

# The Sociopolitical Context and Social Work Method, 1890–1950

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This article explores the influence of the sociopolitical context on the development of social work practice methods during the first half of the twentieth century. It analyzes the relationship of the development of method in social work to such phenomena as the rise and fall of urban centers, the increasing diversity of the population, the growth of state power, and the rise of professionalism. It explores why social workers in the United States maintained a focus on clients' needs even as their counterparts in other industrialized nations created policies and practices that emphasized clients' rights.

The dramatic social and political transformations that occurred in the United States during the first half of the twentieth century influenced the development of direct practice social work theory and methods. The rise and fall of urban centers; the increasing class, racial, and ethnic diversity of the U.S. population; the growth of state power and its political consequences; and the development of an "ideology of professionalization" all shaped the focus, goals, and conceptualization of direct practice.<sup>1</sup> I attempt in this article, in part, to address the question of why social work maintained a focus on clients' needs even as other industrialized nations created welfare state policies and practices that emphasized common human rights.

Direct practice methods in social work emerged initially as part of a broader effort to "manage" the effects of urbanization within an industrializing economy. Assumptions underlying these methods, whatever their theoretical differences, largely reflected the class and cultural biases of their proponents. They were based on the belief that individual, rather than structural, causes were the source of most clients' problems; that

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“universalist” principles could be applied to all clients, without regard to their race, ethnicity, class, or gender; and that applying the specialized expertise of professionals inside or outside an agency context held the greatest likelihood of solving clients’ problems.

At the same time, the growing role of the state in the design and delivery of social services transformed the conception of social work itself, produced new clients for social workers, and promoted the development of practice methods to serve these new clients. Finally, the definition of “direct practice social work” evolved, as a result of the above factors, from a broad view of social work, which encompassed several methods of intervention, to a narrower one, which focuses primarily on work with individuals, families, and small groups.

### The Emergence of Urban America, 1890–1920

The enormous industrial expansion in the United States during the late nineteenth century led to an uneven pattern of regional economic and social development. This transformation, based primarily in urban manufacturing centers, was rapid and painful, and existing social institutions were incapable of responding to the growing social and economic stratification that ensued. In their effort to preserve the social order, most political and economic leaders downplayed the threat of social disruption resulting from mass unemployment, labor strife, and civic unrest and initiated efforts to create “a new order of instrumentalities to raise up the degraded class[es] of the city.”<sup>2</sup>

This “search for order” was targeted primarily at the nation’s burgeoning urban centers, safety valves for the surplus rural population and havens for the 23 million new immigrants who arrived between the Civil War and the outbreak of World War I.<sup>3</sup> By 1910, one-third of the population in each of the nation’s eight largest cities was foreign born. In New York and Chicago, immigrant families composed over 50 percent of the population, transforming neighborhoods, expanding the city’s boundaries, and altering the nature of urban life itself.<sup>4</sup> Within a few decades, population density in New York increased over 400 percent, surpassing London’s worst slums.

Living largely in squalid tenements, with scarce assets, few occupational skills, and little formal education, immigrant families typically earned between \$7 and \$15 per week in the most dangerous and labor-intensive occupations. African Americans earned much less and worked more hours. In 1910, barely one of every seven foreign-born families earned the U.S. “standard” of \$900 per year. Chronic unemployment and 12 major depressions between 1870 and 1915 exacerbated urban conditions, as did inadequate diets, occupational injury, and environmentally related illnesses such as tuberculosis. For many families, child labor and prostitution provided the only alternative to starvation.

Many reformers argued that urbanization had destroyed the social fabric and threatened the quality of U.S. civilization.<sup>5</sup> These concerns reflected longstanding antiurban and anti-European prejudices, particularly against Catholics and Jews, and produced "reform movements" that stemmed equally from consternation over the shift of political power to the non-Protestant masses and the possibility of literal or figurative "contagion" from epidemics of disease, crime, or political radicalism. Education and religious conversion were two major components of this reform strategy; the development of social service programs with educational or religious overtones was a third.<sup>6</sup>

The economic crisis of the 1890s, however, stimulated a reappraisal of prevailing approaches to the "Social Question." Old-style charity, designed to enforce the work ethic and based on a personal relationship between benefactor and recipient, appeared to have little effect on the "new poor," whose poverty was largely the product of environmental conditions, mental instability, or racial and cultural differences. As an alternative, both defenders and critics of the status quo embraced technology as the means to harness the forces of change and social disruption.<sup>7</sup> Integrating a technological approach enabled reformers to gain the support of political and economic elites who were similarly applying technology to industrial and political processes in order to strengthen their control over the direction of society. The growth of public and private social welfare and the different methods of social work practice that emerged within them, therefore, must be seen as only one facet of a larger societal response to industrialization and urban unrest. This included the establishment of state militias, the creation and expansion of large urban police forces, the construction of armories in urban neighborhoods, the spread of religiously based social services (such as the Salvation Army), and the use of public education as a tool of socialization.<sup>8</sup>

### Progressivism and Social Work Methods

Some reformers of the Progressive Era (1890–1920) focused on specific improvements in housing, public welfare, public health, and education; others emphasized shaping public opinion and promoting cooperation among social classes. Most promoted the idea of a "community of interest" to counter the growth of class antagonisms.<sup>9</sup> Given the social background of its proponents, it is not surprising that this community of interest encompassed many of the values of the dominant culture. These included a focus on individual achievement and self-help, the assimilation of immigrants into American culture (with its inherent universalistic assumptions about what constituted "need" and "helping"), and the importance of education as the basis for expanding economic opportunity. Given the self-interest of even the most altruistic reformers, it is also not surprising that proposed solutions to the problems of industrialization

and urbanization required the involvement of specialists and professionals like themselves.<sup>10</sup> The social policies that emerged from this web of contradictions (between 1900 and 1930) were characterized by a focus on dependent populations (such as widows and children), their limited scope, state initiation and control, and the emerging acceptance of social insurance, all of which later formed the basis of the Social Security Act.

By the end of World War I, it was clear that although the vague goals of Progressivism had ultimately failed, many of its underlying motives had been achieved. Although African Americans continued to be economically and socially marginalized, immigrants in the nation's cities were assimilated into the economic mainstream without elites having to share the bulk of economic and political power that these cities possessed. Domestic radicalism was suppressed, and foreign radical influences were discredited. Business was able to direct government intervention toward its own ends. In addition, the era's modest social reforms preserved the dominant values of American culture, particularly individualism and the primacy of the marketplace.

Many of the recipients of the new programs and services created by these reforms, particularly poor Jews, Catholics, African Americans, and Asian Americans, regarded the new institutional forms and methods of helping as alien. They preferred self-help or mutual aid organizations, such as the Irish Emigrant Society, the Hebrew Benevolent Society, and the White Rose Home for Girls. Despite their limited resources, voluntary sectarian and self-help organizations provided the majority of social services to such populations throughout the late nineteenth century. In addition to concrete services such as employment counseling, material relief, education, and social supports, these agencies also served as institutional means to resist the explicit and implicit attack on immigrant culture and urban populations by dominant cultural institutions such as public schools, child welfare agencies, Charity Organization Societies (COS), churches, and, to a lesser extent, settlement houses.

During the so-called Progressive Era, therefore, modern U.S. social policies and social work methods emerged in response to two conflicting factors: the desire of elites to control urban populations and problems as a means to ensure stable, long-term economic growth, and the efforts of reformers, organized workers, intellectuals, nascent professionals, and social service clients to institute structural reforms in the economy and political system. These developments were reflected as well in the emergence of social work as a formalized method of social intervention.

### Toward *Social Diagnosis*

The transformation of social work from a largely volunteer enterprise, whose "practitioners" needed (it was believed) little more than good character and good intentions, to one dominated by paid staff with spe-

cialized expertise began in the late 1890s. In the aftermath of the Panic of 1893, social work leaders bemoaned the lack of well-trained colleagues and pushed for training programs, better salaries, and a clearer definition of the purpose and methods of social work practice.<sup>11</sup> Ironically, many potential sponsors of social work resisted efforts to make charity work more scientific out of a concern that professional social work would lose the moral attributes of old-style charity.

Although many social workers contributed to the development of method within the COS, Mary Richmond of the Baltimore, Philadelphia, and New York COS and Amos Warner, a professor of economics at Stanford University, played the most influential roles. Warner's book *American Charities* distinguished charity work from philanthropic benevolence and provided an intellectual justification for the development of social work methods.<sup>12</sup> Richmond focused on the need to specify the knowledge base and techniques that distinguished trained social workers from well-meaning volunteers and to identify common skills that social workers in all fields could use.<sup>13</sup>

Richmond's promotion of standardization and efficiency echoed the writings of Homer Folks, a leader in the public welfare and child welfare fields.<sup>14</sup> Such standardization required a model for social workers. Although some looked to the social scientist, especially in the fields of applied sociology and applied psychology, most preferred the model of the physician. They argued that the function of the caseworker was rehabilitation and that, because diagnosis and treatment went hand in hand with rehabilitation, a good caseworker needed to emulate the skills of a good doctor.<sup>15</sup>

To help develop and promote the casework method, in 1904 Richmond began to draft what became her classic, *Social Diagnosis*. She attempted to integrate old and new views of charity in a method that conformed to prevailing cultural attitudes about the importance of science, efficiency, and, above all, systematic technique.<sup>16</sup> This effort encountered several serious problems.

One problem concerned the contradiction between developing a method that recognized that casework was practiced through agencies while professional status (as in the case of the physician) was distributed on the basis of individual credentials and accomplishments. A related problem was how to merge the old and new views of charity without upsetting the balance between individual charitable impulse and collective organizational effort. Another peril was the difficulty of demonstrating both specific knowledge of social conditions and the skills required to correct them. A fourth problem resulted from the difficulty of reconciling social work's historic emphasis on individual betterment with the growing sentiment that social work's purpose was to promote the common good. Ten years before the publication of *Social Diagnosis*, Edward Devine suggested a possible solution to this dilemma: "Has the time

already come for psychological diagnosis, for the study and treatment of character in adversity?"<sup>17</sup>

Despite her status in the charity organization field, it was some time before Richmond's views about casework methods dominated the emerging profession. Many social workers, both inside and outside the COS, including Jane Addams, criticized her work on both ideological and practical grounds. Because of the fluid nature of the profession in the early twentieth century, the diverse experiences of social workers and their increasingly diverse backgrounds resulted in different interpretations of the plight of their clients and different ways of addressing it. For example, in her memoirs, Gertrude Vaile describes the trial-and-error approach most social workers adapted during this period.<sup>18</sup> Simply put, a charity worker's view of direct practice emerged from the daily vicissitudes of her experience rather than from a coherent conceptual framework. The voluntary nature of most charitable work contributed to the greater significance attached to experience over expertise.

By 1912, however, professional caseworkers had virtually replaced volunteers in the COS, and casework, focused now on families rather than individuals, became integral to the charity organization program.<sup>19</sup> Although Richmond continued to stress the separation of relief from treatment, she proposed a definition of casework sufficiently broad to encompass both the private and public welfare functions that she foresaw the COS fulfilling to a greater extent in the future. Her turn toward the psychological aspects of individuals offered caseworkers the opportunity to synthesize old and new charitable views and retain an emphasis on one-to-one relationships within an agency context.

The genius of *Social Diagnosis* was that it codified the activities of caseworkers previously interpreted as "investigation" and redefined them as "diagnosis." Richmond thus transformed subjective casework behavior into an objective (i.e., scientific) collection and assessment of evidence and linked it with processes managed by scientists, attorneys, and physicians. A rational-scientific framework applicable to all social work practice through the still-popular "study-diagnosis-treatment" trilogy replaced the negative moralism associated with casework. Under the influence of Richmond's work, leading casework agencies shifted their primary functions from relief giving to family treatment. Schools of social work would soon adopt Richmond's book as a standard text for practice courses.<sup>20</sup>

## Settlement Work and Social Work Method

During these years, settlement house workers were somewhat more sensitive to the importance of class and cultural issues than their counterparts in the COS. Founded as secular missions in the late 1880s and 1890s, they attempted to create an institutionalized form of self-help for the urban

poor that sought to meet immigrants' economic and social needs while socializing them into the new industrial order. Some settlement leaders, such as Florence Kelley and Lillian Wald, also pushed for structural changes in society through collaboration with trade unions and radical political groups and the creation of advocacy organizations like the National Consumers League. Although they often reflected the paternalism of their class origins, by focusing on the relationship between economic and social change and the needs of urban families, settlement house leaders laid the foundation for the limited U.S. welfare state that first emerged in the 1930s.<sup>21</sup>

Although settlements borrowed as much as the COS from emerging corporate and scientific techniques, fundamental distinctions in method appeared early in their development. Settlement methods attempted a synthesis of religious and secular thought, particularly through the influence of Lester Ward and John Dewey in sociology and education, respectively. From Ward, they derived their major focus on the environment as a causal factor in human behavior; from Dewey, they extracted an emphasis on the ability of applied intelligence to transform society and on the social responsibility of intellectuals to apply themselves to that transformation.<sup>22</sup>

Settlement work combined the scientific method's emphasis on explanation and prediction with the corporate enterprise's focus on efficiency. Yet, settlement workers had difficulty translating broad social goals into a comprehensive, unified method of practice. Moreover, the dual role that settlements professed—to broaden the educational and cultural opportunities of the poor and to promote a broader conception of democracy in U.S. society—did not lend itself easily to a distinct conception of method. In fact, settlement workers viewed “social work,” which they conceived largely in terms of organized clubs and classes for immigrants, as only one aspect of their total endeavor.<sup>23</sup>

Because there was no consensus among settlement workers as to what should constitute their practical program or methods, three approaches appeared within such agencies. One emphasized the delivery of concrete services as a temporary solution to social problems that economic growth would eventually correct. A second approach expanded this notion to include advocacy on behalf of low-income children and families. The third, and most radical, approach viewed the settlement as a vehicle for radical reform. All three approaches relied heavily on the use of groups as vehicles of education, socialization, and social action. To a considerable extent, therefore, each approach contained the basic elements of what would later appear as social group work.<sup>24</sup>

Although this diverse emphasis enabled the settlements to acquire elite support for their proposals, it abounded in contradictions, which were reflected in the programs settlement workers created. These programs tried to provide services and to restructure existing institutions

while preserving class and race-based ideals and prejudices. They sought to establish an alternative sense of justice and democracy through the support and sponsorship of the very classes that benefited most from maintaining the status quo. These contradictions profoundly affected the future of social work within the U.S. welfare state.

By the second decade of the twentieth century, however, settlement houses also began to focus increased attention on developing educational and recreational activities for the physical and intellectual betterment of the working classes. In addition to ideological and class-based motives for this shift, the growth of organized recreation offered settlements the opportunity to define a unique aspect of their work in a manner that was politically acceptable to elite sponsors and consistent with their established interest in promoting education and culture.<sup>25</sup>

### Community Organization as a Social Work Method—I

In addition to developments in the fields of social casework and settlement-house-based group work, early social work practitioners of what is now termed "community organization," such as Addams, Kelley, and Wald, played a leading role in expanding the concept developed by Richmond of person-in-environment to encompass a perspective of community-in-society. Community organization within social work, however, emerged less as a specific method than as a means by which social service providers could develop programs within a given community and mobilize the resources needed to support and sustain them. Although early proponents of community organization, such as Mary Parker Follett and Eduard Lindeman, connected such work with the expansion of democratic principles into community life, and others, such as Kelley and Addams, identified community organization as an aspect of social reform, by the 1920s, "community organization had barely emerged as a cause before it had become a function absorbed into the administrative structure of social work."<sup>26</sup>

This absorption exacerbated the problem of defining community organization theory and methods that had already emerged because of the blurred distinctions between community organizing and the broader arena of politics, and between the full-time, paid organizing efforts of social workers and the part-time, voluntary efforts of their colleagues. The growing pressure to conceptualize social work practice within a theoretical framework that reflected a clear, scientifically based method also exacerbated the problem. Each of these factors was closely tied to the growing professionalizing impulse within social work, itself a consequence of the changing social structure and the changing role of the state in responding to individual and social problems.<sup>27</sup> Throughout the formative years of the social work profession, efforts to clarify the nature of community organization practice within social work confronted a basic con-

tradition: the more it strove to make itself professional, the harder it became to integrate broader societal efforts and social change into its daily activities. The more it integrated such efforts, the harder it became to identify its distinctive professional base.<sup>28</sup>

### The Retreat from Progressivism and Its Consequences

By the outbreak of World War I, the broad Progressive consensus began to disintegrate. Several factors accounted for these divisions. One was the increasingly conservative political and cultural environment of the post-war era, a reaction to the revolutionary events in Europe at the end of the war and the dominance of corporate values in a society increasingly driven by an ethos of consumption. A second factor was the recognition that the United States was irreversibly becoming an urban mass society, a social by-product of structural changes in the economy. This realization undermined one of the operative myths of progressivism: that the judicious use of science and education could somehow re-create the characteristics of a preindustrial “organic community.” A third factor was the growth of professionalization among social service workers, who sought to distinguish their work with a broad range of clients in private agencies from that of their counterparts in the public sector who worked exclusively with the poor.<sup>29</sup>

When the war ended, about half of the population lived in cities (nearly double the proportion in 1870). As much as they were resented and feared, cities had become the centers of business, government, entertainment, education, literature, and the arts. An “urban mentality” and way of life diffused throughout society, accelerated by the advent of the automobile, radio, motion pictures, advertising, and the popular press. Yet the nation never embraced cities as “national treasures” in the same way that European countries did. Consequently, cities were provided with government aid and philanthropists funded urban social services only as long as they served the economic interest of the nation’s elite and only as long as pacifying restless urban populations was regarded as necessary for the stability and legitimacy of U.S. political and economic institutions.<sup>30</sup>

The transformations wrought by industrialization, immigration, and urbanization penetrated every aspect of U.S. life in an interdependent, self-generating cycle of development and change. The concentration of capital in major manufacturing centers accompanied the nation’s rapid economic growth, as did major changes in demographics and social relations. By 1930, the United States was 56 percent urban. This resulted from three demographic trends: 75 percent of immigrants stayed in cities; the migration of African Americans from the rural South to the North increased their numbers in urban areas by 50 percent between 1900 and 1930; and the agricultural depression of the 1920s forced six

million people from farms to the cities. These demographic shifts had profound social repercussions, especially on urban families and the social service agencies that addressed their needs.

Under the influence of a powerful, urban-based capitalistic economy, the family became less a cohesive unit of social support for its members and more a consumer of goods and services and a means of reproducing workers and consumers. Consequently, more women entered the workforce, and both divorce and desertion rates increased. Such changes forged a consensus among business and professional elites that U.S. society needed an enlightened response to the widespread disruptions caused by industrialization, particularly in urban areas. Between World War I and the Great Depression, therefore, Americans struggled to cope with relentless industrial growth and its concomitant effects on social life. It was particularly the changes in urban life that captured the attention of elites and roused them to action.

Despite the optimism of the prosperous postwar years, the incidence of poverty remained high. Wage earners' share of the net product of manufacturing had actually declined in the first decades of the twentieth century. In 1929, just before the stock market crash and the onset of the Depression, nearly two-thirds of American families had incomes lower than the "American Standard" of \$2,400 per year. According to 1929 studies by the Washington-based Brookings Institution and University of Illinois economist Paul Douglas, over 16 million families earned incomes below the minimal level of health and decency. Unemployment in certain sectors of the economy was in double digits.

Even prior to the onset of the Great Depression, the lack of income security, health care, and adequate housing plagued workers in older industries such as railroads and textiles, and African Americans, the elderly, and new immigrants continued to experience economic vulnerability. The period, therefore, was characterized by four major and inter-related themes that influenced the direction of social policies and practice methods in social work: a climate of cultural and political repression; the legitimization of business-government partnerships that served the interests of corporate and political elites; welfare capitalism and the belief in managerial and technical expertise as the means to achieve it; and the uninhibited construction of a consumer society.<sup>31</sup> (By 1929, consumer debt had reached approximately \$7 billion.)

These forces led to such developments in the field of social welfare as the repeal of progressive taxes on income, inheritance, and profits; the deregulation of industries; attacks on urban-based labor unions as "un-American"; the reduction or elimination of limited federal social welfare programs that had passed in the previous decade; and the neglect of the growing problems of poverty among the unemployed and elderly. "Welfare capitalism," in the form of company unions and other employee benefit packages, further undermined organized labor and proponents

of government intervention in social welfare. It effectively promoted the image of the socially responsible corporation whose profits were linked to American progress and well-being. Although a majority of industrial workers—who were highly concentrated in urban areas—were not covered by such programs, their existence lent credibility to the assertions of corporate leaders that both organized labor and a system of federal social protections were unnecessary.

Corporate methods and values also influenced the nature of private philanthropy during this period, particularly the growth of Community Chests, the precursors to today's United Way organizations.<sup>32</sup> Aided by the mobilization of War Chests during World War I, and fostered by the phenomenal growth of mass production industries and mass communication, the prominence of giant corporate monopolies, and a rise in the standard of living, the number of community federations increased from 18 to 330 between 1918 and 1929. They reached into virtually every city with over 100,000 residents. This movement abetted the decline in social reform in the settlements as previously independent agencies surrendered their autonomy to centralized decision-making and resource allocation processes.<sup>33</sup> At the same time, the growing emphasis on individualism and consumption in an age of increasing personal anxiety among the middle class promoted what was later called "social work practice above the poverty line."

## The Emergence of Psychiatric Social Work

Given the political and cultural climate of the postwar era, it is not surprising that the introduction of psychiatric theories to social workers (the first course on psychiatry was taught at Smith College in the summer of 1919 by E. E. Southard and Mary Jarrett) met with considerable excitement.<sup>34</sup> Freudian theories of unconscious human motivation as the explanation for individual behavior provided a viable intellectual alternative to social workers who were frustrated by the pace and progress of efforts at structural reform. Pragmatic considerations played a role as well. The emergence of psychiatric social work in the 1920s was as much a product of the war, the initial work of the Red Cross in the Home Service and in public health hospitals, and the work of the Veterans' Administration after World War I as it was of the intellectual allure of exciting new insights into the human condition. Medical-psychiatric knowledge gave social workers entry into new client "markets" and higher status.

Throughout the 1920s, building on the formulations developed by Richmond, social workers expanded their practice methods to include concepts derived from psychology and psychoanalysis. Child guidance clinics and mental health agencies played a leading role in disseminating and implementing these ideas. Yet in the 1920s, neither social work theory nor practice was dominated by psychoanalytic theory. Rather, there

is evidence of a wide discrepancy between the excitement with which a small group of social work leaders espoused psychodynamic theory and the actual practice of caseworkers in social service agencies.<sup>35</sup>

In addition, despite their intellectual attraction to Freudian theory, some social workers, such as Bertha Reynolds, the associate director of the Smith College School for Social Work, had difficulty embracing the disease model of practice inherent in psychoanalytic techniques. Because of her humanitarian concerns and belief in the need for social reform, Reynolds's emphasis remained on the psychological adjustment, not the cure, of mental patients. With some variations, this orientation was reflected later in the 1930s by the "functional school" at the University of Pennsylvania. This approach to practice, developed primarily by Jesse Taft and Virginia Robinson, regarded the core of social work as the establishment of a helping process in which worker, client, and agency all played key roles, rather than focusing largely on the worker's expertise and the outcome of the worker's intervention. In fact, Reynolds met regularly with Taft and Robinson to discuss the theories of Freud and Otto Rank and their relationship to social work methods.<sup>36</sup>

As psychiatric models of social work practice gained popularity during the 1920s, it became apparent that radical formulations of practice had no place in professional social work.<sup>37</sup> With declining institutional support, practitioners of community organization struggled to define a unique method compatible with both social reform and social casework. Only in Chicago and New York, where charismatic leaders could attract independent financial support and the community chests did not take root until the 1930s, were some reform activities sustained. Elsewhere, social activism in the settlements evolved into the delivery of social group work services, which stressed the use of groups as a medium of socialization (largely for European immigrant populations) and social treatment. Once casework became the dominant method within the profession, it became extremely difficult for practitioners historically identified with social work to introduce and receive societal sanction for social work methods that diverged significantly from the theory and practice of casework. The 1929 Milford Conference and Porter Lee's famous presidential remarks to the 1929 National Conference of Social Work ("Social Work as Cause and Function") appeared to confirm the dominance of casework methods within the social work profession. Economic and political developments unforeseen in April 1929, however, soon shook the foundations of social work methods.

### The New Deal and the Growth of State Power

Prior to the Great Depression, U.S. society reflected a relatively crude, industrial, laissez-faire capitalism with minimal social protections for its citizens. For both ideological and economic reasons, political leaders

were reluctant to use state power to address increasingly complex social problems. Between 1930 and 1950, the United States created a modest version of the welfare state in a painful and socially wrenching process. Only the combined traumas of economic collapse and global war, however, shook the nation from its reverie. Yet, by 1950, economic prosperity (produced, ironically, by government intervention) was already subtly beginning to undermine the future of U.S. social welfare and shape the development of social work practice methods for the rest of the century.

The exigencies of the Depression shifted social work practice from the private to the public sector, creating a huge social service industry. There were two significant consequences of this transformation for the future of direct practice social work: models of practice were created through which a casework approach could be adapted to public-sector agencies, and new practice theories were developed for the growing field of private, family service agencies. The former led to the modification of civil service requirements for caseworkers, supervisors, and administrators of government relief and social service agencies to enable them to absorb new "untrained" workers. The latter led to the well-known split between the "diagnostic" (Freudian) and "functional" (Rankian) schools, that is the New York and Pennsylvania Schools, respectively.

Despite the widespread economic and social impact of the Depression, most social workers did not share a commitment to social action. Nor did they recognize the relationship between efforts to promote social reform and the effectiveness of their daily practice. Some social workers, however, such as Reynolds, Mary Van Kleeck, and others in the Rank and File Movement, attempted to synthesize the work of Freud, Rank, and Marx into a coherent practice framework and to reconcile structural change goals with casework theory and methods. This involved efforts to "individualize a program planned for the average or the mass" and to "serve [public agency] clients with the same dignity and mutual respect as [provided to clients] in . . . private [agencies]." 48

### The Influence of Bertha Capen Reynolds

As early as 1924, Reynolds drew attention to this issue in her focus on the largely unacknowledged power differential that existed in the worker-client relationship at the heart of the medical model, which was growing in popularity as a consequence of psychiatry's influence on social work. In the 1930s, Reynolds broke with her colleagues in the casework field on two fronts: the relative importance of the external and internal environment of clients, and the nature of the worker-client relationship.

She asserted that the challenge for social workers was to understand and apply the helping relationship as a way to enable the client to build on personal strengths and resources and solve personal problems as the client defined them. This required an egalitarian relationship, based on

mutuality rather than professional expertise and dominance. It implied that the exclusive orientation of direct practice should be toward the satisfaction of the client's needs and not to establish or maintain the worker's or agency's authority. This perspective contrasted markedly with the bureaucratic imperatives of direct practice in public welfare agencies, the "medical model" that lay at the heart of the Freudian-dominated diagnostic school, and, to a lesser extent, with the assumptions regarding the benevolent role of the agency at the core of the functional model.<sup>39</sup>

This view of casework focused on prevention and education, rather than cure. It complemented some of the humanistic ideas of social responsibility emphasized within the group work field at this time. The American Association of Group Workers, for example, had defined group work as "a method of group leadership used in organizing and conducting various types of group activities . . . [which] rests upon the common assumptions of a democratic society; namely, the opportunity for each individual to fulfill his capacities in freedom, to respect and appreciate others and to assume his social responsibility in maintaining and constantly improving our democratic society."<sup>40</sup> Reynolds's view of casework also encompassed a conceptualization of human behavior as "a functional adaptive response to the complex system within which the individual and the social environment interacted."<sup>41</sup> With remarkable prescience, she warned of the potentially coercive effect on clients of linking social services and income maintenance in public agencies and of the risks to client well-being of giving such agencies too much power over peoples' lives. Throughout her long career, she continued to emphasize practice principles that have a thoroughly modern ring: a recognition of the interdependence of people, the connection between socioeconomic conditions and psychosocial problems, and the importance of building responsibility for social reform and institutional change into the helping process itself.<sup>42</sup> Reynolds's later work organizing services for merchant seamen in the National Maritime Union (NMU) reflected the fundamental democratic principles that guided her entire career. The structure of social services in the NMU reflected the ideology and practice of the union's radical politics.

## Community Organization as a Social Work Method—II

During this period, community organization had difficulty gaining acceptance as a distinct practice method, largely for economic and political, rather than theoretical, reasons. In fact, many conceptualizations of social casework, beginning with Richmond, recognized the connection between personal problems and public issues: the minimum curriculum adopted by the American Association of Schools of Social Work in December 1932 continued to regard community organizing skills as important. It was not until the end of the 1930s, however, that commu-

nity organization as a practice method began to be articulated clearly. This occurred in the Lane Report at the 1939 National Conference of Social Work.

This document defined community organization as a process of social work whose aim is “to bring about and maintain a progressively more effective adjustment between social welfare resources and social welfare needs.”<sup>13</sup> It clearly attempted to compare community organization as a method with casework and group work while simultaneously promoting the expansion of social welfare services. Postwar trends in community organization continued in the same vein. Theorists of community organization, such as Kenneth Pray, director of the University of Pennsylvania School of Social Work, stressed the importance of the helping process in the context of a democratic philosophy, echoing many of the views of group work theorists of the period.<sup>14</sup>

These efforts to “mainstream” community organization as a social work method culminated in 1955 in the work of Murray Ross. Ross deliberately placed community organization within a problem-solving treatment framework and the study-diagnosis-treatment models that by the early 1950s had become prevalent in casework.<sup>15</sup> In addition, Ross removed community organization from its agency context, paralleling a trend that had emerged since the late 1940s in the literature of social work practice with individuals and families. This trend emerged as a result of rapid social and political changes in the immediate postwar years.

### The Growth of Suburbs, McCarthyism, and the Still-Born Welfare State

The dramatic U.S. economic expansion after World War II changed the character of American capitalism and American cities and altered the development of welfare state policies introduced in the 1930s. The formation of multinational corporations, the growing role of state intervention in the economy on behalf of these corporations, the expansion of the military industrial complex, the spread of consumerism, and the initial emergence of a postindustrial, information-based economy all began to diminish the significance of cities as engines of economic prosperity. In other words, the social relations that were beneficial and necessary for prior economic expansion became dysfunctional. The well-being of urban populations (or at least the absence of discontent among them)—a critical component of those social relations—no longer was as central a concern to those who developed social policies.<sup>16</sup>

Although U.S. urbanization continued at a rapid pace during the postwar years, the growth of suburbs, the changing cultural and demographic patterns that ensued, the social isolation of low-income communities produced by urban renewal projects, and the impression of widespread

national prosperity fostered by the media, particularly television, worked in tandem to increase the "invisibility of the poor."<sup>47</sup> In combination with the repressive political climate brought on by the Cold War and McCarthyism, this increasing invisibility led to a decline in social activism and social reform movements on behalf of urban populations in crisis. It also fostered the emergence of openly antiwelfare attitudes among politicians. Social policy advances of this period, such as the expansion of Social Security and the growth of private family service and mental health agencies, therefore, largely aided middle-income persons. Nevertheless, the perception grew that a preponderance of tax dollars was being spent on increasing numbers of "undeserving" welfare recipients in the cities. This resentment of the urban poor resulted from a shift in the racial composition of welfare recipients.<sup>48</sup>

### The Transformation of Social Group Work

Social work practice methods with individuals and families, however, underwent little alteration in the years immediately after World War II. Their emphasis on individual and family adjustment instead of social change complemented and even reinforced prevailing social and cultural goals.<sup>49</sup> The increasingly conservative political climate had a particularly strong effect on social group work, however, which had focused its theories and methods since the 1930s on a synthesis of humanism, equality, democracy, and social action. In the 1930s and 1940s, these philosophical underpinnings of group work practice were strengthened by the influence of Jewish refugees from Eastern and Central Europe, such as Gisela Konopka and Hans Falck, who held strong, humanistic beliefs in the rights of group members and a passion for democratic participation.<sup>50</sup>

The widespread perception of group work theory and method during the immediate postwar period was that it played a leading role in promoting the acceptance of the "democratic premise within social work" but was weak in developing a clear, unified method or theory of practice. Group workers and caseworkers, therefore, continued to struggle to find common ground, a struggle that had begun in the previous decade. Despite the lower status of group work from a theoretical perspective, group workers occupied a disproportionate percentage of leadership roles in the profession, probably as a result of their activist orientation.<sup>51</sup>

Building on the work of Grace Coyle, Gertrude Wilson, and others, and borrowing from the earlier essays of Reynolds, group workers stressed the importance of mutual aid activities within communities and social service organizations.<sup>52</sup> Coyle viewed group work as an instrument of social transformation, asserting that its primary goal was to "help in the replacing of the social skills necessary in the present distracted state of the world." Wilson regarded group work as a critical part of the effort "to achieve a society where each individual has equal rights . . . and an

opportunity to participate in decision making."<sup>53</sup> Their writings reflected the long-held conception of group work as "education for democracy through democracy in slow and gradual stages."<sup>54</sup>

By the mid-1950s, however, the primary emphasis of group work had shifted toward "enabling" clients and the therapeutic function of groups, although individuals such as Coyle and Wilson continued to stress the importance of social objectives.<sup>55</sup> Others wrote of the need to preserve group work's sense of moral values and concern for democracy, even as it strove to create a more scientific basis for its practice.<sup>56</sup>

Group work came to be regarded as "part of an inclusive direct services, treatment, or clinical social work practice methods" approach, instead of a distinct and separate method of intervention as it had since the 1930s.<sup>57</sup> Harleigh Trecker argued that the key to group work's survival lay in creating closer theoretical and practical links to social work as a whole, in clarifying the role of the group worker in various practice settings, in recruiting more students into group work, and in helping shape the public's perception of group work services. This would require "a more realistic approach to the use of group work" and a reexamination of group work's connection to settlement houses and the public social services.<sup>58</sup> At the end of the decade, William Schwartz echoed this sentiment with a new interpretation of the group work function and a suggested merger of group work into the larger social work profession and generic social work methods.<sup>59</sup>

### Common Needs Instead of Common Rights

Many social, political, and cultural factors account for the development of theory and method in social work practice in the first half of the twentieth century. I have touched briefly on only some of them. Perhaps the greatest contingency shaping social work throughout its history has been that its traditional clientele (low-income, disadvantaged populations) lacked the resources to purchase social work services, unlike many of the consumers of medical and legal services. Social work, therefore, was unusually dependent on private and corporate philanthropy and government support. Consequently, social work practice prior to 1950 (when private practice began to appear) emerged largely in an agency context, although some of its theoretical orientations (e.g., the diagnostic school) lent themselves to a model of the independent social work practitioner. This feature made social workers especially vulnerable to expectations for ideological and behavioral conformity from financial and political sponsors.<sup>60</sup>

Before 1920, social work methods included the provision of relief, casework services, and social reform activities (community organizing) in roughly equal proportions. By the end of the 1920s, this parity had disappeared. Casework—which came to include psychiatric social work, medical social work, and more recently, "clinical practice" and

psychotherapy—was established as the major method of social work and the cornerstone of the profession. This occurred because of casework's ability to expand the market for its "product" to include the burgeoning middle-income population, because of its ideological compatibility with American individualism, and because of the ability of caseworkers to define their methods to conform to the emerging American ideal of professionalism.<sup>61</sup>

The genius of Richmond's *Social Diagnosis* and *What is Social Casework?* as well as the later work of the leaders of the diagnostic and functional schools that followed in the 1920s and 1930s, was the redefinition of traditional charitable investigation as diagnosis and the link of social work practice to the medical profession and scientific methodology. The growth of psychiatric services to middle-income soldiers and their families after World War I created an immense new market for professionally trained caseworkers in private agencies, public and private hospitals, and psychiatric clinics and facilitated the introduction of psychoanalytic theory and methods into social work.

During the 1930s and 1940s, social workers shaped their practice methods to fit their professional self-interest, even as they advocated for the expansion of social services in the public interest. Ironically, social work benefited from the Depression, which produced the expansion of public-sector social services and the economic recovery that followed. Both provided social workers with the opportunity to refine direct practice methods in private-sector agencies and to expand their clientele beyond low-income relief recipients.

Casework theories and methods that had been fashioned in voluntary agencies, therefore, dominated social work practice during these decades, built around a counseling function instead of a relief distribution function, that is, an emphasis on needs, rather than rights. As public welfare expanded and became a permanent feature of the institutional landscape, counseling methods had to be adapted to the provision of relief. Yet, the continued dominance of the private agency casework ideal, even within the public sector, perpetuated the view that the practice methods that had evolved in private-sector agencies were somehow superior and that individual treatment, rather than environmental reform, had both higher status and priority within the social work profession. This failure to recognize the essential mutuality between satisfying common human needs through daily practice of social work and establishing common human rights through social reform continues to haunt the profession to this day.

## Notes

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