirteen families indicated awareness of a marital problem. The expressed needs of the other couples included placement of children, housekeeping assistance during illness or confinement of a wife, and financial need.

Significance of Referral

One naturally wonders how often these applications were the results of accident, and how frequently the expression of an unconscious need. A partial answer may be found in the circumstances of referral of these people to the family agency.

A social service department in a public hospital referred the Ks' for help in coping with social problems occasioned by health difficulties. As Mrs. K. was being treated for a gynaecological defect she must at least have sensed the reason she was being referred. Moreover, she had a previous acquaintance with the family agency during which she had been offered assistance with her marital problem. The O family, came to the agency voluntarily on the recommendation of the tuberculosis authority. They asked specifically for help to rehabilitate the wife after institutionalization for tuberculosis. The marital problem displayed itself only after the contact had been initiated. Although the need for financial assistance to meet the anticipated expense of confinement was the

stated reason for referral of the L. family, it was significant that on one other occasion the husband had come to the family agency for help with this domestic problem. Mrs. L., now referred by a federal agency responsible for granting financial aid to dependents of servicemen, was at first inclined to treat the new contact in terms of referral, rather than of the dis-harmony which was wrecking her marriage. Her reluctance to seek help in resolving the marital conflict is peculiar in the light of the fact that previously, at time of confinement when she had received home maker service, the case worker had touched on the marital problem and given her some idea of the function of the agency in marital counselling.

A most curious incident led the Ms' to request help. They needed housekeeping service because of the wife's convalescence from pneumonia. With no ideas as to where the required help might be secured they had been almost non-plussed. Then Mrs. M's step-mother picked up the telephone directory, ran a finger along the pages until she came to the name of the agency. Apparently neither she nor the Ms' had known the agency before that time. Her telephone call resulted not only in filling of the immediate need but eventuated in a relatively happy resolution of a serious family conflict.

When the Ms' sought placement of their children, the children's society referred them to the family agency. Obviously this couple were aware of their conflict, for Mr. M. soon voiced doubts as to whether she should stay with her husband who tended to be alcoholic.

Mrs. P. was a woman whose responsibility for her mother was causing her to neglect her marriage. Referred by a worker from

Provincial Services who recognized the need for help with her marriage, she herself was slow to see her real trouble.

Clients who did recognize that they had a marital difficulty, generally speaking, were not aware of the true nature of their trouble. These families did come directly to the family agency; yet, in each instance, there was a minimum insight with a tendency to blame the other partner for the dis-harmony.

This was also true in the case of the Rs¹, referred by the domestic relations court. Similarly the two clients who approached the children's agency for placement, saw accession to their request as an ameliorative action rather than curative.

It would seem, then, that one of the greatest hindrances to the solution of the problems which these families presented was the lack of understanding of the problem and the minimal insight possessed by the clients themselves.

Analysis of Marital Problems.

Although these clients lacked insight, in every case, the family case worker quickly perceived the marital conflict. Every worker recognized the real problem early in the first interview, if not in the acutal referral.

In every family the problem assumed a distinctive form as though reflecting the individual character of each marriage. Elements common to all were not many. In each, the disturbance of the marital relationship was grave with a definitive emotional component. The emotional qualities varied from difficulty in adjusting to the conditions of marriage, to the hysteria that signified psycho-somatic disorder.

In no situation was the problem simple and indivisible. Indeed, there were at least two problems in each case. In one family there were five problems all centring on the balance pin of relationship between man and wife, and grievously disturbing the "family equilibrium". A housing dilemma intensified the Qs' situation. Mr. Q. believed his wife socially incompatible with him. He was escaping from his situation by entering into extra-marital sexual relations. The health of Mr. R. impaired through infectious disease a decade before the family came to the agency, made it impossible for him to meet the sexual demands of his wife. Another marital conflict, stemming from a seeming basic incompatibility of man and wife was intensified by the fact that the husband was supporting inadequately.

Certain disabilities appeared in more than one situation. The happiness of two families was jeopardized by physical sexual inadequacy. Other physical health problems occurred in three families. A psychosis of a wife, which became full-blown after birth of a second child, vitiated one marriage. Surprisingly, alcoholism, or excessive drinking, appeared only four times!

The marital disagreement itself proved a question which greatly upset two lives. Both were inclined to leave their husbands. The conflict which this desire and the sense of nuptial obligation set up in them was as disturbing as the actual disfunction of the marital relationship.

From these observations, it is seen that, throughout the sample, difficulties seemingly extraneous to the major problem, had a strong bearing on the marital situation.

The Marriages.

From the variety of form which the marital problems took it might be expected that the range of marriages would be characterized by heterogeneity rather than uniformity. Descriptions of the marriages shows wide differences in them. Certain factors, however, were common to all.

Preparation For Marriage.

Full diagnosis of the marital problem presumes an intensive effort of the practitioner to ascertain the etiology of the ailment. The period of betrothal would seem, then, to have an extremely important bearing on the whole course of the marriage. From the research aspect, therefore, it is disappointing that most of the thirteen cases records contain little of this data. In only four cases did the visitors record any facts about the pre-marriage period. In this fact is seen the selectivity of fact-gathering. In two of these cases, it would have been impossible to proceed without learning at an early stage the degree of preparation for marriage. That one couple lived together before marriage coloured the whole of their family history. Mr. S., an apparently intelligent and seemingly "stable" young man, had he waited a sufficient time before marriage, might have saved himself from great misery. Through cohabiting with a "loose" woman he was drawn into a marriage that later featured a violent psychosis in the woman. The Ts' likewise seemingly prejudiced their relationship from the beginning by sexual indulgences, the result of which led to a "secret" marriage that was humiliating to them both. This complication followed an acquaintanceship of three years, a fact

which may give some credence to the popular notion that prolonged engagement is as harmful to the welfare of those involved as none at all. This contention receives further support from the example of the unhappy couple who, although engaged for two-and-one-half years prior to marriage were not able to develop a happy marital relationship as man and wife.

The Circumstances of Marriage.

The length of time married for the six cases in which a wedding date was recorded, ranged from three to fourteen years with a fairly even distribution between these two limits.

The Us' were married for fourteen years. The complexity of their problem originated in Mrs. U's feeling of personal worthlessness and her husband's derision of her as not being equal socially to him, and in his proclivity to extra-marital sexual relations. Doubtless, the many years over which this conflict developed built up the disruption to its major proportions. Yet the Qs' who had been married only three years had a difficulty almost as serious as the Us'. Of the seven marriages for which the nature of the ceremony was recorded two were performed by a civil power, five by ministers of religion. There seems to have been no appreciable effect of the choice of ceremony except when there was some dispute between the partners as to which kind of solemnization there should be. For instance, in the marriage performed by civil authority at the insistence of the husband, and against the wish of the woman, the resentment which the wife later displayed because of this circumstance added to the intensity of the marital conflict. Similarly, religious doubts were emphasized

in the marriages of the Vs' who were first^{married} in a Protestant church and, shortly afterward, remarried in a Catholic Church.

Compatibility

The discussion thus far has indicated generally the differences which these marital partners faced. In their several abilities to accommodate themselves to these differences in each other can be found a key to the resolution of their problems. Great personality conflicts between husband and wife asserted themselves in no less than five situations. The strain took more subtle form in the remaining number. Sexual difficulty with a physical basis has already been noted in two marriages. In three other families less tangible maladjustments in this area were observed. One of these featured Mr. V., a husband who was usually passive in the sexual act. The consequences in a relationship, marred from the outset by Mr. V's inadequacy in the area of personal conduct and economic support, were considerable.

Physical violence and wife-beating were the extremes which the personality conflicts took in two cases.

The "in-law trouble" of common parlance entered the picture in only two of these marriages. In both, relatives were helping with the purchase of the home. How tenuous financial arrangements in these situations led to rift between families and in laws is described later under Economic and Social Factors.

Economic And Social Factors.

More easily observable and definable than the intangibles of compatibility in these marriages were the concrete details of existence such as wages, financial obligations and living conditions. These families, like those discussed in Chapter IV with respect to

the early years of marriage, were generally drawn from the lower income strata. Mr. Q., the man who earned \$268.00 a month, was the exception among the five for whom income was reported. The known bottom level of income was \$40.00 a week. One man had no steady source of income and one was still living on the proceeds of War Service Gratuities which he had invested in a rooming house. The average income would appear to have been approximately \$140 a month. It was not unusual for there to be more than one source of income. Four families drew their income from two sources. Two wives were engaged in industry; two rented a portion of their dwellings.

Despite the fact that most families had incomes that should have provided at least minimum standards of comfort, the majority encountered financial difficulties, while detail was secured infrequently, such data as was recorded indicated as causes of financial stringency, general inability to manage money, medical and hospital bills and obligations of home-purchasing. The largest known indebtedness was \$700. The client was unable to determine accurately how this indebtedness had accumulated. Poor ability to manage money seemed to be the primary cause.

As previously noted, the two greatest difficulties in home-purchasing were similar. In both situations, the home had been purchased by relatives of the wife with the husband undertaking to repay the creditors.

There was only one genuine case of home ownership. With this good physical setting the elements of the marital conflict were distilled in the personalities of the man and wife rather than dilluted ingrievances over environmental dissatisfactions as

happened in several other cases.

Mr. Q., with his exceptional income, could afford to purchase his own home and was so doing. The housing difficulties which beset him meantime, namely that he could find accommodation only in an isolated place, wrought an evil effect on his marriage, his wife being an individual who was constitutionally gregarious and needed human association probably more than the average person. Housing that conspicuously affected the marital relationships included quarters in antenement and a shared housekeeping room. A comfortable apartment suite which was provided to the Vs', in addition to a small stipend to Mrs. V., in return for care taker service rendered by her, proved too confining. Removal to a home, with gardening prospects for Mr. V., relieved the strain at least temporarily. Of the six families that rented homes, the Vs' particularly suffered from effects of poor housing. The dilapidation of their quarters which led to flagging of Mrs. V's interest in the home contributed to their nuptial disharmony. Interestingly the restoration of their home did serve to alleviate their difficulty.

Mr. S. whose wife became psychotic housed his family in converted army huts. Any discomfort there suffered resulted from his wife's condition.

The use made of available housing would seem to be a great factor in the well-being of a family as the effects of inadequate housing.

The Children.

The unhappiness which quarrelling parents visit upon their children is amply brought out in study of these thirteen families.

The Ws' were the only childless couple. Mrs. W. had experienced one miscarriage. The difficulty which she had to carry a pregnancy to term was directly associated with a gynaecological abnormality, which in addition made performance of the marriage act very painful. Rectification of this trouble not only brought promise of normal pregnancy but eliminated the discomfort experienced in sexual relations and thus aided in resolving the marital conflict.

In all the other families there were at least two children. The Us' with five children and a sixth born during the period of agency contact were the largest family. There were four children in each of two families, and three in one family. Ages of children ranged from a few days to 11 years. Of the twenty-nine children in these thirteen families, twenty-one were girls.

Of this total number of children only two, both boys, of the same family, did not appear to be developing abnormally. The number of parents who brought their problems to the children's agency obviously had some realization of the effects of the domestic upheaval upon their children. Yet, two sets of parents did not realize that they were physically neglecting their children. The children of these families were suffering, or had suffered, from health problems with a neurotic base. More truly psychogenic were the disturbances of children given to sucking, having eating difficulties and pulling out their own hair. Behaviour difficulties and disciplinary problems occurring in four families ran the gamut of stubbornness, meanness, cruelty, obedience, sibling rivalry and marked anti-social tendencies. In the U situation, the children were drawn right into the vortex of parental disagreement. Mr. U., who accused his wife of infidelity during his time away

from home and in armed services, told the three other children that last-born was not his, and attempted to cajole the eldest, an eleven-year-old boy, into an alliance with him against Mrs. U.

In contrast to the cases discussed in Chapter VIII (specifically parent-child relationships and child development problems), these children had a poor chance of growing up normally. The concern of the parents with the discomfoting results of their own deep conflicts tended to blind them to the need of their children. Family case work in some measure modified this unhappy outlook.

Personal Background

Review of these marriages, and of the disruptions that spoiled them, inevitably gives rise to the question: What were the people who entered into these marriages really like?

Personal Adjustment

Some of the personal development of the twenty-six marital partners has been brought out in previous discussion. None of these clients could be considered as having developed a normal balanced personality.

Recorded ages ranged from twenty-five to thirty-eight years for the men, and from twenty-one to thirty-five for the women, with the scales weighted at the bottom level. Despite the advanced stages of the marital disorder, therefore, the principals were still relatively young.

These deviant patterns ranged from incipient alcoholism, through obvious emotional immaturity, to the violent manifestations of profoundly disturbed persons. Mr. U. was described as sleek and a philander, a medium sized person who ruled his home with a napoleonic tyranny. Mrs. U., with a low opinion of herself, and

highly self-critical, succumbed to his dominance. Mr. Q. with his good position, his exceptional income and drive for success was possessed of an ambition based on his emotional immaturity. His arrested development was evident also, in a class consciousness and an attitude of intellectual superiority to his wife. Mrs. Q. although attractive and apparently intelligent, was a girl of reticent habits. She found it difficult to meet the social requirements her husband had set for her. Only the facts that Mrs. Q. has a good intelligence and Mr. Q. an inherent ability to get along with people, might save their marriage.

Even less fortunate was the family in which the wife found difficulty in meeting people. Unable to relate to the family caseworker thus making treatment impossible, she retained her problem which revolved about her own rigidity as shown in her attitude toward her children, and toward her husband who was beginning to give way to the attractions of alcohol.

These were but three of the combinations that variously featured emotional aberrations and moral weaknesses.

Education

School attainment is given for only three of the men and five of the women. They indicate that the education of these people was not advanced. Mr. S. had the highest recorded education. He was a capable university student. His obvious capacity for achievement was fully employed by the family caseworker who insisted that he assumes responsibility for his family when these problems with the mental deterioration of the wife becomes most critical.

Mr. U. had completed his secondary education. It was significant

that, having left high school in mid-career, he returned to complete his course, an action in keeping with his drive for success. He need not have been so apprehensive of his wife's social graces for she had not only completed high school but had shown talent in dramatics and had done well in several courses.

Nor need Mrs. U. have felt so little personal worth for she had completed her standard education to matriculation and had begun a nursing career. The fact that this course was interrupted did contribute to her sense of failure. Mr. U., passive in his marital relationships, had shown initiative in other areas. Although his formal schooling was not advanced he had successfully studied technical courses.

Occupation and Employment

Four of the men might be rated as skilled workmen, the occupations including: sign painter, printer, garage mechanic and butcher. One man was a professional musician.

The unskilled labour included truck-driving, hotel clerk, and general. Mr. Q. held an executive position to which he had "worked up" from a minor position. A tattooist operated his own shop. The quality of his enterprise provided a clue to his personality. His establishment was the rendezvous for lads who were in conflict with the law. Other than housewife, occupations were listed for only two of the women; waitress and stenographer. The waitress Mrs. I. eventually returned to work because of the inadequate support she received from her husband. She and Mrs. V. who acted as caretaker of the apartment were the only ones who worked in remunerative employment.

Six of the men were employed in the occupation they gave. One

of the alcoholics had a varried employment history. Mr. V. another dipsomaniac while he stayed within his stated occupation frequently changed jobs, he apparently managed to earn good money at them.

The effect of army service was noticeable in the employment histories. Mr. U., the "philanderer" who had been married fourteen years, assigned to the same trade in service which he followed in civil life (butcher), preferred to join the Permanent Force after the war. Probably his adjustment to the service operated against the success of his marriage as it gave him the freedom of movement which turned his attention from family duty. There were positive benefits to Mr. S. the University student from his service, rehabilitation allowances as they furthered his occupational advancement. On the other hand, the young man who invested his gratuities in a rooming house could not settle down after discharge, a failure which added to the stress between himself and his wife.

Mobility

Armed service proved the most significant factor in mobility. Four of the husbands had been overseas, and it was these veterans who experienced the most difficulty in rehabilitation. Aside from this the average mobility was low, as most clients had lived in Canada the greater part of their lives. However, Prairie-to-Coast migration was represented in three cases. The most unstable of the men, the violent-tempered alcoholic, was the most footloose of the total number. Similarly it was Mrs. S. the psychotic wife who, of the women, was most travelled. Mobility played a sort of a selective role in these marriages.

Health

The importance health played in the problems of these thirteen

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families can be readily inferred from the preceeding discussion. In only four families was the man in good physical health, in three the women. In only one marriage did the husband and the wife both enjoy good health. The degree of unfitness varied from "indifferent" health to cases of tuberculosis arrested after long treatment. The genital disorders previously mentioned, and the thyroid, high blood pressure, and anaemia suffered by the wife in the oldest marriage seriously inhibited the function of marriages. The most serious disorder was suffered by Mr. T. who returned to civilian life as a full cripple and whose mental and emotional balance were also effected.

Emotional disturbance, occurring as frequently as the physical ailments, ranged from immaturity to hypochondria. Mrs. S. was the only permanent victim of mental disorder. Mr. T. later made a remarkable recovery.

Family Backgrounds

Family Histories.

In nearly every case the family background was considerably less than the ideal. It is interesting that the two families in which the husbands were heavy drinkers had certain common roots. One of the alcoholics and the wife of one of the alcoholics were brother and sister. Their father had been a heavy drinker and their mother immoral; the break-up of this marriage had been an experience common to their childhood. Mr. U. who inflicted tyranny on his own home had been the son of a domineering mother. Mrs. S. mother spent much of her life in mental hospitals and was considered incurable. Desertions, separations, divorce, and poor circumstances were common to many of the family backgrounds.

With one exception the twenty-six people grew up in urban surroundings.

The ethnic origins of these people were almost homogenous. Except for two men, one of Italian, the other of Ukrainian descent, all were of Anglo-Saxon or Celtic stock. Nearly all were Canadian-born.

Religion in this group of families, in contrast to the first ten studied, was a greater influence, although a negative one. This was observable in the five families in which one or both parents had left the Catholic Church. The discomfort they felt over this change, however much they tried to deny it, became woven into the very fabric of their marital situation.

Treatment

The case work had some effectiveness in at least seven of the thirteen cases. Certain qualities of the treatment stood out impressively in the cases in which the process was most effective. As opposed to the current trend towards a reduced period of agency contact, usually running from three to six months, the length of treatment in these particular cases was fairly prolonged. The average length of total treatment in these cases was 340 days or 11 and one-third months. The longest total agency contact, covering three periods, was 1546 days or 2.4 years. The shortest period was thirty days.

The two cases open for the longest periods, the Us' and the Ts' featured the best family case work. In both the work was intensive as well as extensive. The workers^o in each case, but especially that of the disabled veteran, were young but experienced with unusual physical vigour. Their drive seemed, in large measure,

responsible for their success. The Us' throughout their long period of activity with the agency had several workers who all displayed this same drive. Thus, there was an insistence that Mrs. U. try to establish her work in her own eyes and prove it to her husband. During one period, following a request of Mr. U. for homemaker service in order to help the wife clean up their dirty and disorganized home. The worker insisted that Mrs. U. prove her capacity for homemaking by participating in the activity. This was one of the best uses of the homemaker service. Whereas this facility has been generally employed in the settings characterized by medical problems, this was a real "homemaking" service with the homemaker being carefully tutored in the active part she was to play in the social treatment. The same steadfastness of purpose entered the third period of therapy, when Mrs. U. became pregnant for her sixth time. She was afraid to reveal her condition to her husband, as on every such previous occasion he had unreasonably and heartlessly criticized his wife for this normal occurrence. The worker now supported the wife continuously until she was able to face the reality that she must disclose her condition to the man. Even at final closing when Mr. U. had returned after an affair with another woman the worker was firm in trying to help Mrs. U. face the reality that the rapprochement offered no promise of lasting duration. The worker's capacity for persistence exceeded the woman's potentiality for growth. The same qualities were evident in the worker's approach to Mr. U.

The file on Mr. T. the disabled veteran reveals not only the persistence of the worker but also the teamwork of client, worker and the community resources. The formation of this team is clear.

Unquestionably the family case worker had to lead the team. Mr. and Mrs. T. both had very unstable backgrounds. Their need for expression of hostility was met in the person of the other. So were the needs of love and security. The ensuing conflict was immeasurably heightened by the war injury to Mr. T. Their case record is more unbelievable than fiction as it unfolds the story of two people whose conflicts were so great that they had to plan holidays apart at times and then prepare for the re-union which their emotional selves demanded. Through all this the district worker moved, called out at hours of crises occurring at the oddest times. She was always aware of their needs, and of the effects on the children suffering through separation from parents and from one another. Frequent conferring with the Veterans' psychiatrist and social service, and with the tuberculosis authority over the condition and emotional implications of phthisis in the wife, kept the worker alert to every aspect of the situation. Although the worker was time-tested, the strain of presenting the first consistent strength in the life of either partners at times demanded special intra-agency consultation and supervision. The recovery of Mr. T. to employable status and the quieting of the marital disturbance after years of hectic struggle must in no small measure be attributed to the case worker and her leadership of the "case work team".

Comparable positive leadership asserted itself in the situation in which the family worker insisted that the student veteran take responsibility for the psychotic wife and that of the sexually-handicapped wife who was helped to see her need for treatment and at the same time accept the family of her Ukrainian-descended husband.

The ability of the case workers to act in a medical situation

has been observed. It was probably helpful that the case on which most co-operation was secured from the doctor, that the worker had nurse's training.

The co-operation of the doctors in this group was remarkably high. Apparently some members of the medical profession have gained considerable insight into marital problems through their practices and realize that these complexities fall outside their area of competence.

The marital problem in its advanced stage, then, is seen to be complex, its roots deep-seated and its unsalutary effects far-reaching if no amelioration is possible. The history of some of these thirteen families indicates a congenital transmission of emotional instability to the third generation. Lack of understanding the human aspects of marriage by those assuming connubial responsibilities indicates a general need for broader education in this area. The involved motives of clients and the high rate of psychogenic factors give point to the developing idea that group psychiatry must find its place among public health and educational services.

The family case worker can provide valuable service in reducing the misery which lies behind the Punch and Judy Show. More attention might be given to recording of factual data concerning personal development and marital history. Treatment, it must be recognized, may have to be long and intensive. There is need for frequent consultation and careful supervision of a high order. The problem being so solidly entrenched the family case worker must lead the case work team in assailing the problems besetting this type of marriages if there is to be any hope for success.

CHAPTER VI

DISSOLUTION OF MARRIAGE

It is evident that, in some marriages, husband and wife stay together, no matter how violent the conflict. Yet, in others, seemingly no more strained, they part company.

Why, and, when they do, what happens to the man and wife after they go their separate ways? What becomes of their children?

The object of family case work is to help strengthen the family and to assist each of its members attain to his maximum capacity so that he may be a responsible member of society. How can this objective be met when the family is breaking or broken?

These are some of the questions which the third group of cases in this study illustrate. The range of families is shown by eleven examples, each at some stage of disintegration. They vary from the family obviously moving toward inevitable disruption to the marriage in which divorce proceedings were under way.

The Circumstances of Separation

The marriage of Mr. and Mrs. AA had been fraught with separation due to the exigencies of war that took the man away in service. Although he had lived with another woman for five years and had interspersed his separation with several more affairs of shorter duration, the wife later took him back. Still in love with him, she looked away from the reality of her situation. Ambivalent in her feelings toward her husband, indecision became the theme of her existence, not only frustrating her in every thought and action, but redounding on the children, two of the three manifesting extreme behaviour deviations.

At the other extreme was Mr. B.B., the young man who "caught" his wife in the very act of immorality. The evidence of adultery was so irrefutable that it led to double divorce proceedings as the other man involved was also married.

The C.Cs' were a young couple who entered a marriage arranged by their mothers, bent on hiding the "disgrace" of an illegitimate pregnancy. Incapable of discharging the duties of husband and father, the young man had literally walked away from his marriage.

English war brides in this group fared badly. Mrs. D.D. found herself left with her parents-in-law, her husband seemingly incapable of accepting the responsibilities of marriage. Another war bride Mrs. E.E., already forced to place a child for adoption before departing from England because her husband had alleged that it was not his, arrived in Canada, only to find that Mr. E.E. had disappeared, leaving no trace of his whereabouts. A third, Mrs. F.F. found her husband there to meet her at the station but suffered violent rejection by him. Not only did he refuse to live with her but he also assaulted her.

When Mr. G.G. quit his wife after she became pregnant for the fourth time, he repeated a pattern common to every period of expectancy, sacrificing his family to his ambition for success in his own business. The decision to separate already had been committed to the respective lawyers of man and wife. The family agency was left with the task of looking out for the welfare of the children. Not unlike him was Mr. H.H. ambitious young veteran who, with a total disregard of connubial duties, pursued studies in preparation for a professional career.

Two wives refused to stay with their husbands. Mrs. I.I. decided the immaturity of her husband, alleging that, although he was in a fine position and earning good money, he was incapable of discharging the responsibility for support, or other obligations of wedded life. The other wife Mrs. K.K. declined to live with her husband in his home city as she asserted that he was "tied to his mother's apron strings." Her marriage, she felt, would have no chances for success unless they were to live elsewhere.

The family of Mrs. L.L. forcefully ejected her husband from the home which they had financed. Mr. L.L.'s inability to meet his obligation to them, reflected an immaturity that made it impossible for Mrs. L.L. to continue living with them. The family workers had the task of helping the couple adjust to separation and of protecting the children from the havoc caused by severing the nuptial bond.

THE MARRIAGES

Circumstances of These Marriages

These disruptions came after periods of marriages varying from one to seventeen years. Most breaks took place within five years of the wedding. Only four marriages lasted more than five years and only two more than ten; in both the latter, the partners had been wed seventeen years before coming to the agency. In each there was a history of separation that reduced the real wedded life to a period approximating ten years. Mr. A.A. who was separated for the long period and who had a series of affairs during his absence from home, was one of the husbands. The other marriages featured Mr. G.G. who consistently deserted during his wife's pregnancies. There are indications, then, that the actual length of wedded life in this group did not exceed ten or twelve years and that a considerable

number survived for a much lesser period.

Preparation of Marriage.

Length of courtship in the six cases in which it was recorded varied from a few months to two-and-a half years. It is perhaps not without significance that Mr. and Mrs. B.B. the principals in the divorce case, although they had seriously contemplated marriage, had not been wed until after the woman became pregnant.

Nothing more is known about the preparation for these marriages. Despite the dearth of information, the inference in the recording is that most of these marriages were undertaken with the minimum of serious consideration of the important issues involved in establishing a family.

Compatibility

It might be thought that differences between the man and wife who separate would be very obvious. Yet, in almost all of the situations the casegram reveals little of the disparity that contributed to the dissolution of the marriage. Generally the expression of difference took the form of accusation of one partner by the other, and frequently these allegations lacked conviction. Mr. C.C. stated that he and his wife came of different backgrounds, his being better than hers, but this received no support from any other facts learned about the family. Another man Mr. E.E. stated that his wife, in her associations with other men, had been unfair to him.

Mrs. B.B. was one wife who definitely had extra-marital relations. Mr. and Mrs. I.I. both, each with the other's knowledge, had entered into extra-marital relations.

The separation of the L.Ls' was the culmination of differences that grew out of their backgrounds. The man in his home had known

warm, friendly relationships and an easy manner of living. The wife had been brought up to rigid standards in a family exhibiting as individuals, strong introvert tendencies.

Economic and Social Factors.

Frequently marital problems were anchored to financial difficulties. In at least six marriages income was inadequate properly to maintain the family. Mrs. C.C. had to go to work in order to supplement the \$80.00 a month income her husband was receiving. Such a necessity can only have emphasized Mr. C.C.'s incapacity as a husband and father. In marriages like these, it followed almost inevitably that the wife could complain of inadequate support. Even in a family whose bread-winner was earning a respectable salary, difficulties over money and budgets occurred. Mr. I.I. tended to ignore his wife in financial matters. He preferred to pay all the bills himself, to keep her in the dark as to the true state of finances, and to give her less than was commensurate with the income which he was receiving. Mrs. K.K. refusing to live in the home-city of her husband, received from him nothing for herself, and only spasmodic support of the children. Despite the small income Mr. B.B. received as a student veteran, he had been supporting his wife to the best of his ability.

Living conditions among these families varied. Two owned homes. One of these was a good home in a very respectable residential section of the city. As in the two cases cited in the chapter on Advanced Marital Conflict, the L.Ls' living in the home purchased by Mrs. L.L.'s relatives, suffered from the insecurity of such an arrangement. Failure to pay in-laws for the purchase brought on the bodily ejection of Mr. L.L. from the home, and signified the beginning of the end to the marriage.

A small cottage type of house was heavily mortgaged. The woman's taking in of boarders to defray the costs of the house added to the source of conflict between man and woman. Suites, both basement and at the rear of the house, housekeeping rooms, hotel rooms and veterans' hostels were other types of living accommodations used. Living arrangements definitely tended to be of the transient order. Although in at least one family housekeeping standards were poor, most families did not live too badly. From the records one senses that the abodes were seldom inviting, frequently lacking the warmth and order of a happy home. Except for the cases specially noted, housing conditions seemed to be the end-result of the conflict rather than a contributing cause.

PERSONAL BACKGROUNDS

Ages of Partners.

These marriages were predominantly of younger people. Ages in the ten cases in which they were recorded, ranged from nineteen to thirty-seven years for the men; from nineteen to thirty-five years for the women. Only three men and one woman had passed their thirtieth year.

Personal Adjustment.

In nine of these cases the family case workers were able to know both partners at first hand. In the other two marriages it was impossible to see the husbands. Practically nothing was learned about Mr. E.E. after he disappeared. The only information available about Mr. K.K. was tainted with the prejudices of his wife who described him as being "tied to the apron-strings" of his mother.

The term "immature" was commonly used to describe the personality of usually one, and frequently both partners. Mr. E.E. was said to be

immature and further depicted as "dependent", "moody", and unkempt in his personal appearance". His attachment to his mother was abnormal. Mrs. L.L. was described as immature, inarticulate and unwilling to discuss anything but surface problems. She was noticeably jealous of the man's sister and his mother.

Mrs. A.A. found it difficult to make up her mind whether she should part from a man apparently capable of understanding what neglect would mean to those outside his own family, but lacking the personal insight to see the effects of his conduct on the relationships in his own family.

Character sketches of the L.Ls' when placed side-by-side, are very meaningful. Mr. L.L. was a poor provider. His employment record was erratic with six months as the longest time he had ever held a job. In the two years since discharge from service he had been in ten jobs. Even in sports and amusements, except in drinking in which he engaged too freely, he preferred to be the spectator. Yet he was friendly and outgoing. All his life he had been indulged by his mother and his five sisters.

Mrs. L.L., on the other hand, had wide interests in group activities and boasted a good employment history. Yet she lacked assurance. A lonely person, she was too self-conscious to be alone with anyone. At times she had violent bursts of temper. Her strong introvert tendencies apparently were associated with her very strong attachment to her mother, a dominant matriarchal figure whom she keenly resented, with a feeling that was always expressed in the lasting disappointment that she had never been given a birthday party as were other children. As in this example, throughout this range of cases, the negative attributes of personality seemed to operate more

strongly than the positive qualities.

Education

The scholastic achievement of both man and wife was recorded in only two cases. Educational qualification was obtained for only four other men and two of the women. Undergraduate university standing was the highest known education among the men; grade X among the women. Aside from these, the recorded education was grade VIII, or less.

Generally, this data, if recorded, was significant, as in the case of the L.Ls'. The husband had completed grade VIII at the age of 16 years. The Otis group intelligence test gave him an intelligence quotient of only 76. Mrs. L.L, on the other hand, had completed grade XII at the age of 18 years. The disparity between the mental endowments of the L.Ls furnishes much of the explanation of why the marriage failed.

Occupation and Employment.

In none of the groups of families studied, were the factors of occupation and employment more significant than in this selection. Erratic work histories predominated. Armed service highlighted the occupational activities of the group. Of the eleven men, seven had been on active service and one had been a seaman travelling through war zones. For each of these, war service does not seem to have been so much time taken off from civilian living, but rather one of a succession of occupational activities. For, six of these eight men had changed their occupation after service. In effect, these seem to have been "soldiers of fortune". With five of them bringing English war brides back with them, it would seem that marriage might have been a part of this series of adventures. Service, for some being

as long as seven years, may have been an abnormal extension of one stage of the occupational history. Certainly the quickened succession of jobs, such as those of Mr. L.L. who held ten between time of discharge and the date he came to the agency, and the man who during the period of agency contact had three jobs widely different, would tend to support this contention.

For two veterans, service advancement may have uncovered talents that made for difficulty in re-adjustment to civilian life. The total attitude to life of one seemed changed to bitterness when he had to return to subordinate labour after achieving considerable recognition. Mr. H.H., the ex-servicemen who forsook his family for a professional career, had proved hitherto unknown leadership qualities by attaining to good officer rank.

The work history of the three non-veterans was almost as significant as those of the ex-servicemen. Mr. C.C. who had sacrificed his marriage for his business had left the teaching profession. That stability in employment is not always synonymous with healthful living is evident from examination of the occupational status of the remaining two men. Mr. K.K. who would not leave his home city or his mother, also clung to the business of his father although the trade he had acquired in this enterprise should have served him anywhere. Mr. I.I. had devoted much time to his work and thus neglected his family duties. His desire to achieve had been kindled by envy of a successful relative in an allied field.

In a different way the occupational activity of the wives in this group was as significant as that of the men. Seven of them gave pre-marital occupations. Three in addition to one who gave no previous occupation had to seek work because of non-support. Three

of them took employment similar to that which they had previously performed. Instability in work was seen here, too, with one woman employed in four successive jobs, one in two.

Mobility

Closely allied to factors of employment, mobility could be expected to be high in these marriages. The records indicate that this was true. Eight families, in addition to overseas service had travelled widely. Taken together their movements covered most of the western English-speaking world. One woman, as a small girl, with her family had fled the Russian Revolution. High mobility of the wife and immobility of the husband were salient features in the marriage of the K.Ks'.

Health

In only five marriages were health disorders unknown. Disability ranged from the minor ailment to serious lung trouble in one man and congenital specific disease in another. It was sometime after social treatment had been instituted that referral to medical authority revealed that Mr. H.H. the professional-bent ex-officer could not enjoy normal marital relations because of a physical sexual disability. Interestingly, he did not avail himself of the opportunity for the surgery that would have rectified this condition.

Emotional health already has been seen as generally poor. Mental disease was not disclosed. Mr. L.L. however, was mentally retarded. Mr. A.A. the man who had a mistress for five years was thought to be psychopathic.

THE CHILDREN

Eighteen children, twelve boys and six girls, ranging in age from two weeks through the sixteenth year, had to withstand the

rigours of family dissolution. Seventeen were pre-adolescent, thirteen of pre-school age. The majority of them, therefore, were in danger of suffering severe trauma because of separation from a parent. It is hardly surprising, then, that in eight of these families unfortunate results of marital disharmony were already manifest in the children. Deviant patterns were almost as many as the children themselves and included such abnormalities as "withdrawal," hysterical illness, hostility, undirected behaviour, excessive dirtiness and temper tantrums.

FAMILY BACKGROUND

Family Histories

That these ailments often are being passed from generation to generation is amply supported from the family histories of this group. In only three marriages was there no discernible antecedent in the marital history of the parents of the man or woman.

Marital conflicts or deprivations had been present in the families of man or wife in five cases. In each situation one parent had died while the man or wife was yet a child of tender years. Two people whose parents had remarried had grown up in an atmosphere which they had found very unhappy.

Cultural, Social and Economic Factors.

Four of the five families for which religion was noted were Protestant. In the fifth family, the man alternated between Catholicism and Lutheranism as his faith. Religious fanaticism lined the family background of Mrs. A.A.

In all but two of these cases, man and wife were Canadian of Anglo-Saxon lineage. The racial extraction of one couple was not established. Russian descent of Mrs. A.A. has already been mentioned.

Although little specific information was recorded all indications were that these people generally come from the low-income of wage-earners, from families with no significant social status.

Treatment

It would seem logical that the effectiveness of family case work in marriages that are facing dissolution would be measured by the degree of adjustment the client is able to make to his new situation. This involves the surrender of familial unity, restoration of the personal life so that the parting members can live with dignity among their fellows, and acceptance of the responsibility of caring for the children or some guaranteed transfer of that authority. By these standards in at least five of these cases the clients were helped with partial effectiveness while in two others it was too early to know the real effectiveness of the work. When the etiology of the problems presented in these situations is recalled this rate of effectiveness may be considered favourable.

Discussion of these marriages in the light of the personal and family backgrounds brings out clearly that the client was the weak member of the family case work team. At least eight of the clients were under the disability of being unable to face their dilemma realistically. The practitioner, then, had the difficulty of trying to help the client, who had never learned how to live properly, renew his existence, so that living would have meaning for him.

The awareness on the part of the family case workers of the dangers facing the children of these marriages inspired a leadership of the case work team that found a response in most parents and in the third member of the team, the community, as it made available resources for the well-being of the children. School officials,

school nurses, Victorian Order of Nurses, psychiatric service and children's services including protection, boarding home and foster home care, were all positive elements in the family case work treatment.

The staff members helped clients not only when the separation was final, or appeared to be inevitable, but also before the decision to separate had been made. Thus, advice on matters such as marital rights, separation and divorce was skilfully given. Yet it is well to point out that there was extreme care taken not to invade the domain of the legal profession.

The worker who was assigned to the divorce case, without impinging on the area of the legal profession, exerted an energetic and encouraging influence that helped Mr. B.B. carry through with a disagreeable task which he felt was his duty.

While the staff members carefully avoided stepping out of their roles, it was observable that other professional workers were just as careful not to move out of their areas of competence. This was true of the doctor who would take no part in a marital situation as it was not his field and of a lawyer who acted similarly. Lack of understanding of personal and social implications on the part of the lawyer who served as legal counsel to Mr. B.B. increased client anxiety to an extent requiring the family case worker to discuss the matter with the barrister.

The development of the case work relationship between the worker and Mrs. D.D. one of the deserted war brides suggested the value of a fee service. Although this client had little money she insisted, after a luncheon appointment with the worker, on paying for the meals of both herself and worker. It is doubtful whether the worker

realized the significance of the client's need to pay for service for she later joked rather flippantly with the woman about it.

That success can attend the efforts to help people accept the inevitability of separation and adjust to it, is exemplified in the situation of the LLs'. After Mr. L.L. was cast out of his home, he and his wife both came to the agency. The worker then explored the feelings of both. Convinced of the woman's determination to separate, she and fellow visitors who succeeded her, over a period of months, worked steadily to help the man face up to his situation. When this was accomplished consideration was given to care of the children. Interference by private citizens resulted in amateur arrangements for adoption placement. There seemed reasonable chance at termination of service that these people could go their separate ways happily and might later end their marriage completely through divorce.

Periods of case work treatment with these families have been long, varying from five to 323 days with an average of 6.1 months. With these courses of treatment totalling 409 days the B.B. family had the longest total period of treatment.

Disruptions of families coming to the Family Welfare Bureau are thought-provoking. These breakdowns are occurring in families of young people whose marriages generally do not cover a span of more than ten years. Most couples have been married a much shorter time. The children of these marriages, being mostly of pre-school age are in grave danger.

One question that may well be asked is, are these children likely to suffer any more than the children who lose their parents through death? Probably the answer lies in the type of family life that precedes this change. Whereas the child who has lost a parent

through death may have enjoyed a relatively happy life before the tragedy. the child of the "broken home" has lived through a damaging stormy period preceding the separation of his parents.

A second question that may be asked is, would not these children of broken marriages be better placed in adoptive or foster homes? This question can be answered only on an individual basis, the reply related to the particular kind of parent the child has, "emotional neglect", the term used by many social workers to indicate that a child is being deprived of a happy relationship with parents, that will help him grow to emotional maturity, is still difficult to prove in court of law.

One thing is certain. Unless these children receive special help in acquiring proper social attitudes and in developing the capacity for personal relationships, they may be destined to carry into adult life the misery that shattered the marriages not only of their parents but also of their grandparents.

Unprepared for life, these marital partners have been least prepared for marriage. Temperamentally, educationally and vocationally they are ill-equipped to live as celibates, let alone as husbands and wives.

The family agency has something to offer these people. The staff members to be successful must be forceful professionally; they must discard every notion with regard to the conventional view of marriage dissolution. They can help their cleaving partners to separate successfully. They can help the children of these marriages.

But family case work is not enough. It must form part of a

service that will attack universally the problems that lead to marriage disruption seen in this group and those studied under Advanced Marital Conflict. Logically the premise of operation of that service must be the desirability of prevention of marital catastrophe, more positively put, of preparation for living and the vocation of marriage.

CHAPTER VII

RECONCILIATION

One of the cases described in the preceding chapter, was that of Mrs. D.D. the English war bride whose husband deserted, leaving her in care of his parents. When the Family Welfare terminated its contact there was a vague suggestion that Mr. and Mrs. D.D. were going to live together again. Despite the harsh treatment Mr. D.D. had meted out to Mrs. D. apparently she still wanted to live with him.

What influences might bring about such a rapprochement? Has family case work anything to offer the husbands and wives who alternate between living together and separating? Ten families have been selected for this portion of the study, with these questions forming the basis of enquiry.

"Reconciliation" as applied to these cases is a loose term, used for want of a better description. It signifies not only marriages in which true reconciliation of partners has taken place, but also those in which there has been resumed no more than the outward appearance of the nuptial state.

Affection--Strength of The Wife?

The J.Js' were married in Vancouver toward the end of 1944. How long they knew each other before marriage is not indicated. The fact that the parents of both strenuously objected to the marriage before the J.Js' pledged their troth, would indicate that there must have been a measurable interval between first meeting and marriage. It was not surprising that there should have been this pre-marital conflict because the family backgrounds differed greatly. Mrs. J.J. had spent most of her twenty-four years on the prairie farm which her Irish-born parents operated none too

successfully. Before moving to Vancouver at the beginning of the Second World War the family had lost their property and, for some time after the reduction of their fortunes, had been subject to poverty heightened by the ignominy of depression relief.

Mr. J.J., on the other hand, with the exception of his overseas war service, had lived his twenty-five years in Vancouver. His family was reputed to be fairly "stable" but this description had been modified by the statement that his mother had possessed "social pretensions."

Perhaps it was the early influence of the socially-aspiring mother that made it so difficult for him to ask for help when he came to the family agency. The intake worker recorded that he presented "a good, clean-cut appearance" as he diffidently told his story. He had left high school, he said, when he had only half-finished it, in order to join the navy. After discharge he had been to sea for awhile but the separation from family which this occupation necessitated made it unpalatable to him. For some time he had been without work of any description. Bewildered, he and his wife saw their debts mount to frightening proportions. They had used Mr. J.J.'s re-establishment credits for the purchase of furniture and, to supplement this limited purchase, had undertaken the obligation of buying more household equipment to be paid from earnings. How they could not even meet the current living costs which included the \$15.00 rental for their suite.

Apparently completely discouraged, Mrs. J.J. had taken her leave of Mr. J.J. Her action was incomprehensible to the man who now seemed disappointed in his marriage and who obviously felt affronted at the defection of a wife whom he considered socially

his inferior. The family case worker made it plain to Mr. J.J. when he asked to have his wife told that she must return to him, that the family agency could take no sides in a family quarrel. The wife might have something to say in her own behalf and might have feelings that Mr. J.J. was at fault. Perhaps the worker could have a talk with Mrs. J.J. to see how she felt about their marriage. Mr. J.J. agreed to his wife being interviewed on this basis.

Meanwhile some attention was given to immediate practical issues. Enquiries to the Unemployment Insurance Commission, which were willingly answered, revealed that Mr. J.J. had no entitlement to unemployment insurance benefits. Arrangements were made with the administrators of a military fund for temporary assistance to be granted to Mr. J.J. so that he could take care of immediate material needs.

A check with the Department of Veterans Affairs revealed a very different story from the one he had told to the worker. Mr. J.J. was recorded in his service career as unstable and given to excessive drinking. He was finally discharged from service with a medical diagnosis of "psychopathic inadequate personality."

The family case worker found Mrs. J.J. to be thin and pallid-looking, at first very unresponsive. A well-cared for and healthy baby boy of one year suggested that she must have some positive qualities. The worker moved slowly at Mrs. J.J.'s pace. In the third interview the pace quickened as Mrs. J.J. became more talkative. Gradually the real Mrs. J.J. became apparent. She admitted that she was very fond of her husband. She seemed to realize his shortcomings and was prepared to put up with them despite her recent action in leaving him. Then she admitted that she shared the blame

for the marital maladjustment. The worker helped her to say that she had a sex difficulty by reason of which coitus could not be completed. Together the worker and Mrs. J.J. analyzed this abnormality as a source of conflict between herself and Mr. J.J. Being allowed to talk about it, and being helped to overcome her sense of guilt for this inadequacy in such an important area of the marital relationship, enabled Mrs. J.J. to think more clearly about her total situation. She was also referred to a gynaecological clinic for medical counsel and interpretation.

The family case worker realized the depth of Mrs. J.J.'s love for her husband and communicated to the wife her understanding as much by her attitude as by spoken word. The acceptance by the worker of this woman's love for a man who in so many ways was unequal to the demands of life helped to strengthen her resolve to make the marriage successful.

Even when Mr. J.J. continued his drinking, and deserted his wife, she did not weaken in her determination that the marriage would work. Despite the necessity to accept referral to a public agency for financial aid, she appeared stronger at termination of the case than when the worker first met her.

A year after this first period of service Mrs. J.J. was referred to the family agency by a public health nurse. Although there had been a reunion of husband and wife in the interval, Mr. J.J. was gone again, not only leaving Mrs. J.J. penniless but also weighed with the anxiety of pregnancy. Referral to a prenatal clinic helped meet the immediate need.

Mr. J.J. showed the same determination to have the marriage succeed shown during the first period of service. Mrs. J.J. was

interviewed and helped to realize the depth of feeling that his wife had for him, and the meaning that this affection could have in married life. He returned to his wife. Now he has steady employment in the construction industry. There is a good chance that he will be able to contribute to the marriage. At the time that the case record was examined, the J.Js' were still active with the agency. The social treatment plan embraced "supportive help" to the J.Js' for as long as it would take for them to solidify their marriage.

Other Situations

Not all the cases were as easy to analyze as was that of the J.Js'. Few had the evident strengths that helped this family to re-establish itself. Not all of them permitted of the successful exercising of the family case work techniques.

Common to most situations was the fact that the wife left her husband in the first instance. Circumstances of the disruptions varied greatly in the six other situations in which the woman took leave of their husbands.

Mrs. R.R. came to the bureau at the end of a day in which she had been sent from one agency to another. The strain had increased with each successive referral. By the time she met the family case worker, the fear of an aroused husband who had been violently angry with her at the beginning of the day had reached major proportions. Now, afraid to return home, she was further conflicted by her concern for two little girls of pre-school age whom she had left with Mr. R.R.

Another woman came to the agency because she no longer felt that she could tolerate her husband whose natural instability had been intensified as a result of the rigours of overseas war service. Mrs. M.M. like Mrs. J.J. had an unusual affection for her husband

that made her miserable over her desertion. Unlike Mrs. J.J., she herself was immature and the task of revitalizing her married life was correspondingly difficult.

Less pathetic was the case of Mrs. S.S. She became "so bored with her surroundings" in an isolated section of the Province where her husband's employment took her, that she started to drink and after an orgy of some weeks, left her husband, bringing her two children with her to the city.

In this case it was the husband who wanted to save the marriage and so followed his wife to the city. Another young wife, Mrs. O.O., returned, supposedly on holiday, to her parental home in a prairie city. Apparently her widowed mother was jealous of the daughter's supposed married happiness, took over her thinking and spoke so convincingly against the son-in-law that Mrs. O.O. decided not to return to him.

Mrs. O.O. then consulted a lawyer, who on her behalf, wrote to Mr. O.O. advising that suit would be brought for judicial separation. After Mr. O.O. had proved to the satisfaction of this lawyer that his wife had no grounds for lawsuit and after she had remained with her mother for a considerable time she suddenly decided to come back to him.

Mrs. Q.Q. came to the family agency after first seeking at a children's agency placement for her little boy and girl, both of them, of pre-school age. The children, she complained, were "getting on her nerves," and the noise which they made around the home was preventing Mr. Q.Q., a student veteran, from studying. Although Mrs. Q.Q. accepted referral from the children's agency to the Family Welfare Bureau in order that she might be helped with her problems,

she did not give up her plan of placing the children. She agreed that some people were "born mothers" but she was not one of these. She preferred to work and run a large house which she and Mr. Q.Q. had bought as a boarding place for university students. Although she stated that Mr. Q.Q. was agreeable to placement she blocked all agency attempts to see her husband.

Before a plan could be made she placed the children privately. As the boarding home was found satisfactory, the children's agency licensed it. Mrs. Q.Q. then went to work. She avoided all agency contact. Because she did not want case work service it was arranged that the family agency would withdraw from the situation and the children's agency enter for the protection of the children. There had not been time to effect transfer before Mr. Q.Q. came to the family agency. He and his wife had separated, sold their house and divided the proceeds of sale. Although seemingly intelligent and more stable than the wife, Mr. Q.Q. lacked the aggressiveness to recover his situation. He described his wife as "jealous, hysterical and a wishful thinker" and said that they had separated after a quarrel about money.

The advice of the psychiatric consultant was sought. He reported that Mrs. Q.Q. was unlikely to mature emotionally and that adoption would be best for the children.

The Q.Qs' "arranged" a divorce. Mr. Q.Q. gained custody of the children. Apparently the psychiatric opinion was not consulted in this award; and because court action was taken independent of the children's agency, no immediate steps could be taken toward placement of children. Not long after the divorce, Mrs. Q.Q. returned from a city to which, she stated, she had gone to take treatment for a

glandular disorder. A short time later the Q.Qs' decided to try living together again, apparently in common-law relationship.

Just as unusual was the situation of Mrs. N.N. a young girl who had left her husband charging cruelty and inadequate support. She had married as a minor without parental consent. When she sought help at the family agency she wanted her marriage to be annulled. Later, however, when she thought herself to be pregnant, she reversed her stand and, while she did not return to her husband, she, at least, accepted the marital status for what advantage it might give her. She proceeded to the domestic relations court where she laid a charge of non-support against her husband.

Mrs. W.W., a British war bride, had no choice other than to leave her husband, having been literally "kicked out" by him. Immediate causes of this violence had been disagreement over the disciplining of the children and the wife's expressed desire to return to England so that she might see her ageing parents before they died. The worker was able to talk with the husband who, when he discussed his difficulties, realized that he was being unreasonable about the disciplining of the children. He began to see, too, that his jealousy of the wife's parents was blinding him to the fact that the woman did not wish to leave him permanently.

Two other marriages give examples of the husband deserting his family. There were constant flare-ups between Mr. and Mrs. M.M. These conflagrations first had been touched off over a year ago about a month after the death of an infant daughter. Thereafter, Mr. M.M. had been prone to go off and drink with a man friend. Returning home in a state of intoxication, he would quarrel violently with his wife. Several times he left her for short periods after these quarrels. It might have been assumed that loss of the child

set off these escapist actions. But, on the contrary, with the birth of a son, the marital situation deteriorated even more.

Mr. P.P. was of an unstable nature and often drank to excess. Mrs. P.P. alleged that he had entered into extra-marital relations, and this allegation had been the cause of more than one quarrel. After one such battle two days before, Mr. P.P. had left Mrs. P.P. When the wife came to the agency she was overwrought. She did not appear to be a very profound person but she was desirous of having a home and obviously was very fond of her husband. It was to please him, she said, that she had borne him a child. On his side, realizing his own limitations, he had thought that a child would help to steady him.

Examination of the backgrounds of these cases is helpful in understanding the dynamic forces that led to the situations here described.

Family Background, Family Histories

In most of these ten families the recorded data on family background is not so plentiful as it was for the J.Js'. It is clear, however, that most of these marital partners had known uneven family life. At least three of the husbands had come from homes broken by separation or divorce. Desertion marred the early life of at least two of the other men.

This was noticeably so in the case of the unstable veteran who had been a prisoner of war. Three of the wives had grown up in a similar family context.

Apparently few of these people had grown up in homes with economic advantages. There is frequent mention in the records of financial difficulties in the homes of these partners.

Cultural and Social Factors

It is of some consequence, perhaps that in terms of racial extraction this was the least homogenous of the groups of families studied. In seven of the marriages, both partners were of Anglo-Saxon or Celtic origin.

Mr. P.P. was of Russian descent, his wife of French origin. Mr. R.R. was of French-Canadian origin. Mrs. R.R. came from a Polish community in Canada. The cultural traits of both influenced the course of the marital life. Mrs. N.N. was of Canadian-Indian blood, her husband a Canadian.

In only four cases was the religion noted. This failure to obtain "face sheet information" which affects the acceptance of referral in a city that supports, non-sectarian, Jewish, and Catholic family agencies is perhaps less understandable than other omissions in recording. There is no certainty as to the religious affiliation of those for whom this factor was not recorded.

In three of the four families for whom religion was noted, it was Protestant. Only one couple specified the denomination. Mr. P.P. was a non-practicing Catholic. Religion for him, as for the others, seemed to have little meaning.

Most of these people hailed from the city. Two of the wives were raised in prairie farms. The difference in kind of surroundings and the effect on the principals has already been noted in discussing the J.Js'. The contrary influences of urban and rural environment were not so clearly evident in the marriage of the veteran whose instability had worsened with incarceration as a prisoner of war.

These are some of the influences that moulded these men and women. More specific personal data amplifies the understanding of

them as marital partners and parents.

The Marriage Partners, Ages

With the exception of the R.Rs' there were no significant differences between ages of men and their wives. Mr. R.R. was thirteen years his wife's senior. This disparity was an important factor in the problems of the R.Rs'.

The age range was wide, however; for men it varied from twenty-four to forty years; for women from sixteen to thirty-five.

Obviously, most of these ten cases represented the earlier years of the marriage between young people.

Education

Educational achievements were recorded for both partners in two cases. In four others the school attainments of the men were given, in two others those of the women. Education varied from grade eight to university credits for the men, and from grade nine to registered nurse for the women.

Higher education militated against the success of one marriage; in another it was a strength. Mr. Q.Qs' absorption in university study which was not easy for him, contributed to the disruption of his marriage. Mrs. D.D. through her nurses' training, and through the natural aptitude which fitted her for that vocation, was able to gain insight into the marital problem which helped her in her determination to save her marriage.

Occupation and Employment

Work histories mostly were erratic showing the least constancy and consistency of all the groups of families studied.

Six of the husbands had been on active service, three of them overseas. Unquestionably the overseas experience of two men

adversely influenced their employability. The war had interrupted Mr. J.J.'s schooling which, had it been carried further, might have mitigated, in some measure, the basic weaknesses of his personality. The experience of battle would have been a further upsetting influence on him. Harsh detention in prisoner-of-war encampment did nothing to improve the personality of Mr. M.M.

Occupations were listed for nine of the men. There were no skilled trades. Only three men, the veterans who did not want his war bride to return to England, and the two business proprietors had been steadily employed before coming to the agency. Both proprietors left their businesses and took supervised jobs.

For the women, only three were listed as having occupations. Two of them had to work at sometime during the period of agency service. Mrs. D.D. the qualified nurse was the only skilled worker.

Mobility

Rate of geographic mobility did not correspond with the high occupational mobility as might have been expected. The East-West migration represented in four marriages and overseas service were the greatest factors in mobility.

Health

The general physical health of this selection of families was somewhat better than that of the families in the other groups. In two marriages both husband and wife enjoyed good health; four other men were apparently physically sound. Where physical ailments were present they had an important bearing on the marital problems. A seriously disabling hearing condition reduced the employability of Mr. S.S. The pressure of the defect at once complicated and simplified his marital problem. While it did reduce his employability

making the source of family income uncertain, at the same time it also precluded acceptance of job in isolated areas and so eliminated a grievance of his wife.

Leukorrhea intensified the sexual difficulty of Mrs. J.J. and added to the difficulties in effecting an adjustment to her abnormality which would help in the solution of her conflict with Mr. J.J. Mrs. P.P., too, had a serious physical handicap which struck at the very core of sexual relationship with Mr. P.P. Because of a grave heart condition she could not have more children.

The history of miscarriage and gynaecological infections may have accounted, in some measure, for Mrs. Q.Q.'s unusual behaviour.

The young girl who wanted her marriage annulled assented that she had contracted a specific infection from her husband. Laboratory tests did not bear her out in this statement. Neither was it certain that she was pregnant when she instituted legal action against her husband for support.

As in this case, emotional health in most families was not good. Immaturity and instability often were present although, perhaps, they could not have been diagnosed as ailments. Mr. M.M., after his experience as a prisoner-of-war had been diagnosed by service medical officers as psycho-neurotic.

With the exception of Mr. J.J. who was judged psychopathic by two different authorities, there were no recognized mental illnesses or deficiencies.

There is cause for wondering what kind of marriages people with these backgrounds could make.

The Marriages

Although there is relatively little detail recorded about the

marriages, the information that is available is important from the points of view of both family case worker and research worker.

Circumstances of The Marriages

Little is known about preparation for marriage. In only one case was the length of pre-marital acquaintance recorded. The young girl who sought an annulment knew her husband for only one month before marrying him. It is interesting to note that in two of the most difficult cases the woman had been previously married and divorced. Mrs. T.T. had divorced her first husband after eight years of marriage, and one year before marrying Mr. T.T. There were no children by the first marriage which had been dissolved by mutual consent of both partners. The wife who left her husband because she could not tolerate her surroundings had been twice married. The first marriage terminated by divorce, left her with the responsibility of caring for a five-year-old son. She frankly admitted that she married the second time under the stress of achieving economic security.

Among the nine marriages for which duration was recorded, only two couples had been married more than five years. Both these had been married seven years. Six marriages had not passed their fourth year.

Economic and Social Factors

In nearly all these marriages there were financial difficulties. These seemed to be the results of the disturbed lives of the client more than the cause of any marital conflicts. Two of the husbands were without employment when they came into the agency.

Two of the men had their own businesses. Mr. R.R. was in partnership, but had to withdraw because of his gambling and drinking detracting from his efficiency. The war-scarred veteran who was so

unstable supplemented proceeds from a small neighbourhood business with a sizeable military disability pension. None of the families were in affluence at time of agency contact. Five of the families owned homes, most of them in respectable districts. The veteran who operated the neighbourhood store owned the premises. His family occupied quarters at the rear. Rented accommodation comprised various types of suites. There were no rented homes.

The location of housing in this group would suggest generally better than average social status. In more than one file neighbourhood approval of the family is recorded..

The Children

There were in these families thirteen children: eight boys and three girls. Ages ranged from a few days to seven years. Only one child, son of a first marriage (Mrs. S.S., the woman who was bored with her surroundings) was over five years. The vacillations of parents with successive partings and reconciliations might be thought very harmful to children in this age range. Yet there are no behaviour deviations recorded for this group of children, despite the fact that in at least three situations disciplining of the children was a matter of argument. On the basis of the information contained in these files it would be unwise to draw any conclusions about the effects of the marital dis-harmony on the development of these children other than to say, that no deviant behaviour was manifest during the period of agency service.

The gravity of the problems encountered by these families as seen in terms of family and personal backgrounds, and of the marriages themselves, indicates the need for very skilled use of case work principles in treatment.

TREATMENT, The Client

It is evident from these wide-ranging examples that emotional instability in one, or both, of the partners is very commonly a basic cause of disruption. On the other hand, some innate strength in one of the partners, and strong feelings of affection may operate to bring about rapprochement. Although, in these cases, it was most frequently the wife who left the husband in the first instance, often she was the stronger partner. In effect, the apparent desertion often is apt to be more in the nature of a tactical retreat from the battle against the problem or problems threatening the marriage.

This retreat would be used for the purpose of reconnaissance, exploring the field in an effort to find resources that would aid the attack. Often at this stage the family case worker is brought in as an expert counsel on the best plan of attack. In contrast to the other groups of families already studied, the client, and usually the woman, become the spearhead of the attack, actively leading the family case work team. In some instances when this is not so, it is the misdirected activity of the woman, taking place as though in opposition to the case work team, that makes for difficulty in attempting to overcome the problem.

Mrs. J.J., Mrs. T.T., Mrs. P.P., and to a lesser degree Mrs. R.R. belonged to the first order. It will be remembered that Mrs. J.J. despite the psychopathy of her husband, and sexual handicap, determined that her marriage would be firmly established. Her intense feeling of fondness for Mr. J.J. was her best resource in achieving her objective. The family case worker helped her to express this feeling and to understand herself better so that she could direct her activity toward positive goals.

In a like manner, Mrs. T.T.'s worker helped this wife to release her feelings about her husband's faults in the seclusion of the interviewing office rather than to express her hostility to her husband at home. This acceptance of emotional outbursts of Mrs. T.T. by the worker enabled her to master herself well enough to accept help in understanding something of the reasons for Mr. T.T.'s drinking, and to realize the part her anger played in the bickering with her husband.

Similarly Mrs. P.P. was helped to give vent to her feelings about Mr. P.P.'s drinking and seeking illicit feminine companionship, to accept these failings in her spouse and at least to begin to understand the causes of these difficulties.

Despite the fear of Mr. R.R., Mrs. R.R. knew that her conscience would not let her escape the responsibility for her children, or long ignore her own feeling for Mr. R.R. Yet to save her marriage she knew that she must assert herself to her husband. The family case worker skilfully used the "supportive" technique of listening sympathetically and reassuring the client with the promise of help at time of future difficulty.

In this way, she communicated to Mrs. R.R. the strength necessary to discharge the responsibility of which she was afraid. Her position was not very different from that of Mrs. M.M. whose husband's natural instability had increased through the vigours of war service.

Undirected leadership functioning in opposition to, or apart from, the family case work teams, is represented in Mrs. Q.Q.; also in the young girl who at first sought annulment of her marriage. The actions of both could have wrought unsatisfactory effects not only for themselves but all those associated with them. Mrs. Q.Q.'s early action in placing the children privately was happier in its

effects on them than it might have been. Finding of foster homes, inspection and licensing of boarding homes for children, and the placement of children in foster homes and boarding homes generally require exercise of the best skills of the child care worker and the haphazard methods of placement such as Mrs. Q.Q. used may result in experiences harmful to the children. It is not possible to say whether the fact that this placement proved satisfactory was due to Mrs. Q.Q.'s understanding of children's needs or merely attributable to happy accident. Nor is it possible to gauge how Mrs. Q.Q.'s latest action in returning to live with her emotionally immature husband will have on either him or their children.

Less constructive than the actions of these women were the movements of the wife who left her husband because she was "bored with her surroundings," and the wife who returned to her prairie home, refusing to come back to her husband. The negative qualities of both husband and wife minimized the possibilities of successful resolution of the marital conflicts; and the staff members had to put forth great effort with little prospect of achieving success.

For good or for bad, the husband who "kicked out" his wife was the stronger partner of his marriage. His capacity for personal insight when his conflict was revealed to him in true perspective appeared a major factor in the improvement of his relations with his wife.

The Family Case Worker

To say that in many of these situations the client assumed leadership of the family case work team is not to minimize the importance of the role of the practitioner. The fact that the clients did assume leadership demanded very subtle use of family case work

techniques.

The visitor who worked with the J.Js', counselled Mrs. J.J. with adroitness that helped her to use her exceptional strengths for the rebuilding of her marriage.

The family case worker who helped Mrs. T.T., immediately conveyed a sense of the client's worth by showing her common courtesy. She made sure that when an appointment was made for a case work interview the time was convenient for Mrs. T.T. This simple act of viewing Mrs. T.T. as a real person doubtless helped to establish quickly the relationship between visitor and the client.¹ Sympathetic listening on the part of the worker helped Mrs. T.T. talk freely about the "flare-ups" between herself and her husband. The constructive response which the worker made to this narrative, showing Mrs. T.T. that her problem was understood, helped her to think about the difficulties so that she might renew her efforts to make her marriage worthwhile. In some cases the staff members were active beyond rendering supportive help or interpretation. For instance, the visitor who interviewed Mrs. R.R. wrote to an elder brother in one of the United States. The brother who had always been very fond of Mrs. R.R., on learning of her plight not only wrote encouragingly to her but forwarded to the family case worker data about Mrs. R.R.'s background, which was helpful in making a social diagnosis and which, was used in a personal history when the situation was presented in psychiatric consultation.

The visitor who helped the P.P.'s was even more active. She

1. This is more significant in the Family Welfare Bureau of Greater Vancouver, than it might be in some agencies elsewhere. Although the workers do see people by appointment, the routine is not so highly developed in some agencies where interviewing is almost exclusively by appointment.

made excellent referrals to other agencies in the community including maternity clinic, the public assistance agency when financial help was needed, and the day nursery when a work plan was being developed and arrangements had to be made for care of the child during the day.

Intensive discussion with the shattered war veteran and his wife helped them to meet their difficulties. Referral to veteran's hospital for additional treatment of the man's condition was also well handled. The account of one interview with this couple illustrates the tactfulness of the interested family case worker. When she called upon them she found them very shaky and miserable after a night of drinking. Accepting their condition without apparent surprise, she quietly withdrew promising to return at a more convenient time.

Even in those situations in which the clients undertook activity that seemed to work against their own interests and which made helping them difficult, family case work was performed with some benefit. Mrs. Q.Q. was not anxious for and apparently not capable of accepting agency help. Mr. Q.Q., on the other hand, sought assistance. Here was another instance of expert use of the telephone. Mr. Q.Q. frequently telephoned the worker who listened well and responded with timely comment. Thus she was able to interpret to him the need for a substitute home that would provide affection for his children and also was able to suggest the possibility of securing a boarding home where both he and the children could stay.

Sympathetic listening by a family worker helped Mrs. H.H. to express her feelings sufficiently, at least, to hinder impulsive action. Once again, there was evidence of professional caution not to give technical advice that is the province of another profession,

as she deferred to legal counsel the intricate matter of the validity of her marriage.

There was effective family case work in the instance of the young man whose wife returned to her prairie home. A good relationship was established between the worker and the man. The worker secured valuable co-operation from the social agency in the prairie center to which she wrote requesting that the wife be interviewed. On return of the wife to her husband, a joint interview was arranged by the family case worker which seemed to have a unifying effect on the couple.

Despite the instability of both the woman who could not tolerate living in an isolated area and her husband, the worker who saw them jointly helped to reduce the tension between them. Wanting them to express themselves fully she controlled the pace of the interview so that confusion would not become worse confounded.

That legal knowledge sometimes can be used well was seen in the case of the W.W.s', in which the husband did not want his war bride to take a trip to England. The family worker showed that she could interpret law in the abstract without depending on legal counsel which is required in situations involving litigation. Her explanation of guardianship rights to Mrs. W.W. was lucid and helpful to the woman in establishing her position in the marriage.

The Community

Discussion of these cases has indicated the use made of social resources within the community. Most resources were well used and usually adequate. Referrals from other social agencies were generally good. One referral was from a client of the Bureau. Mrs. W.W. was brought to the agency by Mrs. T. the wife of the disabled veteran

described in Chapter VI. The intelligence with which she made the referral undoubtedly helped the W.Ws' to cope with their problem.

Length of Treatment

None of the problems disturbing these families was treated on "a short term" basis. First, treatment was directed to meet the demands of the emergent situations presented at intake. Attempts to deal with basic needs of the clients followed. Periods of treatment were about as long as in the cases of the separated couples discussed in Chapter VI. Average length of agency contact was 205 days or 6.8 months, and the periods of treatment in individual cases varied from 99 days in the case of the T.Ts' to 520 days for the C.Cs'. Mr. and Mrs. J.J. were known to the agency for 410 days during their first period of contact and the second period of contact with the agency still active at time of examining the record, had entered the eighty-fourth day.

The case-o-graph in these cases generally presented a curious imbalance. On the left, or analysis, side of the case-chart, the recorded information tended to be clustered about Section II, Personal Adjustment, with the emphasis usually on the portion set aside for the woman. Data on Section I, Background, especially Family Background, was incomplete and scattered. Section III, Marriage, was heavily weighted under Marriage, Compatibility and Health.

On the treatment side of the chart, the Client and Service columns were much more required than that for Community.

This confirmation was in keeping with the cause of these

marriages and treatment of the problems affecting the families. There was a concentration on the problems associated with the marital adjustment, often to the exclusion or reduced emphasis on Background factors.

Significantly, under Marriage and Compatibility, the strong affection of the woman for the husband was repeatedly noted.

Most marriages were of comparatively recent date, with the partners being young people still on the lesser side of thirty years. Difficulties with children, unlike the other groupings, were not very evident.

What data there was indicated that the roots of the trouble in many marriages reach back into the marriages of the parents. Stability of family life, however, was far from unknown to some of these people.

The client, and usually the woman, took active leadership of the family case work team, or carried on activity that represented leadership in opposition to the case work team. The case worker was called upon to exercise the best supportive interpretative and social therapeutic techniques. While treatment was fairly effective, the quality of the problems in this group, being mostly emotional, re-emphasizes the necessity of psychiatrically-orientated training for case workers.

Once again the need is shown for a general education of people to meet the problems of social living and to build sound family life. The wealth of information on these problems committed to case records indicates that the family agency may well have a major part in promoting this education.

CHAPTER VIII
PARENT-CHILD RELATIONSHIPS
AND
CHILD DEVELOPMENT PROBLEMS

An unhappy home presents many obstacles to the successful development of children. This truth has been well illustrated in most of the cases discussed in the four chapters which precede this section. In "The Early Years" it was seen that even incipient family conflict may threaten the emotional security of children. This was shown in the four cases of parents who asked for placement of their children in foster homes. Because of the strained marital relationships these mothers and fathers felt unequal to the task of bringing up their children. The "Advanced Marital Conflict" in Chapter V further demonstrated how such difficulties increase over a long period. The couples whose time and attention is directed to marital problems can spare little thought for parental duties. As a consequence, quite unconsciously they may neglect their children. Worse still are the traumatic effects wrought on children by the dissolution of marriage, which, as outlined in Chapter VIII, manifest themselves in more extreme behaviour deviations, including "withdrawal", hysterical illness, excessive destructiveness, and temper tantrums. The influence on child development of the marital relationship involved in the separation of man and wife, followed by rapprochement (described in Chapter VII), was not clearly discernible.

The problems associated with the development of these seventy-two children might easily form the subject of this chapter. That fact is further evidence that many of the cases discussed in this

study could have been adequately considered under more than one head, and would have fitted easily into several of the groupings into which the total case sample was divided.

To make for clarity, however, a wholly different set of examples has been chosen for study in this chapter. Fourteen cases, with twenty-eight children, have been selected for attention. The children, nineteen boys and nine girls, ranged in ages from birth to sixteen years. Of the boys, eight were of pre-school age, nine between six and twelve, and two adolescent. Of the girls, five were of pre-school age, two between six and twelve years, and three adolescent. Naturally, the difficulties of these boys and girls like their ages, cover a wide variety of developmental problems.

DESCRIPTION OF PROBLEMS

In Chapter V the Atherton family was described, and also depicted in demonstration of the use that might be made of the case chart. It will be recalled that Sonny, the three-year old son of the Athertons, exhibited such rampant destructive tendencies that, not only was he a social pariah, but his parents had lost status in the neighbourhood because of his anti-social acts. Miss West, the district visitor, over a long period of treatment, was able to help the Athertons see in what way they themselves were responsible for Sonny's misdemeanors. The intelligence of the parents and their capacity for emotional flexibility helped them to gain insight into their part in their child's difficulties, and they were able to make good use of the case work relationship with a visitor who was sympathetic, perspicacious, and able to communicate some of her own personal strength to them. The happy result of this relationship was the Athertons' increased understanding of Sonny's problem as

their own. As a consequence, Mr. Atherton gave more attention to his wife, became more active in their home, and both the father and mother devoted more attention and affection to Sonny. The boy in his turn, began to disobey his parents less frequently than had been his wont. In time his anti-social behaviour became modified to the extent that a neighbour invited Sonny to join in play with his own boy.

Disobedience and destructiveness were not uncommon in these children. Five-year-old Jerry Casell persistently disobeyed his parents. In and out of their home he destroyed property. Mrs. Casell seemed incapable of controlling him; nor could she deal with his tendency to shed his clothes in public or to use of "filthy language." Jerry could get along with his playmates no better than with adults. In conflict even with himself, he was highly nervous and slept poorly. A tonsilectomy seemed to heighten his nervousness. His singular gift was a talent for music.

Fifteen year old Frank Voreau seemed completely out-of-hand. His mother showed little aptitude for dealing with a "wildness" that took the form of stealing in company with other boys. Her remedy of harsh physical punishment stimulated resentment in Frank. Aside from the companionship, it offered with other boys, which was very satisfying to his gregarious nature, school was as difficult as home for him, because of his limited intelligence.

Mrs. Smith complained that sixteen year old Naomi was "defiant", and disrupting the household. Interviews with Naomi revealed that to the normal conflict of adolescence was added confusion over the circumstances of her birth and her place in a family that included the fifteen-year-old girl and twelve-year-old boy of her step-father.

Jackie MacDonald, aged nine and-a-half years, was a good-looking little boy, strong, erect, and constantly active. But at home he was stubborn and frequently ran away. Mrs. MacDonald used deprivation as a means of punishment. At school, Jackie, although of average intelligence, was scarcely less happy than at home. He liked his school mates, but hated his teachers. There was a tired look about him, ill-suited to such a little boy. He found it difficult to express himself. Although he could not understand the implication of the common-law relationship in which his mother lived, he had begun to wonder if Mr. MacDonald were his "real father".

Other overt behaviour problems showed themselves among these children. Eight-year-old Billy Hughes, small for his age, in fact the shortest in his class at school, was domineering and "mean" to the smaller children who came under his influence. He had never been strong physically. As a baby, he presented feeding difficulties, and then in succession, he experienced tonsilectomy, colitis, appendectomy, mumps, measles, and whooping cough. Having received such extra attention as chronic illness requires, he openly resented any favour to his five year old brother, Alfred, who was "mischievous", but "loveable".

Mrs. Davison came to the Bureau, asking for help in dealing with seven-year-old Andy, who, she complained, was sadistic and prone to inflict injury on Max, his five-year-old brother. She mentioned Andy's defective vision as a possible contributing factor to the aberrant behaviour. The case worker soon perceived that the real problem lay with Max, who was given to stealing, lying and bullying, head-banging, and generally erratic behaviour. That he was obviously Mrs. Davison's favorite made social treatment difficult.

Alan, seven-year old son of Mrs. Tanner, was allegedly misbehaving, being found in the acts of stealing, lying, and truancy. His conduct was what might be expected of a child who had been illegitimate, subject to the discipline of many relatives, taken into a family in which the mother promised that he would not become a financial responsibility of the stepfather. The birth of a son to this marriage further increased Alan's insecurity.

Frequently deviant behaviour takes a more subtle form. Seven-year-old Larry Ball, for example, was almost consistently selfish, especially with respect to Harry, aged five, and Jesse, aged three years, his half-brothers, the issue of Mr. Ball's second marriage. The younger boys gave expression to their unhappiness through reversion to infantile behaviour. Harry was docile and unable to associate freely with other children; Jesse had returned to the stage of fecal soiling and excessive dirtiness. Harry and Jesse both suffered from the physical handicap of crossed eyes. Larry and Jesse were continuously battling each other.

The Edwards were facing a similar problem. Two-year-old Isabel was possessed of an abnormal appetite for food. Not only was she still not toilet-trained, but she displayed abnormal interests in the bodily processes of elimination.

Mental abnormality posed a problem for the Yorks. Harold, their fourteen year old son by Mr. York's first marriage, which was ended by the death of his first wife, was mentally dull and had to be placed in a special class at school. The second Mrs. York had not been aware of this at the time of her marriage to Harold's father. For a time the difficulty which Mrs. York encountered as she tried to cope with this unpleasant surprise presented a serious

threat to the marriage.

At the other extreme, the White family possessed a superabundance of intelligence. The father was rated in the "exceptionally bright group of intelligence", and the mother was highly intelligent. Four year old Annette who responded to IQ tests as "very superior", was given to telling lies and persistent day-dreaming. A thyroid condition contributed to a high degree of activity. The real problem child, however, was her eight-year-old brother Danny, who was rated in the "near-genius" group. His relationships with his family and with the school were poor. He exhibited negative qualities, being lazy and withdrawing. He resented the birth of his sister, and rivalry ran high between the two children.

The unsalutary effects on children of poor family relationships are at times more clearly evident than in the above examples. The Stewart and the Mellon family situation confirm this observation. Mr. and Mrs. Stewart, with one baby boy of twelve months of age, had a second child. They were fond of the elder child, but feeling the burden of the support of a second child, tended to reject him, applying for adoption placement of the new-born. The Mellon children were subjected to poor fortune of a different character. A marital quarrel of many years' duration finally culminated in Mrs. Mellon's taking leave of her family. Mr. Mellon was left with the job of caring for three children, Charles aged 11 years, Carol aged 9, and Bobby aged 8. Charles seemed to take hold very well, accepting much of the responsibility for his sister and brother; but the younger children both presented a challenge to any adult. Carol behaved negatively, expressing hostility towards most people, stammering, having enuresis, and failing in school. Bobby reacted

to two serious personal handicaps, of deafness in one ear and blindness in one eye, by withdrawing from the company of others to live alone in a dream world.

The Parents

Brief though these descriptions of child developmental difficulties are, they do indicate the important role played by mothers and fathers in the creation of the parent-child relationship which so greatly influences the growth of children. Some details of family and personal backgrounds will, therefore, help in understanding the difficulties of these children.

Deviations from the accepted norm of family life varied from poor adjustment of the youngest child in a large family, to a major breakdown eventuating in divorce. It has already been pointed out how the worker on the case used the knowledge that Mrs. Atherton had an unusually close attachment to a brother many years her senior. Not only was this considered in making her diagnosis, but it was helpful in interpretation to Mr. Atherton so that he might better understand his wife and so, make her lot easier. This in turn would relieve the tension experienced by Sonny. Although Mr. Atherton's father had exhibited instability, he also had sufficient skill and strength of character to build a home that would give his children a good deal of satisfaction as they grew. These positive elements, along with Mr. Atherton's good intelligence provided strengths for the worker to use in her treatment plan. A similar quality entered the background of Mrs. Tanner who was an unwed mother before her marriage. The record emphasizes that Mrs. Tanner was a "spoiled" youngest child of a sizeable family. While there is nothing specific to be found in the files, there are indications that Mrs. Tanner's

mother was not a strong figure. These two facts doubtless entered into the instability which contributed not only to the illegitimacy but also the indecision she showed as to what she should do about placement of Alan. Successive placements with various members of her large family created in the child a basic feeling of insecurity in that he had no idea of his right place in the world. Like Mr. Atherton, Mr. Tanner had experienced a good family relationship. This history plus a natural strength of character enabled him, with the aid of social case workers who could help relieve the pressures excited by his wife's instability, to meet the deep needs of his marriage.

The Athertons and Tanners had known happier childhood than the other parents. Relationships between grandparents of these children had been severely strained in at least three instances. Mrs. Ball who brought to the agency her concern over the regressive behaviour of her children had a neurotic mother who did not get along with her husband. She had preferred to leave home at an early age rather than to live in the midst of conflict. As a result she herself had not enjoyed the opportunity for normal emotional development. Her arrested growth doubtless affected the course of her own marriage.

Neither of the Mellons had grown up in a healthy environment. Mr. Mellon was known to have been spoiled and overprotected by his parents. Mrs. Mellon's mother had left the father and had led such a loose life that she was suspected of being a prostitute. With such backgrounds it is hardly to be wondered that the Mellons could not form a happy marital relationship. Nor is it surprising that Mrs. Mellon was such a poor mother that the treatment plan for this situation encompassed the eventual complete withdrawal of the mother from

the family. The wonder is that Mr. Mellon was able with the supportive work of the case worker and the practical help offered by home maker service to build a life for his children in which they had an even chance of passing successfully through the stages to emotional maturity.

The Cassells had no more enviable background than the Mellons. It is hinted that Mr. Cassell's parents had a very poor relationship and Mrs. Cassell spoke of her unhappy childhood dominated by a strong-willed mother of whom she was still terrified. This mother had played no small part in the stimulation of Jerry's disobedience and destructiveness. She had looked after Jerry for three years during the war while Mrs. Mullan worked in a munitions plant.

The insecurity of Isabel Edwards, which she expressed in over-eating, was probably related to the insecurity of her father. Mr. Edwards' parents separated while he was very young and they were later divorced. His mother and a sister appeared to be mentally dull. His father, a city official, although apparently successful in certain areas was incapable of being a parent.

Mrs. Edwards was another person whose parents had been incompetent. As a child she had become known to a children's agency because, it was alleged, her mother and father neglected her.

Death of parents during the childhood of some of these mothers and fathers worked extreme hardships on them. For example, Mrs. MacDonald whose son Jackie had never been sure of the circumstances of his birth, had not herself known her mother. She had been orphaned while yet of tender years. Both the Stewarts experienced deprived childhoods through deaths of parents. Mr. Stewart, at the age of 12 years, when his mother died, had to take over the care of three

brothers. The mother of Mrs. Stewart died at the age of thirty-nine. Her father remarried. Mrs. Stewart's relationship with her stepmother was unhappy.

Most of the marital partners came of homes of lower economic strata. Mr. Hughes was alone in having known family wealth. His family occupied high social status in a larger metropolis before the loss of their fortunes. They never recovered from the shock of this catastrophe as they could not adjust to their new social position.

Cultural and Social Factors.

With only few exceptions it was a homogenous group from the point of view of nationality and ethnic background. Nearly all partners were Canadian-born. Most of these families were of Anglo-Saxon or Celtic origin. Two wives were of Slavic races. One husband and one wife apparently were part Canadian-Indian. In at least one of these people, Mrs. Tanner, who was Slavic-born, either racial or immigrant influences seemed to bear on the course of the client's life. Part of Mrs. Tanner's problem in adjustment during the process of growing up was that of the whole family accommodating themselves as immigrants to Canada.

So far as could be determined all partners but one of the men who grew up in a semi-rural area, were urban-bred.

In only five situations was the denomination recorded. Religious affiliations included United Church, Catholic, Church of England and Lutheran. But, in general, religion in this group, as in the others examined, also appeared largely to be a minor consideration. In only two of the eight cases for which it is recorded did it seem to have played a part in the dynamics of growth and marriage.

Both of these situations involved change of religion, one from Protestant to Catholic, and one from Catholic to Protestant.

Personal Adjustment Factors

To understand the qualities of the parent-child relationships, the background factors will have to be considered together with the personal attributes of these mothers and fathers. It will be apparent at once that physical and mental failings are of significance.

The parents in this group belong to higher age range than the other families studied. In the eleven families for which this factor is recorded, the age ranged for men from twenty-six to thirty-eight years, and for the women from twenty-five to thirty-five.

Considering the age range, the physical health of these parents was relatively good. In four families no somatic disorders were recorded. In five other families, the fathers were in good health. Ailments of the fathers included: generally impaired health, severe influenza at time of intake, tuberculosis of the kidneys and debility following excision of a pollioidai cyst. Three of the mothers suffered from gynaecological disfunctions and disorders associated with pregnancy. Pregnancy of three of the other mothers during the period of agency contact intensified the marital strain which was adversely affecting the development of the children. In addition to these frailties there were mothers suffering from dermatitis and ulcerous foot, eye, ear and throat trouble, and thyroid difficulty.

Physical disabilities when present nearly always affected the family relationships. It will be recalled that the respective physical difficulties of both Mr. and Mrs. Atherton influenced their situation. The indifferent health of Mr. Atherton which made

him subject to colds and influenza, contributed to his passivity. This negative attitude inhibited a relationship in which the wife required more than the usual support from her husband in fulfilling the parental role. Mrs. Atherton's uneasiness in marriage was further increased by her fear of pregnancy following the experiencing of two miscarriages.

The hypochondria of Mrs. Cassell was intensified through the actuality of eye, ear and throat ailments. Thus was fed the narcissism which resulted in her rejection of Jerry. Gynaecological disorders were part of a cluster of personality observations which made it impossible for Mrs. Mullan to be a real mother. The marital relationship of the Edwards which had never become firmly established was completely shaken by the refusal of Mrs. Edwards to live with her husband because of his tuberculous condition. The mental dullness of this woman made it impossible for her to bring up a child by herself. Mrs. York as she recovered from a thyroidectomy was able to assume a reassured attitude that, with the support of the case worker, helped her meet the problem of dealing with mental retardation of Harold.

The mental backwardness of Harold, of Mr. York himself and of Mrs. Edwards, constituted all the mental health problems of these fourteen families.

Although the emotional instability of most of these marital problems was abundantly evident, actual emotional illness was specified in only five of these cases. The hysteria symptoms of Mrs. Mullan have been noted. The violent temper of Mr. Hughes was diagnosed by psychiatrists as a symptom of a personality disorder.

which made it unusually difficult for this man to adjust to civilian life, after military service. Mr. Edwards in contracting tuberculosis suffered doubly. Psychiatrists early described him as having "an inadequate personality" indicating that it was doubtful that he could meet even the ordinary demands of life. The home atmosphere that the Stewarts might provide for their two infants can be best judged from the diagnosis of both parents as possible psychoneurotics.

Few achievements could be expected of people so ill-equipped as were most of these; and the educational attainments, occupational and employment histories of this group of parents hardly betrays this expectation.

In the five cases for which educational status was recorded, the lowest passed grade was seven, the highest attainment senior matriculation. The infrequent recording of this factor is in itself significant as obviously the attainment must have been insufficient to operate positively in the family relationship. School achievement when recorded had significance. One indication of Mrs. Atherton's mental capacity could be that she had completed one-half of her senior matriculation. Although Mr. Atherton had only an eighth grade formal education, his intellectual abilities obviously exceeded that range for he took night school courses in refrigeration and lumber-grading. Successful completion of these courses require ability beyond that needed to finish elementary school. The high intelligence of Mr. White, which has been observed as an important element in his family situation, could be seen from his attainment of senior matriculation at the early age of fifteen years.

Occupational status and employment histories of these cases

were generally commensurate with educational achievement. Only six of the men had "skilled" trades. There were only two clerical workers in this number: Mr. White was one of these exceptions, filling a position of considerable responsibility.

Among the "unskilled" workers it is interesting to note that Mr. Atherton compensated for his sparse education by the full exercise of his mental ability which brought him to a supervisory position in a construction industry. The steadiness with which he applied himself for a number of years in one occupation was in sharp contrast with the actions of other unskilled labourers who frequently changed occupations.

Military service absorbed several employment years of five of the men. In all these cases it seemed strongly to influence the later work history and the relationships of these men with their families. Problems of past-discharge re-adjustment to civilian life complicated the existence of Mr. Edwards who was deemed to have "an inadequate personality" even before he enlisted. Army life certainly did not benefit Mr. Stewart who was considered as possibly psycho-neurotic. Nor did a term in Auxiliary service make things easier for his wife whose emotional condition had been similarly diagnosed. Even a good service record seemed to work against the satisfactory solution of one family situation. Mr. White was so successful in putting his gifts to good use in the army, that he decided to join the permanent force. The result of this decision was largely an escape from family obligation rationalized as the acceptance of national duty.

A good deal of geographical mobility might perhaps have been anticipated. But despite a strong prevalence of neurotic tendencies

in these families and a conspicuous lack of achievement in education and occupation. This type of mobility was practically negligible.

The Marriages.

Descriptions of the parents in this group of families frequently suggest that they were ill-equipped for marriage. Attention to some of the details of the marriage will show the validity of the judgement.

Circumstances of Marriage.

There is little evidence in these cases that there was much thoughtful preparation for wedded life. Specific information is recorded for only two marriages which were "forced" through illegitimate pregnancy. Preparation of a kind may be said to have taken place for the three parents who had been previously wed.

One possible sign of the thoughtlessness with which these parents had entered marriage is the dearth of information about the nuptial ceremonies. Marriage before a Catholic Priest in one case is the only one, for obvious reasons, in which the client recalled this detail.

Despite the appearance of lack of preparation for family life, these marriages at the time of contact with the Bureau had lasted an average of 6.6 years in the twelve cases for which these facts were recorded. This relatively long term of marriage before partners sought help with their problems seems unfortunate. Such an extended interval permitted development of the troubles often to the point where treatment was extremely difficult.

Economic Conditions.

Frequently, financial stringency served to heighten the other strains in these families. In seven of the thirteen families for

which such data is available the economic condition was critical. The Davisons with a total of \$130 monthly income were the only family actually incapable of meeting financial obligations. The other six families suffered because of an inability to manage money, as a result of which they amassed debt which they could not substantially reduce.

The upper level of income for those who encountered no financial difficulty was probably well in excess of \$200 a month. Mr. York shrewdly avoided disclosing the amount of his earnings. Despite the supposed handicap of retarded intelligence he was able to purchase a comfortable home and to own and operate a handsome automobile.

Social and Living Conditions.

Four of these families owned homes; a fifth was purchasing. Among those who rented housing five families had cause to be dissatisfied because of crowded or other unsanitary conditions. One family, the Edwards, lost the advantage of good rented housing by the woman's poor home management. Mrs. Stewart on the other hand, did her best to compensate for the misery of a crowded three room tenement suite by keeping it spotlessly clean.

Little of the housing was so difficult as that of the Stewarts and most of these families were able to gain some enjoyment from the home setting in the neighbourhood contacts. The Hughes family alone is noted as lacking in opportunities for social activity and as particularly needing the facility for recreation together.

Treatment

It is clear from the above description of these mothers and fathers, both as parents and individuals, that their problems centered primarily around the intangible qualities of the family relationships

or ability to live together happily. The area of treatment, therefore, should have been delimited by the necessity of dealing primarily with the emotional difficulties of the parents rather than by environmental needs. Successful therapy would ideally result in reduction of emotional strain of the parents and, in turn, a lessening of the developmental difficulties of their children.

Efforts to accomplish such therapy took on the average 1.22 years, per case, exceeding that of any of the other groups studied in the preceding chapters. The extreme cases ^{ranged} ~~from~~ from fifty-three days to 3.8 years.

The Family Case Worker.

The depth of the personal problems besetting these parents necessitated that the family case worker assume unchallenged leadership of the case work team. The intensity of the problems required that the case workers make judicious and refined use of all the techniques indigenous to modern social case work. The staff members had often to gain the confidence of and help of clients, who, because of their backgrounds, found it difficult to participate in any sort of relationship. There had to be communication from worker to client in extraordinary degree, and a feeling of warmth and interest. The worker had to gauge to what extent the use of interpretation could be effective, when more expression of feeling might be forthcoming from the client. She had to know how to stimulate and to utilize the expression of emotion that best would relieve the inhibiting tensions in the family relationships.

How completely Miss West exercised her craft in helping the Athertons has been illustrated. It will be recalled that she helped Mr. Atherton to understand that Mrs. Atherton, because of

early influences in her own life had unusual dependency needs which made it necessary for him to give to his wife more than his normally passive attitude toward the home would predispose him to do.

The worker who helped the Balls could not use interpretation as did Miss West. The confusion of Mrs. Ball emanating from a childhood marred by marital disagreement between her parents and her own strong guilt feelings made it very necessary for her to "talk it out". The worker not only gave Mrs. Ball the opportunity to express herself but brought some orderliness to the treatment by insisting on regular scheduled interviews. Mrs. Ball was encouraged to talk about herself and her background. She carefully helped to arrange a case work interview for Mr. Ball. The opportunity for Mrs. Ball to talk about her difficulties, and the help extended to Mr. Ball in understanding his wife's difficulties eased the strain in the marriage. This done, it was a matter of time before the children would begin to grow out of the infant behaviour to which in their feelings of insecurity they had regressed. One cannot help wonder why the worker did not seek help from the psychiatric consultant in her social planning as use of this facility could have given her a better understanding of the dynamics in this situation. The consultant is available at least once in two weeks.

The Cassells had a deeply-rooted marital problem. Because they lacked capacity for personal insight, the family case worker did not attempt to treat the marital problem but, instead, concentrated on helping the parents deal with Jerry's behaviour problems through discussion of parental attitudes toward the child and by enlisting the aid of some community resources. Direction to a nursery school for Jerry and mothers' club for Mrs. Cassell, brought at least a partial modification of Jerry's behaviour.

The family worker who was assigned to help Mrs. Vereau and Frank faced a similar problem to that posed in the Cassell household as Mrs. Vereau completely lacked capacity for insight. The therapist concentrated on work with Frank, dissociating herself from the mother. She was able to help ease the school situation by a masterful example of interpretation to the seemingly ultra-conservative and intolerant teacher who had Frank's class.

Unlike Mrs. Vereau, Mrs. Smith had some awareness of her part in Naomi's difficulties. The worker in this situation was able to help Mrs. Smith to some understanding of her own past, especially as it related to Naomi's present trouble. The same worker saw Naomi separately affording her the opportunities to vent her feelings about her mother and helping her to gain understanding of her mother.

Two workers were assigned to the White family. While a woman staff member endeavored to help the parents, especially the father, to discuss feelings and to understand Danny, Mr. Andrews another man worker helped the boy. He identified with Danny, thus helping him to counteract his inclination to withdraw from social contact. He captured much of the lad's feeling about his home, and the new understanding enabled the parents' worker to show the Whites how they might help their son. Although the efficacy of direct work with young children is often questioned. The "near genius" rating of intelligence of Danny made such a course very worthwhile.

Another good example of helping parents with a young child was the York case. Here the worker was able to encourage Mrs. York to persist in the task which she had undertaken. She interpreted Harold's limitations to Mrs. York, and to the school which had

excellent special teaching facilities. Additional evidence of what help can be rendered with young children was furnished by the Tanner case. Despite the disadvantage of several changes of workers, Mrs. Tanner was helped through agency contact to resolve her feelings about the illegitimacy of Alan. She was enabled to make plans for him which lessened his basic sense of insecurity. The settlement with the putative father of the maintenance question so eased the relationship of Mrs. Tanner with her husband as to enhance the quality of the marriage, improving the atmosphere of the home both for Alan and the child which was yet to be born into this family.

The Mellon children all derived benefit from agency services. Their family case worker helped Mr. Mellon establish eligibility for visiting homemaker service and offered the practical help of budgetting service. With the immediate pressures of household management relieved, and with a mounting confidence in the worker, Mr. Mellon could express his feelings regarding the seeming futility of his marriage. The case worker also helped Mrs. Mellon to accept the fact that the home was better without her and to direct her energies into channels that would satisfactorily absorb her artistic talents. This family has been helped to reconstitute itself through family agency services and through referral to other community resources. The facilities of health agencies were particularly necessary for the physical improvement of Carol and for the mitigation of the handicaps suffered by Bobby. Although at the time this case was reviewed it was still active after 1325 days of contact with the family agency, the condition of the family as a whole, and of each of its members, had improved and showed promise of continuing so to do.

Resources of the Community.

Frequent reference to agencies other than the Family Welfare Bureau in description of these cases has shown that the use of these resources as with the Mellon family, was hardly exceptional. In many of the situations community resources were used in the treatment of problems right from the beginning, for in eleven cases referral was made by a health or welfare agency. In most instances the welfare resources were used with positive values for case work treatment. Co-operation of the school authorities was of an unusually high order as witnessed in such cases as the Voreau and the Yorks. Public agencies generally provided a high quality of service. The co-operation of Provincial child welfare services played no small part in the helping of the Tanners. It was through these facilities that the settlement of maintenance for Alan was effected.

Psychiatric services, especially in the consultative phase, were lacking in effectiveness, the prime example being seen in the unusual Atherton situation. Miss West actually achieved her success with this family through going counter to the advice given by the psychiatric consultant!

Once again neighbourliness appears as a valuable community resource. The help of a neighbour in caring for Alan earned the physical strain for Mrs. Tanner just at the time when she was the most concerned about her plight.

The Client.

The activity of the client as the mate of the family case worker and community resources on the case work team has already been fairly well indicated. The capacity for emotional growth and personal insight of these parents ranged from the high depress exhibited by

to the
the Athertons, negligible quality possessed by Mrs. Voreau and Mrs. Edwards. Most of these parents found it easier to talk about the manifestations of the family relationship disfunction as they appeared in the developmental problems of their children, than to discuss the marital relationship itself. As a consequence, generally the outlook was not good for complete amelioration of these difficulties and a revitalization of the children in a healthy pattern of existence. The capacity of Mr. Mellon to accept and work for change, and the ability of his wife to withdraw from the family, albeit reluctantly, provided a pleasant exception to this generality.

The findings from the study of these fourteen families support conclusions drawn from research in the four other groups of cases and bring out additional propositions. The age range of this group was more advanced than the others. Yet the factors that contributed to disturbance of the family relationships were essentially the same. The proportion of marital partners who had experienced childhood made unhappy by strife between their own parents, by economic and emotional deprivation, was very high. Most of these people entered marriage ill-equipped emotionally for the acceptance of adult responsibility. Their emotional disturbances far exceeded, in seriousness, their mental and physical disability. Because of this rampant instability, it was difficult for them to withstand and recover from the trauma of physical injury and illness.

The educational qualifications and occupational status of these parents, being predominantly low, placed many of them in the lower socio-economic group. Financial stringency accordingly accentuated the emotional strains in these families. Yet in the six families

untroubled by pecuniary worries social case work did not seem more successful because of the greater opportunity to concentrate on the purely emotional problems.

To say the outlook for the successful development of these children in most situations was poor is not to say that their problems have not in some degree been modified. In only two cases could the situations be said to have deteriorated during the term of agency service.

In certain instances the facilities of the Family Welfare Bureau, such as visiting homemaker service, have been of inestimable value in treatment. The services of the other welfare agencies, the health agencies and the schools in the community usually proved extremely helpful.

There is increasing recognition that the child is profoundly affected by the relationships between himself and other children in the family, and the quality of the attachments and actions of his mother and father. The traditional views of physical neglect of children and of child delinquency as problems to be treated per se is being supplanted by the concepts of these ills as the manifestation of emotional problems rooted in the family. Study of such problems as portrayed in this group of families suggests the need for three-fold planning to meet the needs of people at this level. (1) The time seems overdue for development of psychiatrically oriented group-educational programmes to provide education and counsel for family living. It is necessary of course for these to assail the problems on a community-wide basis, and to promote the healthful growth of "normal" people who will have no need of psychiatric services. (2) Secondly, there is need of psychiatric

services with personnel competent to treat individuals requiring help with deep emotional difficulties, as well as to provide consultative facilities for case workers encountering involved personal problems in their work. The shortage of psychiatrists being what it is, the latter course is perhaps the most important in terms of provity. (3) Thirdly, the family agency, its work increasingly complicated by the necessity of treating intensively emotional difficulties of families and individuals, requires staff trained in understanding the dynamics of human behaviour and in putting this understanding to practical use.

CHAPTER IX

EFFECTIVENESS OF FAMILY CASE WORK

The family case work of the Family Welfare Bureau of Greater Vancouver has been well illustrated in the preceding chapters. In summarizing the findings in each group of cases and in drawing conclusions as to the effectiveness of case work, the standards of success used in this study should be kept in mind.

Criteria of Success

The basic principles of family case work as outlined in Chapter I and the elaboration of these principles in Chapter III, are taken as the criteria of achievement. Mary Richmond's classic definition of social case work as "those processes which develop personality through adjustments consciously effected between men and their environment" serves as a guide to any estimate of success of family case work. Likewise, the concern of both Heckman and Hunt in their experiments measuring the effectiveness of social case work, with the importance of easing tension in clients by helping them meet the problems of living so that they can continue to function in society, is accepted as a primary consideration in defining the aims and objectives of social case work. The success of family case work, it would seem, should be measured in terms of achievement in helping clients and families to deal with the social and personal problems of living, so that they will be able to carry on in "normal" society. The degree of success attending the case work efforts of the Family Welfare Bureau are here subjectively estimated in elementary terms: "ineffective", "neutral", "fair", and "good". There is no pretence of statistical exactitude in presenting this analysis.

Rather, the emphasis is on the narrative account, given in the light of professional knowledge, of what actually happened when family case work was applied in the fifty-eight cases under review.

Effectiveness Summary Charts

Charts I to V, inclusive, in this chapter are merely intended to serve as a guide in summarizing findings, group-by-group. Each chart suggests in what degree work in the group to which it pertains was effective. The charting of the part played by each of the three members comprising the family case work team is a continuation of the dissecting facility employed in the case-o-graph.

Positive (+) and negative (-) symbols are used in these summaries to represent the quality of efforts by each member of the family case work team. One positive sign is indicative of average efforts; a double positive sign suggests unusual efforts. In contrast to this minimal use of positive symbols, the negative signs are used freely to indicate observable defects in the social case work performance. While the emphasis is on the negative, this scheme would appear defensible inasmuch as the positive qualities of treatment have been quite fully described in the chapters on the groups of cases. The intention, here, however is to show, in a rudimentary fashion, the possible reason for success or failure of the case work process. The sequence of signs is not accidental. A positive symbol preceding a negative suggests that the strengths and weaknesses asserted themselves in this order and may give a key to the reason for the outcome of treatment; and vice versa. Blank spaces occur under "Client (M)" when the husband has not been seen during agency contact. Where it is known that the husband, although not seen, indirectly derived positive benefit, through

CHART I

SUMMARY - EFFECTIVENESS OF FAMILY CASE WORK

GROUP I A. THE EARLY YEARS

CASE:	CLIENT	WORKER AND AGENCY	COMMUNITY	EVALUATION
1	M: - W: -	+	-	Ineffective
2	M: - + W: -	+ +	+	Neutral
3	M: + W: +	+	+	Fair
4	M: - W: + +	+ +	+ +	"
5	M: - W: + -	+ +	+	"
6	M: + W: +	+ +	-	"
7	M: + + W: + +	+ +	+	Good
8	M: + + W: + +	+ +	+	"
9	M: - + W: -	+	+	"
10	M: + W: -	+ +		"

DEFECTS

(a) Client

Emotional immaturity
Mental deficiency
Inability to use
community resources

(b) Community

Housing shortage
Unemployment
Lack of understanding by doctor
Lack of co-operation from
other agencies
Poor referral
Ineffectual case conference
with children's agency.

work with the wife, and so was able to contribute to the betterment of the family situation, the positive symbol is used. Blanks are provided for recording the participation both man and wife and are so indicated. (M for man; W for wife) Omissions under "Community" may have one of two meanings. Either case work did not advance sufficiently to permit the use of social resources, or the treatment was carried on at the psychotherapeutic level without recourse to facilities outside of the client or the agency.

A query mark is occasionally used under "Evaluation" if prognosis was so difficult to estimate as to preclude the possibility of gauging the effectiveness of family case work.

The list of defects added to each chart, while not complete, encompasses the principal factors militating against success of the family case work.

The Early Years

Chart I summarizes the effectiveness of family case work in the cases described in Chapter IV, that is those relative to the early years of marriage of a relatively young group of people. The conclusion in that chapter that case work was generally effective in this group is supported by this composite analysis. It is significant that in the most successful cases and in the one unsuccessful case, the positive and negative qualities of client participation in the family case work team are so obvious. The best results occurred in treatment of the As' situation (Case 8, Chart I) and that of the Ps' (Case 2). Mr. and Mrs. A. were the overseas veteran and his English war bride who required housekeeping service. Their relative maturity, mutual affection, devotion to family and ambition to establish a home were outstanding among

this set of families. So too, was the case work of the staff member whose careful "timing", depth of understanding and planful thinking served to augment the strength of the As', even though they had to accept help from the agency.

Similarly the Es' despite the embarrassment of an illegitimate pregnancy which precipitated their marriage, had the common strength of good family background which not only steadied them but helped them in their predicament. The firmness of a case worker who accepted them, gave them "supportive" help in their hour of crisis and interpreted their personalities in a degree only commensurate with their capacity for insight, was a major factor in marshalling these strengths for a successful resolution of their difficulty.

In sharp contrast to these cases, the Js' (Case 1) seemingly were so bereft of positive qualities that they could not use case work services. Mrs. J. was unwilling to stay in a marriage when a man other than her husband could offer her the housing which she desired. Mr. J., incapable of seeing his own weaknesses, placed the blame for his difficulty on the housing shortage.

In some cases the fine quality of the social case workers' performance redeemed situations to which client and community defects might have brought disaster. This was true of the Is' (Case 2) who, troubled by their own weaknesses as two immature people with indifferent family backgrounds, found difficulty in getting along together, especially in crises resulting from the housing shortage and reduced employment opportunities. Despite the fact that Mr. I, subsequent to the period of agency activity was convicted for theft, there is reason to believe that agency services helped him to carry on in relative sufficiency and that the family might be reconstituted

upon his release from imprisonment.

In like manner, the staff member assigned to the C case (case 5), by acceptance of Mr. C's hostility, and her constructive activity on his behalf, countered in a considerable measure Mr. Is' personal weaknesses and stimulated his strengths to meet the disabilities caused by a housing difficulty. In accomplishing this she offset the unprofessional buffetting of Mr. C. from agency to agency and the poor referral to the family agency.

The family case worker who helped the Es' also displayed exceptional ability, she found an excellent alliance in the strength of Mrs. E. the English war bride who, loving, her mentally incompetent husband, could accept him to the extent that she was willing herself to seek employment that would ease his burden of supporting the family.

Throughout this range of cases, except for isolated instances, family case workers demonstrated a quality of craftsmanship, on a level higher than any achieved in the other groups of cases. This statement must be qualified by the observation that the problems among this group of families were comparatively simple. Perhaps the most significant aspect of family case work treatment in this group is that the clientele were relatively young people whose marriages were recent. The fact that problems were treated in the early stage of development naturally offers most for the potentialities of family case work as a positive, constructive process.

CHART II

SUMMARY - EFFECTIVENESS OF FAMILY CASE WORK

GROUP I B. ADVANCED MARITAL CONFLICT

CASE	CLIENT		WORKER AND AGENCY	COMMUNITY	EVALUATION
1	M	-	+	++	?
	W	- +			
2	M	- -	+	+	Ineffective
	W	- -			
3	M	-	+	++	Neutral
	W	+			
4	M	+ - -	- +	+	"
	W	+ - -			
5	M	+ -	+	+	"
	W	- -			
6	M	+ -	+	++	"
	W	-			
7	M	- +	+ -	+	"
	W	+ -			
8	M	+ -	+	++	"
	W	+ -			
9	M	- +	+ -	+ -	"
	W	+			
10	M	+ -	+	+	"
	W	- +			
11	M	- +	+	+	"
	W	+			
12	M	+	+	+ -	"
	W	+			
13	M	- + +	++	++	Fair
	W	- + +			

DEFECTS

(a) Client

Lack of insight.
Emotional Immaturity.
Rigidity.
Man's feeling of superiority to woman.
Instability
Poor parental treatment of child behaviour.

(b) Case Worker and Agency

Premature interpretation.
Worker failed to clear with psychiatrist to whom client known.

(c) Community

National Employment Service unable to supply domestic help.
Interference by neighbours.

Advanced Marital Conflict.

The second group of cases, described in Chapter V, as the caption indicates, was replete with problems more complex and difficult than those in the first category. The general overall effectiveness of family case work in these cases, therefore, is significant in assessing the work of the Bureau.

The "community" appeared generally to be a strong member of the family case work team. In this group the resources of the community were used to an unusual extent and in most situations responded well to demands made upon them. Doctors, psychiatrists, lawyers, schools, nursing services, and both private and public social agencies demonstrated a remarkable capacity for understanding the personal and social problems facing these clients, and help was rendered usually in close co-operation with the family case worker.

These available community services were used very adroitly by the staff member who helped Mr. T. (Case 10, Chart I), the disabled veteran, to recover from almost complete helplessness, so that he regained employable status and salvaged his marriage. The worker's unrelenting persistence and the co-operation secured from the veterans hospital and administration and the tuberculosis authority enabled Mr. and Mrs. T., two people with basic personality deficiencies, to succeed in life and stabilize their marriage.

In contrast to the Ts', the personality deficiencies, of the Rs' (Case 2,) probably were less grave; yet the facts that they had no ability to meet people and no real desire to accept help in their situation not only precluded the possibility of case work treatment, but necessitated withdrawal of the practitioner from the situation.

In the Ns' situation the result of casework treatment was questionable, in that, at termination of agency contact, the wife could not make up her mind as to whether or not she should continue living with her husband who displayed such violent and terrifying behaviour. At some date after the termination of contact, the effectiveness might be gauged by the nature of Mr. N's decision which should have revealed to what extent the case worker helped her unravel her feelings and crystallize her thinking.

The negative factors in client effort centered around emotional difficulties which took the several forms indicated on Chart II and described more fully in Chapter V. In case worker performance there was one glaring error and one incomprehensible omission. The staff member assigned to the Ks' (Case I, Chart II) was altogether too hasty in interpreting the significance of Mr. K's family and cultural patterns, doing so before she had advanced sufficiently in diagnosis to know if Mrs. K. would have the insight to accept this knowledge. Even more serious was the omission of the family case worker assigned to help the woman who was so greatly concerned about her husband's drinking (Case 4). Although the wife, herself named a psychiatrist whom she had consulted, the worker did not secure permission of Mrs. K. to confer with this psychiatrist. There is no indication in the record that the worker even thought of making this inquiry. It is at least conceivable that, had this staff member consulted the psychiatrist, she might have been able to understand this wife sufficiently to help her.

Community weaknesses were evident in several of these situations but are not discussed, being beyond the present study.

CHART III

SUMMARY - EFFECTIVENESS OF FAMILY CASE WORK

GROUP I - C. DISSOLUTION OF MARRIAGE

CASE		CLIENT	WORKER AND AGENCY	COMMUNITY	EVALUATION
1	M W	- + - +	+		Ineffective
2	M W	- -	+	+	"
3	M W	- -	+	+	"
4	M W	- + - +	+	+	Neutral
5	M W	+ - +	+ -	+ -	"
6	M W	+ - +	+	+ - -	"
7	M W	+ - +	+	+ - -	"
8	M W	+ + + -	+	+ -	Fair
9	M W	- + + -	+	+ -	"
10	M W	- + - +	+ -	+	"
11	M W	+ +	+	+ -	"

DEFECTS

(a) Client.

Emotional immaturity
Misconduct
Not able to use community resources.
Not able to pay fees; if could have, might have been able to make use of agency services.

(b) Worker And Agency

Premature offer of referral to psychiatric services.
Not able to form relationship with client.
No agency fee system.
Abrupt transfer of workers.

(c) Community

Interference by other persons in the community.
No legal grounds for divorce except adultery--this brought woman to falsifying grounds for divorce.

Dissolution of Marriage

The difficulties facing the family case worker, who would try to help the man and wife adjust to life during and following the breaking of marriage are very real (Chapter V). It is scarcely surprising, therefore, that the practice of family case work in this group of families met with less success than in any of the other classes. The very factors that make it difficult for husband and wife to get along together, make it hard, too, for them to meet the worker in a case work relationship. It is noticeable in this summary that in two of the three families for whom case work was not effective, neither husband nor wife could accept agency help. The K.Ks' (Case 7, Chart III) furnish a good illustration of this. Mrs. K.K. who would not live in the home and city of her husband, alleging that he was tied to his mother's apron strings, although she came to the agency about not receiving support from her husband, refused to discuss her marital situation with the worker and actually could accept agency contact only on a superficial basis.

In the L.L. case (Case 9) on the other hand, in which the most successful case work among the eleven families was observed, both husband and wife had strength enough to work through the problem to a separation with a finality that would enable them to resume their lives anew, not excessively burdened by ties to the past. The value of the case work in terms of the welfare of the L.Ls' children was even greater than for the parents themselves.

Faults that lessened effectiveness were freely distributed among the members of the family case work team. Worker and agency defects would seem to have been too numerous. "Poor timing" violates the basic case work principle of the client's individuality. The

premature offering of referral to the psychiatric services (for the child) in the G.G. situation, therefore seems hardly excusable.

The fact that the agency is unable to give its best to a client like Mrs. D.D., (Case 10) who because of financial status and social experience finds it difficult to accept help without paying a schedule fee, is also a matter of vital concern to agency operation.

One community deficiency warrants comment, namely the national disgrace of divorce laws which limit grounds to adultery; these lead to humiliating "plays" in which adultery is simulated, and is practically the only choice for those who feel that divorce is the one reasonable solution to their marital problems. Mrs. F.F., the war bride who was violently rejected by her husband on her arrival in Canada, has to suffer this humiliation in effecting what she considered a logical resolution of her difficulty. Efforts to mitigate this condition might well come within the public education function of the agency which has such a good opportunity to know the evil results of such legislation.

Reconciliation

The rather curious assortment of marriages discussed in Chapter VI was marked by a heterogeneity greater than in any other group of cases considered in this study. The factor most common to these cases, the strength of the woman who wants to maintain her marriage despite the many unhappy influences militating against success, is as evident in the summary as in the narrative description, four of the wives being particularly active in efforts to solve their problems. Interestingly, the success in these cases is generally above that of any other group. Seemingly would bear some relationships to

CHART IV

SUMMARY - EFFECTIVENESS OF FAMILY CASE WORK

GROUP I D. RECONCILIATION.

CASE		CLIENT	WORKER AND AGENCY	COMMUNITY	EVALUATION
1	M W	- + - +	+ -	+	?
2	M W	-	+	+	?
3	M W	+ +	+	+	Neutral
4	M W	- + + +	+	+	"
5	M W	- + - +	+	+	"
6	M W	- + + +	+		Fair
7	M W	- + +	+	+	"
8	M W	+ + +	+	+	"
9	M W	- + - + +	+ +	+	"
10	M W	+ - - +	+	+	"

DEFECTS

(a) Client

Psychopathic inadequate personality.
 Woman not able to enter into case work relationship
 Psycho-neurosis
 Emotional immaturity.

(b) Worker and Agency

Limitation of time.
 Premature termination of interview.

client participation.

The questionable outcome of case work with two clients is explained by the very nature of the clients themselves. One of these Mrs. N.N. (Case 2, Chart IV) was the young girl who sought annulment of her marriage. In her record there is no indication of any substantial client activity in the treatment except for participation in the case work relationship at a superficial level. Unless her motivation in going to the domestic relations court were clarified and it could be shown that she had a sound basis for action and that her decision had been influenced by her coming to the agency, the effectiveness of the agency service would be doubtful.

In the other doubtful case, Mrs. Q.Q. (Case 5) divorced her husband and then apparently returned to live with him in a common-law relationship. Again the motivations was so indiscernible at the time of case-ending that it was impossible to judge what positive benefit, if any, Mrs. Q.Q. had derived from her contact with the agency. It is significant that in this case the worker made a serious mistake. At the beginning of service, the staff member, pressed for time, had to terminate an interview hurriedly. There can be no discounting of the possibility that this episode may have seemed as a "rejection" to Mrs. Q.Q., for after that date she was never really able to seek or accept help from the agency.

Many of the clients in this group had personality difficulties, that minimized the possibilities of successful treatment. Chief among these were the psychopathic inadequacy of one man and the psychoneurosis of another. These grave abnormalities appearing mostly in the husbands made the constructive activities of the wives all the more remarkable.

CHART V.

SUMMARY - EFFECTIVENESS OF FAMILY CASE WORK

GROUP II. CHILD-PARENT RELATIONSHIPS

AND

CHILD DEVELOPMENT PROBLEMS

CASE		CLIENT	WORKER AND AGENCY	COMMUNITY	EVALUATION
1	M	+	+ - -	+	Ineffective
	W	+ -			
2	M	- -	+	+ -	"
	W				
3	M	- -	+	+	"
	W	- -			
4	M	-	+	+	"
	W				
5	M	+ +	+	+	Neutral
	W	+ -			
6	M	- - +	+	+ - -	"
	W	- +			
7	M	- + +	+ +	-	Good
	W	- + +			
8	M	+	+	+ -	"
	W	+			
9	M	- +	+ +	+ +	"
	W	- +			
10	M	- +	+	+	"
	W	- +			
11	M	- +	+	+	"
	W	+ +			
12	M	+ +	+	+	"
	W	- +			
13	M	+	+	-	"
	W	+			
14	M	+	+ +	+	"
	W	+			

DEFECTS:

(a) Client

Man's undeveloped insight.
Oedipal conflict
woman unable to meet people

(b) Worker

Failed to use psychiatric services when need indicated

(c) Community

Poor attitudes of schools
Poor attitudes of doctors and harmful actions to client.
Psychiatric facilities limited.

Parent-Child Relationships
And Child-Development Problems.

Of all the groups of cases under study, this selection represents the most varied results of family case work. The extremes were wide, with treatment being "ineffective" in four cases, "good" in one, and "fair" in seven.

As in the other groups, the key to success or failure is to be found in the capacity of the staff member to use the positive qualities of the client's personality and in the strength or weaknesses of the client as seen in his ability or inability to accept and use help offered by the case worker.

The course of treatment in the Atherton situation (Case I, Chart VIII) is fully described in Chapters III and VIII. It is only necessary here to recall the quality of the therapist's performance which brought into play the strengths of this couple to counter their very serious failings, and led to success, despite the inadequacy of the psychiatric service. In those cases in which the family case work proved "good", client strengths similar to those in the Atherton family, but of a lesser degree, were present. For instance, the success of the Mellon case (Case 9) was largely due to the worker's studied efforts to enable the man realize his capacity for parenthood, and to help the woman withdraw from the family. Success probably would not have been possible without the availability of a highly efficient housekeeping service, and also the co-operation of the hospital social workers in meeting the medical need of the children.

In contrast to these cases, those for whom case work was ineffective usually included a father and mother with few, if any,

positive qualities. Mrs. Voreau, (Case 2), for instance, showed neither understanding of her son, nor a real wish to help him. Obviously she was happy in her own dubious conduct which reflected a personality that must greatly have influenced her son in his development.

As noted in Chapter VIII emotional growth arrested by the unfortunate childhood of these clients was their most common weakness, contributing, in turn, to the unhappiness of their own children. The failings of these clients as parents were not lessened by the frequent lack of understanding of children on the part of professional people in the community such as doctors and teachers. Sometimes, apparently, even the case worker overlooks the importance of using the opportunity to gain the most complete understanding of children. This is indicated, in one example in which the case worker failed to use the available psychiatric services.

CHECKING RESULTS:

The Case-Chart.

No extravagant claims are made for the case-o-graph, the analytical device used in the study of these cases. Obviously it was useful in dissecting the case records to show the roles played in social case work by client, worker and agency, and community. It also served to give at a glance a portrayal of the dynamics of family case work operating in specific cases.

The reliability of the device as a means of measuring the effectiveness of family case work can hardly be established through use in a single set of cases by one research worker. This can only be proven by extended use and modification of the instrument in the light of experience. Even the present-study itself suggests modification. Because the case-chart portrays the personality of

both man and wife, the factors of "compatibility" will best be seen by comparison of all qualities in each. Section I of Part III therefore, would appear to be unnecessary. Chart I represents a simple modification of the original; with the space for compatibility factors deleted, the sections below it relettered, and providing, at the bottom of the chart, space for such information as dates of opening and termination, and evaluation.

The reliability of the casegram must be further ascertained in terms of the criteria, which simply are the best possible application of basic social case work principles to modify the individual/social situation. The basis of thinking in directing this effort is that the result of case work treatment indicated by the casegram should correspond with the ability of the client to function as an average citizen after the termination of agency service. This information might be secured by interview of the client arranged specifically for this purpose or from interview of the client, should he return to the agency seeking additional service. Interviewing dependable individuals who meet the client in situations other than the family case work setting, might also prove helpful. Thus, for example discussion with a teacher or a social worker employed by another agency, might elicit the required information.

All of these methods of checking were used in a small selection of cases from the research samples. In addition to these methods, there was another check: as some of the cases were still active when charted they could be re-examined at a later date.

Chart VI

	M	W	Family & Children
A. Family Background			
B. Social Cultural			
C. Education			
D. Group & Employ			
E. Mobility			
F. Health			
G. Living Conditions			

II. W

M

H. Marriage		
I. Health		
J. Economic		
K. Social Status		
L. Living Conditions		
M. Children		

<u>Source of Referral</u> _____	<u>Date of Opening.</u> _____
<u>Previous Contact</u> _____	<u>Date of Closing.</u> _____

Chart VI B.

Service	Client	Community.	I
A.			
B.			
C.			
D.			
E.			
F.			
G.			

W. II

M.

III

H.			
I.			
J.			
K.			
L.			
M.			

Summary of Problems. _____

Evaluation. _____

The Research Interview.

There is a vast difference between interviews as used in social case work and social research. The purposes that dictate them are unlike. In social case work the interview is the basic technique employed in helping people to make social and personal adjustments. In research the interviewer takes no responsibility for the problems of the client. His objective is to obtain information that may add to his knowledge of the individual in some particular phase of social living. Because the social case worker and the social research worker both are concerned with human beings certain interviewing techniques are common to both practices. Ideally, for instance, each is under the necessity of observing the emotional quality of the interviewee's response to questions, for the feelings of the individual are important in weighing the significance of the information elicited.

The social case worker and the research worker wishing to interview a person who has been treated by case work are both guided by professional ethics such as the protection of a client's confidence. The "confidentiality" of the case work relationship is a fundamental tenet of practice. Thus, when a research worker wishes to interview a client or former client of a social agency he imperils this "confidentiality". The problem which this matter poses seemingly is going to be a major one as research in social case work advances. At the Vancouver Family Welfare Bureau the right of the research worker to interview a case worker's client was seriously questioned. It was decided that only the case worker who had been active on a case should carry out a research interview. Thus it was possible to have only one research interview. The apparent outstanding success of the therapist in the Atherton case

indicated it as the logical choice for this research interview. The fact that three years had elapsed since the terminating of agency contact would possibly enhance the value of the interview. Fortunately Miss West was still on the staff of the Bureau and agreed with considerable enthusiasm to interview the Athertons.

Armed with a carefully-formulated questionnaire, she set out to revisit the Athertons. Unfortunately she was not able to see Mr. Atherton. Her interview with Mrs. Atherton, however, was interesting as it indicated that the judgment of her work as "good" is well founded.¹ The reply as given by Mrs. Atherton was highly significant in that it suggested the measure of her benefit from family case work. When she was asked if she had recommended anybody to the agency, she told Mrs. W. that she was at the moment trying to get a neighbour to go to the agency. This neighbour had adopted the children of her brother and punishing one of them who snored. Mrs. Atherton tried to help the woman understand what was the matter. When Mrs. Atherton could not persuade her friend to go to the family agency she then tried to get her to use the children's psychiatric service. In telling about this, Mrs. Atherton said, "I knew that they (the psychiatric services) would show her that the trouble was with her, not with the child." As Miss West later remarked, obviously Mrs. Atherton has continued to use the insight gained through family case work; she said that there were still minor problems but that "the same principles work".

1. The complete questionnaire used and Miss West's recording of this interview comprise Appendix D.

Other Checkings of Results.

Among the cases checked by means other than the research interview, the Mellons' (Chapter VIII) is the most significant. Due to delayed recording, it was possible to chart the case as it was eight months before the actual date of research. A check was then made with the family case worker. She advised that Mr. Mellon, despite additional misfortunes, had progressed favourably. During the eight months Mr. Mellon had been steadily assuming more responsibility for his children; and the mother had definitely faced up to the reality that she must withdraw completely from her family. The improvements in the children had kept pace with the over-all advancement. The evaluation of case work as "good" in this example would appear sound.

Eight months was also the length of the interval between closing and re-opening of the Q. case. (Chapter V) in which the husband had felt himself superior to his wife and frequently left her to live in an isolated spot. Mrs. Q. apparently wanted no other service in her new contact than to be allowed to talk. She revealed that Mr. Q. had definitely left her after termination of first contact and that she had divorced him. Her adjustment to her new marital status seemed fairly good. Her achievement in accommodating herself to her new situation and Mr. Q's defection which had not been foreseen by the worker would indicate that the case work had been neutral as evaluated.

All the other cases checked are from the group described in Chapter VIII. Two months elapsed between charting the records of the Stewart family and the next interview. During that time the child continued to run away from home and Mr. and Mrs. Stewart continuously battled. These occurrences makes the evaluation of the case work in

this situation as "neutral" seems unsound.

There was also a two-month interval between the charting of the Cassell record and the next interview. Throughout this period the financial needs seemed predominant in the minds of the Cassells, and they appeared unable to face the reality of a serious marital problem. The assessment "neutral" in this case would seem to be reasonable.

In each of the York and the White situations, both active at charting, a month elapsed before a check was made. Harold York continued to improve, although he found it difficult to enter into group activity, and Mrs. York excepted his limitations and those of her husband with increasing ease. Mr. White carried on with plans for divorce. "Good" seemed to be supported as an evaluation in both cases, although the period between charting and re-examination is too short for final judgment.

Incomplete as are these attempts to test the evaluations, they do suggest some of the practical value of the case chart even though continued application would be required before it could be of research value.

SOME IMPLICATIONS FOR FAMILY WELFARE BUREAU WORK

The Clientele

The Socio-economic origin of the clients coming to the Bureau has not been determined. The lack of statistics relating to client income aside from those figures for relief given by the agency, precludes any accurate estimate of that factor. Indications are, however, that generally the clients are the less-advantaged people in the community.

As inevitably the segment of the community from which the client originate influences the kind of services which an agency

develops, it is not surprising that the Bureau renders many services in relation to environmental problems. While relief-giving has been reduced virtually to a minimum, client problems still include financial planning and budgetary difficulties. Employment problems, housing difficulties, and concern with health all find a considerable place in the work of the agency.

At the same time emotional problems occur in an increasing degree. Often environmental hazards adversely affect the family relationships, through the strains they place on members of families.

It is seen that a great many clients fail to develop emotionally. Arrested emotional growth is harmful to marital and family relationships, and in turn inhibits the development of children. The danger of poor family relationships being passed to the third generation like a physical infection is altogether too real. Many of the clients of the Family Welfare Bureau are totally unprepared for all phases of social living, including both community and family existence.

The kind of family situation which seems most difficult for a child is that in which the marital conflict is well-advanced, or the marriage is broken. Children are being neglected, "emotionally" if not physically, by parents who are so pre-occupied with their marital conflicts that they have little time for thoughts of anything else.

If these families bear any resemblance to the remainder of the population, the outlook for family living is dismal. Nevertheless, not only are they a good deal less typical; it is worth emphasizing that the majority of the clients considered in this study showed varying capacities for growth, if they were but properly stimulated.

The accident which has restricted the clientele to one portion

of the community is so unfortunate as to be almost tragic. The modern family agency liberated from the necessity of meeting economic need can give its time and attention to the emotional problems of family living. Yet those who, by virtue of the responsibilities which they have because of their station in life, are likely to experience the most acute needs in this area, and who could perhaps make the best use of this service, are not receiving it. Probably one of the main reasons for this failure to attract these people is that the aspect of "charity" is still associated in many minds with social agencies.

As a publicly-supported agency it might be expected that the Bureau would serve the community as an educator in family living. In this way it would serve those citizens who are not suffering from acute personal distress which requires individual treatment, but who would benefit by this opportunity of discussing ways and means of strengthening their family life.

Case Work Services

A family agency should be equipped to help people who have environmental problems affecting their family well-being and who have problems of relationships within their families.

One particular facility of the Family Welfare Bureau has proven of outstanding therapeutic value although predominantly it is used for family problems centring around medical and health difficulties. This resource is the "Visiting Homemaker Service," which has so well proved itself, that it is time to re-evaluate it in terms of agency responsibility and function. Two factors, the expense of operation, and the wide acceptance which the service has gained, suggests that the time may be right for assumption by

the Provincial Government of responsibility for this as a public service. Perhaps this could be done in co-operation with the training facilities of the National Employment Service. The fact that there may be no precedent for such action should not be of any moment in such a field as social work. With the advanced state of the rapidly expanding welfare services in British Columbia such a transition is not inconceivable. Nor would this change have to deny the family agency the use of this resource. On a co-operative basis it might be well used by the private agency not just in medical-social problems but as a tool of case work in other situations.

Psychiatric services available to the agency also seemed to bear some investigation. Consultation does not seem to be benefiting the case work practice as it should, although it is altogether probable that shortage of good psychiatrists and clinics is a basic reason.

Whatever the cause there is need for addition to the staff of more psychiatrically-oriented case workers. The ever-increasing awareness of emotional problems can be met only through adequate, trained staff. While the work as described, generally has been fairly successful, certainly there is room for improvement. The difficulties encountered by staff members in the cases described under "Dissolution" and "Reconciliation" (Chapters VI and VII) are ample evidence of this. An intensified concern with the problems pertaining to child development is further reason for this need of improvement in staff qualifications.

A general failing noted in examining these cases is clearly associated with the need for more skilled personnel. Recording

frequently is incomplete. Often simplest "face sheet" information is not procured. The securing of such information is not significant for its factual value alone; but the expression that it calls forth from the client, coloured as it nearly always is by personal experience, is important for the purposes of making social diagnosis and formulating treatment plans.

Closely related to this need of highly-trained workers is the need to increase the availability of the agencies services to all in the community who desire it. As long as service is available to all free of charge, for some people it will retain its "charitable" aspects. Those who are able to pay for service and who are accustomed to paying for other services will respect the agency the more if they can purchase the service. The establishment of a fee service, therefore, is imperative if the agency is to serve all segments of the community. Operation of a fee service would, of course presume that interviews would be conducted on a scheduled basis.

The offering of service on a broader basis than heretofore seems to be timely for today there is a growing professional opinion that family case work has a constructive as well as a remedial. ^{of the clients} The qualities described in Chapter IV render substantial support to this opinion.

While the primary function of a family agency has always been considered to serve the particular needs of families and individuals, of late years especially, increasing attention has been given to other ways in which the agency can foster the advance of family life of the community it serves. With the first-hand knowledge of family relationships gained from practice, the family agency should be well able to help educate the community-at-large.

in family living. Observation of the rapidly growing core of well-trained group workers being graduated from the schools of social work, suggests the possibility of setting up a co-operative programme, with the family agency supplying the material and a group agency the group leadership.

In addition to its own programme the agency should give support to other educational efforts in the community which have as their objects the strengthening of family life. This would be in keeping with general policy to encourage and co-operate in all efforts to promote family happiness.

While it may be a considerable time before the Bureau has the necessary facilities in the form of adequately trained personnel this should be kept in mind the possibility of developing in the future a group therapy programme as a complimentary service to the case work and educational programmes.

The Community

There are always certain environmental factors which impede the course of family life. These include housing needs, slum conditions, employment difficulties and economic fluctuations.

Aside from these major concerns there are community needs affecting family life about which the agency might be able to take some action. Such needs as improved psychiatric services are plain. Better words can be said for hospital and medical facilities which, as seen in the cases reviewed in this study, usually are reasonably efficient.

With a few exceptions, most other social agencies are helpful to clients and, when called upon contribute to the success of case work treatment.

While deploring the lacks of the community it would be unfair to ignore the facilities in the community for happy family living. These include special educational features for school children, adult education for their parents, education through the press and the radio. It is only necessary to note such radio programmes as Doorway to Life, and the Family Service Association of America feature Marriage for Millions to observe how successfully the dynamics of human behaviour and treatment can be portrayed.

The encouragement of such activities would seem to be part of the function of a family agency.

In twenty-one years of existence the Family Welfare Bureau of Greater Vancouver, British Columbia has represented the conscience of the city in which ^{this agency} is situated as it concerned itself about the welfare of its family. The agency has striven to serve the community through leadership in group action for benefits to families and in serving the individual family through social case work practice. The performance of family case work has been reasonably effective. The agency has the duty of maintaining that same standard through these changing times and can do it only by securing the best personnel and giving the finest in leadership devoted to the promotion of happy and satisfying family living in the community.

APPENDIX A.

FORM AI.

Family Service Association of America -- face sheet

FORM A II.

Canadian adaptation of face sheet devised by Family Service Association of America.

[illegible]

Surname		Cross Ref., Aliases, Prev. Marriage, etc.	Date Opened	Case No. A 11
Maiden Name			MC UC UM W WR DES DIV SEP SING ORPH	

Date	Dist.	Address	Telephone or Location	Rooms	Rent	Landlord	Address

First Name	Date of		Birthplace	Occupation or Industry School or Grade	Military Information	Court or Other Data
	Birth	Death				
1 Man						
2 Woman						
3 Chn						
4						
5						
6						
7						
8						
9						
10						
11						
12						
3						

Others in Household	Kinship	Amount Paid in	Marriage	Social Service Index Report
			Date	
			Place	
			By whom	
			Decree absolute	

Relatives	Kinship	Address

Interested Organizations Individuals Agencies	No.	Employment Record	Date

	Religion	Date Came To			Naturalized	Referred by
		City	Prov.	Canada		
Man						
Woma						

First Case Statistical Card Developed by Association For
Organizing Family Social Work In Conjunction With Russell
Sage Foundation (1928)

[illegible]

(Since last opening for intake during present fiscal year)

SERVICES

(Check for family or designate member of family by number).

ECONOMIC: Services in relation to

- 1. Helping the client make use of economic resources in the community
- 2. Helping the client make use of his own economic resources
- 3. Personality factors affecting management of income
- 4. Financial assistance met directly by the agency
- 5.
- 6.

EMPLOYMENT: Services in relation to

- 7. Helping the client make use of opportunities
..... 8. Training, counseling and preparation for employment
..... 9. Personality factors influencing employment
..... 10. Helping the client understand and accept industrial situations
..... 11.
..... 12.

FAMILY RELATIONSHIPS: Services in relation to

- 13. Helping the client make use of resources for easing the situation
- 14. Helping the family work out adjustments of living arrangements
- 15. Training and development of children
- 16. Personality factors influencing family conflicts
- 17. Legal procedures affecting family or personal conflicts
- 18.
- 19.

Mental Physical

- HEALTH: Services in relation to**
- Helping the client understand the facts and implications of the illness
 - Helping the client use resources available for treatment
 - Helping the client work out adjustment of living arrangements
 - Personality factors influenced by illness
 - Helping the client recognize the need for treatment

SOCIAL AND ENVIRONMENTAL: *Services in relation to*

27. Helping client use resources within community for correcting situation
28. Interpretation of cultural standards
29. Protecting the interest of children to relieve acute distress
30. Protecting the interest of children in non-voluntary referrals
- 31.
- 32.

A	B	C	D	E	F
					1
					2
					3
					4
					5
					6
					7

1. Problem modified from agency standpoint
2. Problem modified from client's standpoint
3. Problem unmodified because of limitation of case work resources within the agency
4. Problem unmodified because of limitation in community resources
5. Problem unmodified because of limitation in client's capacity
6.
7.

F.W.A.A. Statistical Card No. 1A

First Case Statistical Card Developed by Association For
Organizing Family Social Work In Conjunction With Russell
Sage Foundation (1928)

APPENDIX B

II

Second Case Statistical Card. Family Welfare Association of America (1938)

CODE	NAMES	ADDRESS	LOCATION	NO. OF ROOMS UNF. FURN.	WITH OTHER FAMILY	BOARD- ING	RENT W.	DISTRICT	WORKER	YEAR	CASE NO.	STATUS FOR FISCAL YEAR	
												CARRIED OVER FROM PREVIOUS YEAR	INTAKE DURING PRESENT YEAR
1													
2													
3													
4	SOURCE OF APPLICATION												
5													
6													
7													
8	FAMILY STATUS	MC	CLC	UC	UM	W	WR	DES	DIV	SEP	SM	SW	ORPH
9	MEMBERS OF HOUSEHOLD	OCCUPATION AND INDUSTRY OR SCHOOL AND GRADE OR WHEREABOUTS IF AWAY											
10	MAN	WEEKLY WAGE											
11	WOMAN												
12	SINGLE CHILDREN												
13													
14													
15													
16													
17													
18													
19													
20	OTHERS	RELATIONSHIP											
21													
22													
23	COLOR	DATE CAME TO U. S.											
24	MAN	NATURALIZATION DATES											
25	WOMAN	1ST PAPERS 2ND PAPERS											

STATUS IN CURRENT MONTH		RELIEF STATUS IN CURRENT MONTH	
ACTIVE	AT ANY TIME IN MONTH	RELIEF FROM AGENCY	SOLE INCOME THRUOUT MONTH FROM AGENCY
1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12
NEEDING ATTENTION	1 2 3 4 5 6 7 8 9 10 11 12	PUBLIC RELIEF ALSO	1 2 3 4 5 6 7 8 9 10 11 12
ACCORDING TO PLAN	1 2 3 4 5 6 7 8 9 10 11 12	OTHER PRIVATE RELIEF ALSO	1 2 3 4 5 6 7 8 9 10 11 12
WAITING CLOSING	1 2 3 4 5 6 7 8 9 10 11 12	INCOME ALSO FROM EARNINGS	1 2 3 4 5 6 7 8 9 10 11 12
		INCOME ALSO FROM OTHER SOURCES	1 2 3 4 5 6 7 8 9 10 11 12
		NO RELIEF FROM AGENCY	
		PUBLIC RELIEF	1 2 3 4 5 6 7 8 9 10 11 12
		OTHER PRIVATE RELIEF	1 2 3 4 5 6 7 8 9 10 11 12
		SOLE INCOME FROM EARNINGS	1 2 3 4 5 6 7 8 9 10 11 12
		INCOME FROM OTHER SOURCES	1 2 3 4 5 6 7 8 9 10 11 12

CASE WORK PROBLEMS PRESENTED AND SERVICES RENDERED

During Present Fiscal Year

(Since last opening for intake during present fiscal year)

PROBLEMS

(Check for family or designate member of family by number).

A. ECONOMIC:

- 1. Lack of knowledge of available resources
- 2. Problems of financial planning and home management caused by lower standards or marginal income
- 3. Problems of financial planning and home management complicated by intellectual or emotional difficulty
- 4. Financial need due to lack of support from members of family
- 5. Resistance to using available resources
- 6. Financial need which must be met if case work treatment is to be effective
- 7. Financial need not met by public agency affecting plan for adjustment
- 8.
- 9.

B. EMPLOYMENT:

- 10. Persons with good work history and prospects for work needing case work service
- 11. Persons needing vocational counseling or training
- 12. Personality factors affecting employability
- 13. Persons attempting to adjust to job requiring change in employment status
- 14. Unemployment of head of family affecting family relationships
- 15. Unemployed persons beyond the current industrial age level
- 16.
- 17.

C. FAMILY RELATIONSHIPS:

- 18. Difficulties in relationship between husband and wife
- 19. Difficulties in relationship between parent and child
- 20. Difficulties in relationship between substitute parent and child
- 21. Difficulties in relationships among children in the family
- 22. Problems related to pregnancy
- 23. Absence of parent or substitute parent
- 24. Separation from family or relatives
- 25. Difficulty in relationship to other relatives
- 26. Irregularities in legal status causing fears or conflicts
- 27. Actual or potential anti-social behavior affecting family life
- 28.
- 29.

D. Men- E. Physical

HEALTH:

- 30. Ignorance of disease and its implications
- 31. Illness affecting capacity for social and industrial adjustment
- 32. Acute or chronic illness creating changes in the family structure
- 33. Acute or chronic illness resulting in removal from the family group
- 34. Need for readjustment following institutional care
- 35. Acute or chronic illness or physical incapacity arousing fears or conflicts in the individual or others in the family
- 36. Resistance to using resources for treatment
- 37.
- 38.

F. SOCIAL AND ENVIRONMENTAL:

- 39. School problem involving family situation
- 40. Inability to find or use educational or recreational facilities
- 41. Ignorance of or non-acceptance of established cultural patterns
- 42. Changes of residence affecting family adjustment
- 43. Problems in relation to housing affecting family life
- 44.
- 45.

SERVICES

(Check for family or designate member of family by number).

ECONOMIC: Services in relation to

- 1. Helping the client make use of economic resources in the community
- 2. Helping the client make use of his own economic resources
- 3. Personality factors affecting management of income
- 4. Financial assistance met directly by the agency
- 5.
- 6.

EMPLOYMENT: Services in relation to

- 7. Helping the client make use of opportunities
- 8. Training, counseling and preparation for employment
- 9. Personality factors influencing employment
- 10. Helping the client understand and accept industrial situation
- 11.
- 12.

FAMILY RELATIONSHIPS: Services in relation to

- 13. Helping the client make use of resources for easing the situation
- 14. Helping the family work out adjustments of living arrangements
- 15. Training and development of children
- 16. Personality factors influencing family conflicts
- 17. Legal procedures affecting family or personal conflicts
- 18.
- 19.

Mental Physical

HEALTH: Services in relation to

- 20. Helping the client understand the facts and implications of the illness
- 21. Helping the client use resources available for treatment
- 22. Helping the client work out adjustment of living arrangements
- 23. Personality factors influenced by illness
- 24. Helping the client recognize the need for treatment
- 25.
- 26.

SOCIAL AND ENVIRONMENTAL: Services in relation to

- 27. Helping client use resources within community for correcting situation
- 28. Interpretation of cultural standards
- 29. Protecting the interest of children to relieve acute distress
- 30. Protecting the interest of children in non-voluntary referrals
- 31.
- 32.

EVALUATION AT CLOSING

A	B	C	D	E	F

1. Problem modified from agency standpoint
2. Problem modified from client's standpoint
3. Problem unmodified because of limitation of case work resources within the agency
4. Problem unmodified because of limitation in community resources
5. Problem unmodified because of limitation in client's capacity
6.
7.

Letters A, B, C, etc., refer to general classifications of problems.

APPENDIX B

III

Case Statistical Card In Current Use (Front) Family Service Association of America (1948)

NAME				DISTRICT				WORKER				CASE NO.				YEAR						
ADDRESS								TELEPHONE NO.				COLOR		RELIGION		CITIZEN YES NO		RESIDENT YES NO				
								MAN														
								WOMAN														
SOURCE OF APPLICATION AT LATEST OPENING				DATE OF LATEST		CLASSIFICATION AT CLOSING			STATUS FOR FISCAL YEAR													
				OPENING	CLOSING	0 INTV.	1 INTV.	2+ INTV.	CARRIED OVER FROM PREVIOUS YEAR													
									INTAKE DURING CURRENT YEAR: NEW REOPENED													
									FINANCIAL ASSISTANCE DURING YEAR													
									FROM AGENCY: YES NO													
									PUBLIC ASSISTANCE: YES NO													
FAMILY STATUS: MC CLC UC UM W WR DES DIV SEP SM SW ORPH																FEE FOR CASEWORK SERVICE: YES NO						
DIRECT INTER-VIEWS	MEMBERS OF HOUSEHOLD			SEX	DATE OF BIRTH	BIRTHPLACE	OCCUPATION, SCHOOL, OR WHEREABOUTS IF AWAY			CHILD PLACEMENT STATUS IN CURRENT MONTH												
	MAN 1									MEM-BER	1	2	3	4	5	6	7	8	9	10	11	12
	WOMAN 2										1	2	3	4	5	6	7	8	9	10	11	12
	SINGLE CHILDREN 3										1	2	3	4	5	6	7	8	9	10	11	12
	4										1	2	3	4	5	6	7	8	9	10	11	12
	5																					
	6																					
	7																					
	8																					
	9																					
	10																					
	11																					
	OTHERS 12					RELATIONSHIP																
	13																					
14																						
F.S.A.A. STATISTICAL CARD - FORM 1: 1947																						

APPENDIX B

III

Case Statistical Card In Current Use (Back) Family Services Association of America (1948)

I. PROBLEMS GIVEN INDIVIDUAL CONSIDERATION BY CASEWORKER

(during present fiscal year for carried over cases; since last opening for intake)

Check

- ☐ 1. FAMILY RELATIONSHIPS
 - ☐ a. Marital difficulty
 - ☐ b. Parent-child relationships
 - ☐ c. Unmarried parenthood
 - ☐ d. Other
- ☐ 2. INDIVIDUAL PERSONALITY ADJUSTMENT
 - ☐ a. Children (under 13 years)
 - ☐ b. Adolescents (13 through 20)
 - ☐ c. Adults (21 and over)
- ☐ 3. PLANNING FOR SUBSTITUTE CARE OF CHILDREN
- ☐ 4. OLD AGE
- ☐ 5. PHYSICAL ILLNESS OR HANDICAP
- ☐ 6. MENTAL ILLNESS
 - ☐ a. Diagnosed
 - ☐ b. Suspected
- ☐ 7. INTELLECTUAL RETARDATION
 - ☐ a. Diagnosed
 - ☐ b. Suspected
- ☐ 8. ECONOMIC
- ☐ 9. EMPLOYMENT (unemployment or underemployment)
- ☐ 10. EDUCATIONAL AND VOCATIONAL ADJUSTMENT
- ☐ 11. RECREATION
- ☐ 12. HOUSING
- ☐ 13. OTHER (specify).....

II. SPECIFIC LACKS OR INADEQUACIES IN COMMUNITY RESOURCES WHICH INTERFERED WITH SERVICE TO FAMILY OR INDIVIDUAL (specify)

- 1.
- 2.
- 3.

III. EVALUATION AT CLOSING

- ☐ 1. Service enabled family or individual to handle situation better
- ☐ 2. Service did not enable family or individual to handle situation better
- ☐ 3. Unable to evaluate

APPENDIX C

Assessment Form Used Experimentally
By Family Welfare Bureau of Greater Vancouver
(April 1947 - April 1948)

CODE OF PROBLEMS AT INTAKE.

Appropriate numbers to be entered at foot of Daily Registration and Re-opened slips, except in the case of NCMs.

Code numbers should be shown in record also.

I. Financial:

- a) Investigation for other agency - 3 g. DBT
- b) Emergency situation. Question of eligibility for public assistance, may or may not be considered at this point. Evictions may come in her.
- c) Ineligible for public assistance. This will include the following:
 - Awaiting U.I. payments
 - Ineligible for U.I. but classed as employable
 - U.I. benefits inadequate
 - U.I. benefits exhausted.
 - Earnings of parents inadequate but over relief scale.
 - Earnings of children inadequate but over relief scale.
- d) Poor planning
- e) Income inadequate
- f) Public relief inadequate
- g) Catastrophe or illness.

II. Marriage:

- a) Personality Maladjustments
- b) Irregular marital status
- c) Non-support
- d) Desertion of husband
- e) Desertion of Wife
- f) Absence of mother
- g) Absence of father, other than desertion.
- h) Pre-marital problem.
- i) Divorce or separation

III. Child Parent Relationships:

- a) Pre-adolescent children
- b) Adolescent children
- c) Grown sons and daughters
- d) Delinquency of child
- e) Behaviour problem (other than delinquency)

IV. Child Care:

- a) Temporary care needed in or out of home.
- b) Permanent care needed in or out of home
- c) Neglect (actual or potential)
- d) Day care or pre-school education
- e) Very large family
- f) Guardianship difficulties

V. Illegitimacy:

- a) Unmarried mother
- b) Married woman

VI. Health:

- a) Mental handicap (e.g. feeble minded)
- b) Physical handicap (e.g. deafness, crippling)
- c) Mental illness (include epilepsy)
- d) Emotional instability (include neurotics, psychopaths)
- e) Physical illness
- f) Maternity
- g) Alcoholism

VII Employment:

- a) Lack of employment
- b) Maladjustment
- c) Underemployment

VIII Environmental:

- a) Housing - Bad housing, inability to find housing, etc.
- b) Recreation
- c) School
- d) Difficulties with relatives or neighbours.
- e) Cultural conflict.

IX The Aged:

X Immigration and Citizenship.

XI Legal:

- a) Legal aid.
- b) Other (except when covered by FC.)

SERVICES RENDERED - C2 & C3.

1. FINANCIAL: - Service in relation to:-

- a) Investigation for other agency.
- b) Financial assistance - Agency or Trust Funds.
- c) Other Private Funds - Fuel, Fund, VCC, Red Cross Workshop, Red Cross, Benev. Fund Seaforth's Aux. etc.,
- d) Administration of Client's Funds.
- e) Referral to public department
- f) Referral to other private agency.
- g) Budgetting service and help with planning.
- h) Personality factors affecting management of income.
- i) Supervised Homemaker (where client has not paid full cost at time of checking)
- j) Medical services - where client unable to pay full cost.
- k) Exploring community resources.

(*1 - Payment of housekeepers from relief funds not marked here. Should be shown under 1 b. and wherever else appropriate 4 b. 6e, 9.)

2. MARRIAGE: - Service in relation to:-

- a) Helping the family work out adjustments of living arrangements.
- b) Personality factors influencing family conflicts.
- c) Legal procedure affecting family or personal conflicts.
- d) Psychiatric. (1) Direct (2) Indirect - consultation.
- e) Medical advise in relation to marriage relationship.
- f) Support obtained.

3. CHILD PARENT RELATIONSHIPS: (Behaviour difficulties)

- a) Placement of child - (through own or other agency - include with relatives)
- b) Day care of child - (through own or other agency - include with relatives - include Nursery school)
- c) Psychiatric service (1) Direct (2) Indirect - consultation.
- d) Legal Procedures.
- e) Recreation.
- f) Direct treatment of child.
- g) Direct treatment of parents.

4. CHILD CARE.

- a) Supervised Homemaker
- b) Other housekeeper (include relatives)
- c) Placement of child- including with relatives.
- d) Day care (all kinds)
- e) Referral to protection agency.
- f) Legal Procedures.

5. ILLEGITIMACY: (Service in relation to)

- a) Medical services
- b) Psychiatric service (1) Direct (2) Indirect.
- c) Service in relation to personality factors.
- d) Living arrangements
- e) Legal procedures.

6. HEALTH: (Services in relation to:)

- a) Medical Services.
- b) Psychiatric Service (1) Direct (2) Indirect.
- c) Professional Nursing Services - V.O.N. etc.
- d) Hospital Nursing or boarding home.
- e) Housekeeper or practical nurse.
- f) Helping client or others in family recognize need for treatment.
- g) Helping client and family to understand facts and implications of the condition.

7. EMPLOYMENT: (Service in Relation to:)
 - a) Referral to employment services.
 - b) Psychiatric (1) Direct (2) Indirect.
 - c) Exploration of employment situation.
 - d) Personality factors, vocational guidance etc.
 - e) Determination of eligibility.
 - f) Interpretation to employer.
8. ENVIRONMENTAL: (Service in relation to:)
 - a) Attempt to social action.
 - b) Referral to housing resource
 - c) Recreation referral
 - d) Consultation with school teacher, Attendance Office or nurse
 - e) Interpretation of school problem with family.
 - f) Interpretation of cultural conflicts.
 - g) Interpretation of difficulties with relatives, neighbours, landlords, etc.
9. THE AGED: (Service in relation to:)
 - a) Adjustment of living arrangements.
 - b) Housekeeping services.
 - c) Personality factors, clients.
 - d) Personality factors - relatives or others.
10. IMMIGRATION AND CITIZENSHIP:
 - a) Co-operation with Immigration service.
 - b) Interpretation of situation to client.
 - c) Use of other resources to aid the situation.
11. LEGAL - RP.

APPENDIX D

RESEARCH INTERVIEW

- I. Questionnaire And Answers
- II. Recording of Interview

I. QUESTIONNAIRE AND ANSWERS

1. How long have you known about F. W. B.?

A short time before coming to the agency and then knew more about the children's agency--only vaguely about F.W.B.

2. What did you think it did?

- (1) Helped destitute families.
- (2) Helped unmarried mothers.
- (3) Helped delinquent children.

"I didn't think that it would deal with problems in a family like ours."

3. How did you come to F.W.B.?

Through knowing a friend who had visits from a children's agency worker.

4. Would you return if necessary?

Certainly!

5. Have you recommended anybody to the agency and, if so, how?

Trying to do this right now. A neighbour is punishing her little girl for bed-wetting.

Mrs. A. tried to explain the ability of the agency to help understand the problem. When the woman could not accept this Mrs. A. spoke to her about using a child guidance centre.

"I knew they'd likely show her that the trouble was with her and not with the child"

It was obvious that Mrs. A. had continued to use the insight she had gained. She said that there were still minor problems in her family but "the same principles still work" She had joined some outside groups and was also trying her hand at pencil portrait.

"E. West"

II RESEARCH INTERVIEW

An appointment had been made by telephone and vis. had indicated that she wanted to secure Mrs. A's help in a project.

The visit was made early in the morning and Mrs. A. was neatly but casually dressed as usual and took vis. to the kitchen to talk, as she had always done. The general nature of the project was explained to her and the specific questions on the questionnaire were outlined. To the one about whether she would return to the Agency if she encountered further difficulty, Mrs. A. replied, "Why, of course!" When asked whether she had ever recommended anyone to the Agency she replied that she was in the midst of trying to get one of her neighbours to consult FWB. This neighbour has adopted two children of a relative, and Mrs. A. stated that she punishes one child because she ~~was~~ ^{was her best}. The little girl is made to wash extra dishes and do extra work, if she happened to ~~be~~ ^{was her best} the previous night. Mrs. A. seemed quite disturbed by this and obviously felt that her neighbour was behaving in a ridiculous way, but she talked of her with understanding rather than in any spirit of criticism. Mrs. A. said that the little girl sometimes caused problems because she seemed to be nagged all the time. She had asked her neighbour if she had ever tried making a fuss over her and giving her attention, as most children needed that. Mrs. A. added "She did not seem to understand what I was talking about". She went on to say that she knew her neighbour would change her attitude if only she could understand her situation and see that she was not giving the child a chance at all. Mrs. A. became particularly thoughtful at this point and said that although she had recommended the Agency and told the neighbour that the Agency could help her in finding out what the real problem was, she doubted whether her friend was ready for this, - "I don't think she would be able to talk honestly about her feelings, and if she didn't the worker would not have a chance to help her."

To show what she meant about the neighbour's unwillingness to be honest Mrs. A. told of an incident which showed this. When the neighbour had not responded at all to Mrs. A's suggestion that the Agency could help her to find "what the real problem was" Mrs. A. had then talked about going to the Agency so that a psychiatric examination of the girl could be held. She laughed and said "I knew that if she went there they would succeed in showing her that the trouble lay within herself rather than in the child."

Mrs. A. went on to talk about her own family. Jane is doing well at school and, as usual, causes no trouble anywhere. She said that Sonny was a bit slow at school and seemed to have a short span of interest. Vis. noted the affection and understanding in Mrs. A's voice as she talked of Sonny. There was no longer any trace of tension or of criticism. She said that she was helping him with his writing at night as this had been suggested by the teacher, and in the middle of a line Sonny would break off and want to tell her of something that had happened during the day. Mrs. A. said that

she would suggest to him that he finish the line and then tell her the story. Again, the way in which she told this seemed to indicate that Mrs. A. no longer found it difficult to be patient. She commented that Sonny had passed Grade 1 last year, although he had not been doing very well. She laughed and said that she had urged the teacher to put him on but realized now that she had made a mistake. Her pride had got in the road and she had felt that her child could not fail. She saw now, however, that unless Sonny mastered the work that he was doing he would always lag behind and get discouraged. She was laughing at herself as she said that this year Sonny would fail and everybody was going to be very happy about it.

There are still difficulties regarding the neighbours. Mrs. A. said that for a long time every new comer to the area would be told of how bad Sonny had been and that this was hard on him. Since going to school he had a tendency to make friends in other districts. Sometimes he would be quite late coming home after school because he had gone to play at the homes of some of these children. Vis. enquired whether Mrs. A. became anxious on such occasions and she said that she did not for she realized that he had to have friends. She did not comment specifically on any worry as to whether Sonny would come directly from the home of his friends to his own home but there seemed to be an implicit trust in the boy. She said that of course he was not free from problems but "the same principles still work". With great enthusiasm Mrs. A. asked vis. whether she had noticed the boat in the yard. She said it had been Mr. A's suggestion that they buy the boat in order to give Sonny outings. They would go up the Sound and land on some islands, and Sonny would clamber over the rocks and yell to his heart's content. Mrs. A. said that the boy loved these outings.

Mrs. A. talked for a little while about herself and Mr. A. He is playing in an orchestra and leading a choir and she sometimes gets lonesome as he is out a great deal in the evenings, but knowing how much music means to him she does not want to interfere.

As vis. was about to leave, Mrs. A. said that she would like to show her something. In the living-room above the piano was a beautiful portrait of Brahms. Mrs. A. said that she had done this for her husband and he had been so proud of it that he had asked her to do some of his other favorite composers.

Mrs. A. has been attending recreation class and said that she had enjoyed it very much. She likes the exercise and had enjoyed the weekly meetings with the women. She remarked, however, that she was not going in the display because she was still too self-conscious to do that type of thing.

Just as vis. was leaving, Mrs. A. commented on how much the service of the Agency had meant to their family. She wondered if she ever needed help again if she would be able to ask for vis., but vis. explained that she was working in another district this would not be possible but that Mrs. A. would get the same service from any member of the Agency. Mrs. A. said that she realized that but it would be a bit awkward having to explain everything all over again. Vis. realized then that the matter of records had never been discussed with Mrs. A. She explained to her how these records were kept as sometimes there was a change of worker, and went on to talk about how important they were in understanding the situation clearly. Mrs. A. accepted this very casually and commented that they would make it easier for families to go back if there was a record kept of what had happened.

"E. West"

APPENDIX E

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